

Minutes of Regional Health Forum West meeting held on Tuesday, 24th November 2020 at 1.00pm by Zoom.

Miontuairiscí chruinniú an Fhóiraim Sláinte Réigiúnaigh a tionóladh Dé Máirt, 24 Samhain 2020 ag
1.00in trí súmáil isteach

Chairperson: Cllr John Carroll

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

In attendance:

Tony Canavan, Executive Lead, Regional Health Forum/CEO, Saolta University Health Care Group

Ann Cosgrove, Chief Operating Officer, Saolta University Health Care Group

Breda Crehan-Roche, Chief Officer, Community Healthcare West

Joe Hoare, Assistant National Director of Estates (West)

Maurice Hoare, Disability Service, CH Midwest

John Hayes, Chief Officer, CHO, Area 1

Noreen Spillane, COO, UL Hospitals Group

Norah Owens, Regional Health Forum Office

Marian Cavanagh, Regional Health Forum Office

Anna Lyons, Regional Health Forum Office

750/91/20 Minutes of previous meeting – 22nd September, 2020

The minutes of the previous meeting held on the 22nd September 2020 were proposed by Cllr Tony Ward and seconded by Cllr Cillian Murphy and adopted.

751/91/20 Matters Arising:

752/91/20 Chairman's Business:

753/91/20 Update on COVID-19

Tony Canavan, CEO, Saolta University Health Care Group gave an update to the members on COVID 19.

754/91/20 Questions:

W91Q2797: Diabetes Posts Clinics in UL Hospitals Group

Cllr Cillian Murphy requested more details on the diabetic staffing at UL Hospitals Group.

Action: Noreen Spillane to revert to Cllr Murphy regarding the additional posts for the diabetic service in UL Hospitals Group.

W91Q2798: Ambulance response times in the West Clare Municipal District

Action: Bill Forbes to contact Cllr Cillian Murphy regarding the Ambulance Services in the West Clare Municipal district.

W91Q2799: HSE Capital Plan 2021

Cllr Donagh Killilea requested a copy of the HSE Capital Plan 2021.

Action: Joe Hoare to provide Cllr Killilea with the HSE Capital Plan for 2021 once finalised.

W91Q2802 & W91Q2860: BreastCheck Screening Service

RHF Members requested a presentation on the National Screening Service for a future Committee Meeting.

Action: RHF office to make contact with the National Screening Services and request a presentation.

W91Q2809 & W91Q2810: Home Help in Galway

Cllr Declan McDonnell requested the Home Help waiting list figures for Galway City only and information on the hiring of Carers for home support schemes.

Action: Breda Crehan-Roche to revert to Cllr McDonnell with the Home Help waiting list figures and information on the hiring of Carers for Home Support Services in Galway City.

W91Q2817: Podiatry Services in Inishowen

Cllr Doherty requested a copy of the audit which is being carried out on the Podiatry clinics across Donegal.

Action: John Hayes to revert to Cllr Doherty with the result of this audit.

W91Q2825: Update on 50 bed unit for Sacred Heart Home Roscommon

Cllr Tony Ward requested an update when the architect has been appointed.

Action: Joe Hoare to provide an update to Cllr Ward following the appointment of the architect.

W91Q2829: Private Health Insurance Companies

Action: Ann Cosgrove to provide Cllr Bree with the periods for outstanding fees for private health insurance companies for the hospital sites.

W91Q2838: Update on Screening Programmes

Action: RHF Office to provide Cllr Mulvey with the response to the National Screening Service question as soon as it becomes available.

W91Q2843: Deaths by suicide figures

Cllr Donal Gilroy requested the National Suicide figures for April, May and June 2020.

Action: John Meehan to provide the indicative figure to Cllr Donal Gilroy.

W91Q2844: ViraPro Hand Sanitiser

Cllr Albert Doherty requested to be briefed on any update with regards to this matter.

Action: RHF to follow up with Procurement

W91Q2845: GP Replacement for Kilconnell Health Centre

Cllr Evelyn Francis Parsons requested further information regarding the GP replacement post in Kilconnell.

Action: Breda Crehan-Roche to revert to Cllr Parsons regarding the GP replacement post in Kilconnell.

W91Q2855: How many screening appointments cancelled due to COVID 19

Action: RHF Office to provide Cllr John Connolly with the response from the National Screening Service to this question as soon as it becomes available.

W91Q2861: Update on the junction at Ballymote new nursing facility

Action: John Hayes to revert to Cllr D Mulvey to confirm if the feasibility study was sent to Sligo Co Co

W91Q2862: Vaping in Ireland

Action: Tobacco Free Ireland to provide Cllr Doherty with the response to this question as soon as it becomes available.

755/91/20 AOB:

The schedule of meetings for 2021 was ratified, proposed by Cllr Gerry McMonagle and seconded by Cllr Tony Ward.

756/91/20 Date & Time of Next Meeting:

The next **Regional Health Forum Committee** Meeting will take place on Tuesday 15th December at 1pm virtually.

The next **Regional Health Forum** meeting will take place on Tuesday 23rd February 2021 at 2pm, the format of which will be advised to the members at the next meeting.

This concluded the business of the meeting.

Signed:

Cathaoirleach/Chairman

Adopted at the Regional Health Forum West meeting

QUESTIONS AND RESPONSES

REGIONAL HEALTH FORUM WEST – 23rd FEBRUARY 2021

| Number: | QUESTION | RAISED BY | PAGE No. |
|----------|--|-------------------|----------|
| W92Q2863 | Lactation Consultant services in GUH | ClIr M OConnor | 4 |
| W92Q2864 | Any changes to Breastfeeding Lactation Consultant supports due to Covid 19? | ClIr M OConnor | 4 |
| W92Q2865 | Lactation Consultant support and other services for new mothers. | ClIr M OConnor | 4 |
| W92Q2866 | Current situation in relation to Broad Band at Castlebar Sacred Heart Hospital. | ClIr M McLoughlin | 4 |
| W92Q2867 | Update on Phased works at St Joseph's Community Hospital and the costs. | ClIr G Crawford | 4-5 |
| W92Q2868 | Gritting of car parks and pathways of Hospitals and other HSE facilities. | ClIr G Crawford | 5 |
| W92Q2869 | Uptake numbers of UHLK patients for procedures carried out outside of Letterkenny. | ClIr G Crawford | 5 |
| W92Q2870 | Recruitment and hiring of staff in the Saolta Group for all health care positions. | ClIr M Kilcoyne | 5-6 |
| W92Q2871 | Home Help Hours – criteria and decision making | ClIr M Kilcoyne | 6 |
| W92Q2872 | Number of medical cards that have been revoked in County Mayo for the last 2 years | ClIr M Kilcoyne | 6 |
| W92Q2873 | Update on the new walkway from the recently constructed modular unit to the main hospital building at MUH | ClIr M Kilcoyne | 6-7 |
| W92Q2874 | Update on Capital Progress works at Carndonagh Community Hospital and Bunrana Community Hospital | ClIr A Doherty | 7 |
| W92Q2875 | 2021 HSE plans for services at Milltown House Carndonagh, Dunshenny House Carndonagh and at James Connolly Memorial home. | ClIr A Doherty | 7 |
| W92Q2876 | Update on the Primary Care Centres for Moycullen, Spiddal and Galway City West? | ClIr D Ó Cualáin | 7-8 |
| W92Q2877 | Any change in national policy by the HSE in recent months where G.P's are advised to charge Medical/G.P Card holders for phlebotomy services. | ClIr D Ó Cualáin | 8-9 |
| W92Q2878 | Update on a new ward for Cardiothoracic Services in G.U.H? | ClIr D Ó Cualáin | 9 |
| W92Q2879 | Podiatry services for Medical card holders within HSE West. | ClIr D Ó Cualáin | 9-10 |
| W92Q2880 | Covid 19 Vaccination centres/supports for Inishowen peninsula. | ClIr A Doherty | 10-11 |
| W92Q2881 | Protocol for discharge of patients from the Mental Health Psychiatric Unit/Services/ED MUH in Mayo? | ClIr J O Hara | 12-13 |
| W92Q2882 | Vaccination of frontline and healthcare staff first against Covid-19. Policy re pay to nurses, students nurses and health care assistance if they work extra hours for COVID | ClIr J O Hara | 13 |
| W92Q2883 | Expansion to the Orthodontic Service in Mayo/outside referral NTPF type service? | ClIr J O Hara | 13 |
| W92Q2884 | Report on the level of referrals to the Traumatic Bereavement Counselling Service over the years 2019 and 2020, | ClIr D Gilroy | 14-15 |
| W92Q2885 | Can the HSE confirm when the Covid 19 Vaccine will be made available to: | ClIr D Gilroy | 15 |
| W92Q2886 | Insulin Pump Therapy; staffing and service for the North West and for adults in Sligo. | ClIr D Gilroy | 15 |
| W92Q2887 | Timeline re decision on which of the Covid 19 Vaccines will be made available to Transplant patients, will they be classified for the Pfizer Biontic vaccine only. | ClIr D Gilroy | 16 |

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| W92Q2888 | HSE plans to ensure adequate emergency medical cover and extra Rapid Response Vehicles are in place for coastal communities during the 2021 summer season. | Cllr C Murphy | 16 |
| W92Q2889 | A detailed breakdown of the HSE mental health services, in West Clare for child and adolescents and youths aged 18-24. | Cllr C Murphy | 17 |
| W92Q2890 | Pathway for supply of supports, in particular the replacement of clinical consumables, to Community Cardiac First Responder groups | Cllr C Murphy | 17-18 |
| W92Q2891 | Update on the planned Primary Health Care Centre announced for Kilrush two years ago. | Cllr C Murphy | 18 |
| W92Q2892 | Provision of Libre Devise treatment, charges to over 21 years of age patients, Donegal only or nationwide? | Cllr G McMonagle | 18 |
| W92Q2893 | Has the HSE undertaken contracts for Beds and or theatre space from Private Hospitals? | Cllr G McMonagle | 18-20 |
| W92Q2894 | How many members of staff at LUH are currently off work or self-isolating due to Covid 19 or close contact reasons. Also update on the recent recruitment drive for New Nurses and Doctors to be employed at LUH? | Cllr G McMonagle | 20 |
| W92Q2895 | Are Staff members of HSE paid full wages when off due to contracting Covid or because they are off due to being classified as a Close Contact or is there a Sickness Payment made and how is this worked out? | Cllr G McMonagle | 20-21 |
| W92Q2896 | An update on the anticipated opening date of the New Community Medical Centre in Carrick on Shannon. | Cllr Armstrong McGuire | 21 |
| W92Q2897 | What is the policy in this region for dealing with anticipated "No Shows" when community vaccination is being rolled out | Cllr Armstrong McGuire | 21 |
| W92Q2898 | What is the policy in this region where at close of business on any day there may be open vials of vaccine without anticipated clients in line? | Cllr Armstrong McGuire | 21-22 |
| W92Q2899 | Update on the Health Centre Practice and the Medicentre Practice - rent or fees for the offices they use in the Primary Care Centre, Barrack Street, Sligo | Cllr D Bree | 22 |
| W92Q2900 | Portering service for the medical practices based in the Primary Care Centre, Barrack Street, Sligo. | Cllr D Bree | 22 |
| W92Q2901 | Update on the provision of a permanent catheterization lab at Sligo University Hospital | Cllr D Bree | 22-23 |
| W92Q2902 | What responses have been received by the disability service from the National HSE to progress and provide full time residential placements for adults presently in ongoing emergency respite care in Riverwalk Respite House? | Cllr A Doherty | 23 |
| W92Q2903 | How many staff are currently employed at Sligo University Hospital and how many staff were employed at the same time in 2020? | Cllr D Bree | 23-24 |
| W92Q2904 | Can the HSE confirm the current status for the Tuam area with regards to Covid, what were the number of tests done, what were the number of missed appointments for testing for the Tuam area and what plans were put in place to help nursing homes both public and private. | Cllr D Killilea | 24 |
| W92Q2905 | Can the HSE confirm the status of new residential care unit for Tuam. Is funding approved for the overall project and what is the total cost of the project estimated at. | Cllr D Killilea | 25 |
| W92Q2906 | Can the HSE confirm the status of the development of the Old Grove Site, has the HSE board approved the capital fund for the re construction of the unit and what is the estimated cost. | Cllr D Killilea | 25 |

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| W92Q2907 | Can the HSE confirm that Galway Co Co has approached them for a list of lands and buildings that are available for housing. | Cllr D Killilea | 25 |
| W92Q2908 | Can the Forum be provided with the occupancy levels of the Acute Mental Health Unit at GUH for the months of November and December 2020 and January 2021? | Cllr J Connolly | 25-26 |
| W92Q2909 | How many children, 12 years and under having been referred for Speech and Language Assessment are awaiting an initial appointment in CHO Area 2? | Cllr J Connolly | 26 |
| W92Q2910 | Can the forum receive an update on the progression of Phase 1 of the Enhanced Community Care Programme | Cllr J Connolly | 26-27 |
| W92Q2911 | How many beds were made available to public patients in the Galway Clinic and Bon Secours Hospital Galway during the month of January 2021 and how many public patients received care and treatment in those hospitals? | Cllr J Connolly | 27-28 |
| W92Q2912 | Was there ever any consideration given to prioritising vaccination of those with serious underlying health conditions in the Over 70 age category first before the vaccine was rolled out to others in the same age category? | Cllr D McDonnell | 29 |
| W92Q2913 | Why aren't private carers, particularly family carers caring in the home being given priority vaccinations? | Cllr D McDonnell | 29 |
| W92Q2914 | Are we using private hospitals to full capacity to tackle waiting lists for elective surgery and what plans are in place to use these facilities in to tackle waiting lists the coming months? | Cllr D McDonnell | 29-31 |
| W92Q2915 | Please clarify the schedule of priority and planned roll out process to provide covid vaccination to home and family carers who manage care for people in high risk and housebound groups | Cllr E Francis Parsons | 31 |
| W92Q2916 | Please provide an update on the status of the GP Post in Kilconnell which became vacant on 1st Feb. | Cllr E Francis Parsons | 31-32 |
| W92Q2917 | Please provide an update on the status of Consultant posts in PUHB. Which consultant posts are currently vacant and for how long? | Cllr E Francis Parsons | 32 |
| W92Q2918 | Given that Domestic and Gender Based Violence is acknowledged as a shadow pandemic within a pandemic please clarify what HSE supports and aligned services are available to support and victims and survivors in CHO2. | Cllr E Francis Parsons | 32-33 |
| W92Q2919 | An update report on new primary centre in Newtowncunningham? | Cllr C Brogan | 33 |
| W92Q2920 | Update report per county for the proposed roll out of the vaccine and how we intend to do it throughout the community? | Cllr C Brogan | 33-34 |
| W92Q2921 | Can we engage more with private hospitals to ensure that patients waiting on treatment or surgery are not neglected due to the ongoing pandemic to ensure patient care? | Cllr C Brogan | 34-36 |
| W92Q2922 | Can we have a updated report on the current mental health services being provided to help and support the many people that are facing huge challenges due to the ongoing pandemic? | Cllr C Brogan | 36-39 |
| W92Q2923 | Can The HSE Midwest provide additional Community Psychiatric support for vulnerable families and individual during the current Covid pandemic | Cllr S Crawford | 39 |
| W92Q2924 | Can the provision of in hospital support be increased for each County during the current pandemic Professionals working in Ennis General have asked that further support be provided particularly to address those with acute psychiatric illness/distress? | Cllr S Crawford | 39 |
| W92Q2925 | Can the reopening of the ECT Centre at Ennis General Hospital be explored to support those patients in need of same. | Cllr S Crawford | 39 |

| NUMBER | QUESTION | RAISED BY |
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| W92Q2863 | Are staff shortages affecting availability of Lactation Consultant services in GUH? | Cllr M OConnor |
| <p>The reduction of staff due to COVID does not affect our lactation Consultant Services. Our Clinical Midwifery Specialist in Breastfeeding works 0.5 WTE and has never been redeployed during the COVID Pandemic.</p> <p>A. Cosgrove, COO, Saolta University Health Care Group</p> | | |
| W92Q2864 | What if any changes to Breastfeeding Lactation Consultant supports to inpatient and discharged new mothers have taken place due to Covid 19? | Cllr M OConnor |
| <p>The Maternity Department is providing their Parent Education Classes via zoom since the beginning of the Covid pandemic. This includes of breastfeeding webinars with participants including a Neonatal Consultant, Dietician, Parent Education Midwife and the Clinical Midwifery Specialist in Breastfeeding. Due to the success of these webinars, plans are in place to increase the frequency of same to twice a month.</p> <p>All the midwives within the department attend regular training and updates in relation to breastfeeding to support mothers and babies.</p> <p>The Maternity Department promotes the volunteer support services and encourage mothers to avail of the services both whilst in hospital via their zoom links and when they are discharged home.</p> <p>The Golden Drops initiative was introduced during COVID to encourage mothers to express breastmilk antenatal in preparation of the birth of their baby. Packs are available to mothers which contain; a simple visual card with images on how to hand express, a colourful information sheet with advice sheet on hand expression and syringes to help the mum get started to save and store her colostrum.</p> <p>A. Cosgrove, COO, Saolta University Health Care Group</p> | | |
| W92Q2865 | What assurances can be given that Lactation Consultant support services will not be reduced particularly in light of reduced availability of other recognised traditional supports to new mothers such as i.e family visits at home and in hospital, home visits by Breastfeeding Councillors from volunteer peer services, and reduced face to face General Practitioner visit? | Cllr M OConnor |
| <p>In University Hospital Galway the role of the Clinical Midwifery Specialist in Breastfeeding is vital to the needs of the women and the running of the service and hence there are no plans to redeploy her as the role is pivotal to the Maternity Services.</p> <p>Women are very much encouraged to avail of the volunteer support services via their zoom links both in the hospital setting and when they are discharged home.</p> <p>A. Cosgrove, COO, Saolta University Health Care Group</p> | | |
| W92Q2866 | I would like to know the current situation in relation to Broad Band at Castlebar Sacred Heart Hospital. Is it available throughout the wards for patients, staff as well as management? | Cllr M McLoughlin |
| <p>Two WIFI routers were installed in mid-2020, one in each of the sitting rooms of the Carra and Ross Units and are available for residents to use at any time, other than where measures are required to prevent Covid 19 infection.</p> <p>Breda Crehan-Roche, Chief Officer, Community Healthcare West</p> | | |
| W92Q2867 | What progress is being made in relation to Phased works at St Joseph's Community Hospital and the cost of this phase and the overall cost of the Project. | Cllr G Crawford |
| <p>The phased works at St Josephs involved the provision of extra toilet and showering facilities in each of the 3 ward areas. The works to the Barnes view and Woodville areas are nearing completion. The works to the Finn view were deferred in 2020 due to Covid but are planned to take place in 2021. To date €225,000 has been invested with a further planned</p> | | |

investment of €75,000 in 2021.

John Hayes, Chief Officer, CHO1

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| W92Q2868 | In the interest of safety. Will the HSE examine ways to ensure that car parks and pathways of Hospitals and other HSE facilities are gritted when necessary. | Cllr G Crawford |
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Letterkenny University Hospital has a contract in place with a company to salt/grit our roadways and footpaths when necessary. This contract has been in place for a number of years and is working well.

T. Canavan, CEO, Saolta University Health Care Group

Sligo/Leitrim.

There are arrangements in place across Sligo/Leitrim Community Services for de-icing/salting/gritting as follows: The larger sites/campus (Marckievicz House/Sligo Primary Care Centre, St John's Hospital Campus Ballytivnan & Nazareth House) are serviced by an external contractor with the assistance, where resources allow, of onsite caretakers/multi task attendants.

Community based premises are all provided with salt/grit bunkers which is spread locally by caretakers & contractors. Further assistance is provided, where resources allow, by local Maintenance Dept staff.

Donegal.

Primary Care Centres: Salt bins are provided by maintenance at all primary care centres and topped up periodically and or when requested by the caretaker at the centre. A historical agreement is in place that the caretakers spread the salt on footpaths walkways etc: and in adverse weather conditions support is provided by the maintenance department staff, if resources allow, or a third party provider.

Community Hospitals: The general operative on site provides this service in icy conditions

Large Facilities:

Donegal County Clinic. A contract is place with a third party provider to grit all surrounding walkways and carparks, including the covid test centre in icy conditions. This contract also includes LUH.

Ard Greinne (ID Services) : A third party provider provides this service when necessary.

John Hayes, Chief Officer, CHO1

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| W92Q2869 | How many patients from the inpatient Waiting list and from Day services at UHLK have been given an option to have their procedure carried out outside of Letterkenny and how many have taken up this Offer. | Cllr G Crawford |
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In 2020, there were 1485 patients on the LUH inpatient and day services waiting lists who were given the option to have their treatment in another location, of which 609 accepted the offer.

T. Canavan, CEO, Saolta University Health Care Group

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| W92Q2870 | Can I please have a detailed report of the process with timelines involved in deciding on vacancies that arise in the Saolta Group and the recruitment and hiring of staff for all health care positions. Essentially what I am seeking to ascertain is how are vacancies identified, who signs off on same, how advertising and recruiting is done and precisely what is the process involved in having a person actually begin working. Who has the final say on whether or not a vacancy will be filled? | Cllr M Kilcoyne |
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Steps outlined below:

1. Each site has a monthly Employment Control Meeting at which the General Manager reviews all posts submitted for approval to fill.
2. The General Manager signs off on the posts to fill and they are submitted to Group for final approval to fill with CEO

sign-off on all posts.

3. The outcome of Group decision is notified to Recruitment Office and decisions notified to each site by the recruitment office.
4. In the case of the following Grades there are rolling campaigns - Staff Nurses, Staff Midwives, Radiographers, Radiation Therapists; interviews are held on a regular basis as applications come in.
5. Once a candidate is successful at interview they are notified of their result and advised they will be appointed to the role on receipt of satisfactory pre-employment checks inclusive of registration from relevant body if applicable.
6. Once all documentation is in order they are asked for a start date, start date is dependent on notice period relocation etc.

T. Canavan, CEO, Saolta University Health Care Group

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| W92Q2871 | How are Home Help Hours determined? What is the Criteria used? Who is involved in making the decision? How many Home Help Hours have been granted this year and how many last year? How many requests have been refused/ not filled this year and last year? | ClIr M Kilcoyne |
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Home Support hours are allocated to clients based on their needs. A “Needs Assessment is carried out by a Clinician and the outcome is reviewed at the Mayo Home Support Forum. The forum consists of the Home Support Manager, Home Support Coordinator, the Discharge Coordinator from Acute Hospital & Assistant Director of Public Health Nurse Representative.

A total of 622,856 Home Support hours were provided to 2047 clients in Mayo from January 2020 to December 2020.

The Home Support Department does not collate data in relation to the number of applications refused. Clients are advised that they can reapply for Home Support at any stage if their care needs / circumstances changes.

Breda Crehan-Roche, Chief Officer, Community Healthcare West

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| W92Q2872 | Can you please issue a report on the number of medical cards that have been revoked in County Mayo for the last 2 years. This should include a breakdown per area in County Mayo, and also the reasons for the cancellation of the cards? | ClIr M Kilcoyne |
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The National Medical Card Unit does not collate data on the number of Medical Card applications that have not renewed at a point in time.

A report on the latest figures pertaining to the number of people in receipt of Medical Cards / GP Visit Card eligibility can be accessed via the attached link to the online portal under “Eligibility Figures”.

<https://www.spcrs.ie/portal/annual-reporting/report/eligibility>”

National Medical Card Unit

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| W92Q2873 | What is the up to date position in regard to the following: The construction of a covered in walkway from the recently constructed modular unit to the main hospital building at Mayo University Hospital? The extension to the Accident & Emergency Unit at Mayo University Hospital. When were the plans for this extension first drafted and what are the remaining stages before construction can commence and the expected completion date? | ClIr M Kilcoyne |
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1. Potential plans for the walkway have been reviewed and currently there is no viable solution however we will continue to explore options which do not compromise required ambulance access to Adult Mental Health Unit.
2. This was most recently discussed at National Capital Steering Group (Dublin) in January and the project is subject to further consideration at national level.
3. a) Initial plans for the ED extension were initiated 2016 and a proposal was submitted nationally in 2018.

- b) Process stages remaining before construction can commence are: scheme design, preliminary & statutory conditions approval, detailed design acceptance, Tendering and Evaluation
- c) Expected completion date subject to 3b.

J. Hoare, Asst. National Director, Estates

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| W92Q2874 | Capital Progress works at Carndonagh Community Hospital and Buncrana Community Hospital. What are the current updates for contracts completion in Carndonagh and Buncrana and are all timeframes being met? In the interim, what has been short term implications for patients and staffing in both hospital locations? | Cllr A Doherty |
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The Contractor for the HIQA compliance works to Carndonagh was appointed in 2020. The first phase of the project was to provide a temporary ward at Buncrana for the decant of Carndonagh residents during the construction. This temporary ward is now complete and the main works at Carndonagh are due to commence next month. The completion date for Carndonagh is Q4 2021. The main works at Buncrana will be tendered in the coming months and due to start on site following completion of Carnodnagh, with a current target completion of Q4 2022. There has been delays in the works due to Covid restrictions over the past six months.

John Hayes, Chief Officer, CHO1

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| W92Q2875 | What is the 2021 HSE plans a)For the provision of services for persons with disability et al at Milltown House Carndonagh, b)For the occupancy by clients and staff and provision of services at Dunshenny House Carndonagh, c) For the decongregation and occupancy arrangements for clients and staff of James Connolly Memorial home residents? | Cllr A Doherty |
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- a) **Milltown House** – the HSE will progress engagements with the Friends of JCM committee to agree usage with a view to agreeing a lease arrangement.
- b) **Dunshenny House, Carndonagh** – four residential service users are moving to Dunshenny House. This move will take place in Quarter 1, 2021. This move is currently in progress with detailed plans being progressed in the final number of weeks. Additional staff have been recruited with final clearances under way and once in post the residents will move.
- c) **Decongregation and Occupancy of James Connolly Memorial Facility** – CHO1 Disability services are working towards full decongregation of the JCM facility by year end 2022. Planning and implementation in respect of requirements to achieve decongregation are ongoing. Requirements include compatibility assessments for residents, sourcing appropriate accommodation, identifying staffing requirements, commencing recruitment, consultation with families and budget management.

CHO1 Disability Services are working closely with colleagues in Primary Care and Mental Health Intellectual Disability services as well as HSE Estates, Human Resources and Finance to progress the required improvement and reform of JCM services.

John Hayes, Chief Officer, CHO1

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| W92Q2876 | Can I get an update to the progress that is being made in relation to Primary Care Centres for Moycullen, Spiddal and Galway City West? What stage are these works at? Have sites been identified and planning applications been made for Spiddal and Galway City West? Are works on track for Moycullen? | Cllr D Ó Cualáin |
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Moycullen Primary Care Centre

Construction work is well underway and the centre is on schedule to become operational in Q3/Q4, 2021.

Proposed Primary Care Centre – Spiddal

HSE Estates advertised for Expression of Interest for a Primary Care site for the Spiddal area in May 2019. A number of submissions were received and these were subsequently shortlisted on the basis of site suitability (this is stage 1 of the process). The remaining submissions were reviewed and the schedule of accommodation agreed. HSE Estates invited the remaining bidders to submit GP declarations and these were received in December 2019 (stage 2). Following review of same, invitations for priced offers were prepared for circulation (stage 3) this is waiting on an update to legal documentation issued nationally by Estates. Once these are issued the time scale for submission and evaluation of priced offer is approximately three months. Planning application to follow.

Proposed Primary Care Centre – Galway City West

A suitable site has been identified for the development of a Primary Care Centre in Galway City West. HSE Estates are currently liaising with the developer to finalise plans in order to maximise site potential. Planning application to follow.

Breda Crehan-Roche, Chief Officer, Community Healthcare West

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| W92Q2877 | How many complaints have been made to HSE west over the years 2018, 2019 and 2020 by members of the public in relation to G.P's charging additional fees for medical and G.P visit card holders for services i.e phlebotomy services that are deemed as part of the necessary care provided under the scheme. How many of these complaints were withdrawn when the complainants were advised the matter would have to be addressed with the G.P prior to any refunds being given? Can I get a broad breakdown of where in the city and county according to Electoral Division these complaints were made? For example, Connemara, Galway City, Etc. Has there been a change in national policy by the HSE in recent months where G.P's are advised to charge Medical/G.P Card holders for phlebotomy services? | Cllr D Ó Cualáin |
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Number of Complaints made to the HSE West in 2018, 2019 and 2020 in relation to Phlebotomy Charges:

- 2018: 14
- 2019: 14
- 2020: 11

A number of telephone queries were also received in relation to blood charges but these have not been recorded as they did not translate into complaints.

Number of Complaints Withdrawn:

- 2018: 4
- 2019: 8
- 2020: 9

Breakdown of Locations:

2018:

- Galway City: 3
- Galway County: 0
- Mayo: 8
- Roscommon: 3
- Total: 14

2019:

- Galway City: 4
- Galway County: 3
- Mayo: 7
- Roscommon: 0
- Total: 14

2020:

- Galway City: 3
- Galway County: 5
- Mayo: 3
- Roscommon: 0
- Total: 11

HSE Policy in relation to Phlebotomy Charges:

There has been no change in HSE policy in relation to blood charges. The HSE's view is that where the practice based phlebotomy service forms part of the investigation and necessary treatment of a patient's symptoms or conditions by the patient's GP, the service should be provided free of charge where the patient is a Medical Card or GP Visit Card holder. General Practitioners should not charge eligible patients for these phlebotomy services.

Breda Crehan-Roche, Chief Officer, Community Healthcare West

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| W92Q2878 | Can I receive an update in relation to the progress being made on the development of a new ward for Cardiothoracic Services in G.U.H? Is funding in place for this project and what timelines are in place for commencement and completion of this new ward? Are there any issues in relation to progressing this project? | Clr D Ó Cualáin |
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The HSE is finalising funding approval for this project with the intention of commencement in May 2021.

T. Canavan, CEO, Saolta University Health Care Group

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| W92Q2879 | Are podiatry services provided free of charge to all Medical card holders within HSE West or is there an additional charge for this service? How many people are awaiting podiatry services in Galway city and county and were these services curtailed due to Covid-19? | Clr D Ó Cualáin |
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Podiatry Services across Galway, Mayo and Roscommon are universally available but on a needs led system. Those clients at most need of foot care intervention are prioritised regardless of their medical card status. There are no charges for podiatry interventions. Some non-medical card holders who require medical devices such as insoles or orthopaedic shoes will incur some costs from a private provider as they cannot be provided by the HSE under the medical card scheme.

Roscommon

Currently provides services to only diabetic clients as the only podiatrist in Roscommon to date is funded by the HSE national Diabetes Programme. New posts have been approved for the community Networks in Roscommon so this will see the service expanded to meet the local needs as required.

New clients waiting for a first appointment in Roscommon: 20

Existing clients waiting for an appointment in Roscommon: 236

Mayo

Currently provides services to diabetic and non diabetic clients. Only one podiatrist is employed in Mayo currently so the service is limited. New posts have been approved in Mayo for the community networks in Mayo so service levels will expand to meet local needs as required.

New clients waiting for a first appointment in Mayo: 290

Existing clients waiting for an appointment in Mayo: 460

Galway

Galway is unique in that we have the school of podiatry clinic run by primary care services in Merlin Park Hospital. (Unit 3). The majority of clinical contacts are provided by NUI Galway undergraduate podiatry students under the supervision of HSE staff.

The school clinic runs a number of different general and specialist clinics the majority of which are not available anywhere else in the country, providing a service well above anything offered anywhere else including minor surgical procedures.

The Podiatry school clinic provides the majority of the clinical contacts for CHO Area 2.

New podiatry posts are being recruited for a number of the networks in Galway that will see the move from a centralised service to a more local podiatry service in line with HSE policy.

New clients waiting for a first appointment in Galway: 400

Existing clients waiting for an appointment in Galway: 545

Service levels were curtailed for a number of reasons:

Unit 3 Taken Over

In March 2020 the HSE took full vacant possession of Unit 3 (School of Podiatry Clinic) for Covid related activities the Unit was partially returned to Podiatry in September 2020. This had a significant negative impact on service levels.

Student Placements Paused

Student clinical placements had run safely from September – December, but with the current level 5 restrictions and increased risk of new Covid variants transmission the placements have been paused. As previously mentioned the school of podiatry service is predominantly provided by students under supervision so this pause has negatively impacted in service levels.

Reduction in Footfall

In line with management instructions as part of the COVID-19 Response, all podiatry services in Galway, Mayo and Roscommon are only offering appointments to P1 clients (foot wounds and very high risk clients).

Breda Crehan-Roche, Chief Officer, Community Healthcare West

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| W92Q2880 | Covid -19 testing centres In Inishowen were deemed unnecessary by the HSE as the Letterkenny Test Centre was "Purpose built for the population of the Letterkenny AND Inishowen network areas." Will the HSE ensure that a significant number of Covid -19 vaccination centres are located in the peninsula and furthermore ensure that all vaccine resource supports available including pharmacists, dentist's et al and their staff members are vaccinated? Will the HSE also confirm that this complement of health service providers can assist GPs and engage in an efficient and comprehensive Covid -19 roll out of the vaccine? | Cllr A Doherty |
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The safe roll out of the vaccine programme will be delivered in a number of phases depending on the availability of vaccines. As vaccine availability increases and a greater number of cohorts become eligible to access the vaccine, the delivery model (the locations and workforce) will transition to support a larger volume of vaccinations. In the initial phase,

vaccinations are being delivered to prioritised groups in long term care settings. As the availability of vaccines increases, additional groups from the National Vaccine Allocation Framework will receive their vaccinations.

The vaccine is currently being rolled out to the following key groups:

- Residents (aged over 65 years) across Older Persons, Mental Health and Disability Residential Services - Pfizer/BioNTech vaccine
- Priority Groups i.e. residents living in non designated settings i.e. supported living, where they live in groups of 6 or more sharing bathroom and living areas (Pfizer/BioNtech)
- Over 70 population via GPs with the initial focus starting this week being the over 85 age group (Pfizer/BioNtech)
- Healthcare Workers (public, community and voluntary/section 38&39 agencies and private) as per HSE sequencing priorities (Astra Zeneca/Pfizer BioNtech)

Across the CHO 1 area, we are working in collaboration with colleagues in both Saolta and RCSI Hospital Groups, 9,296 vaccines have been administered to residents and staff across 54 Older Persons Residential Care Facilities and geographically based Vaccination Hubs between the 7th Jan to 10th Feb 2021. These hubs vaccinated residents aged over 65 years living in Supervised Residential Units/Continuing Care, Mental Health and Disability residential units. The second dose of the Pfizer/BioNtech vaccine continues to be administered in Older Persons Residential facilities with the remaining residents and staff being scheduled for their second dose of vaccine before the end of February and this will complete the vaccination of our most vulnerable and at risk population.

The national vaccination plan includes the delivery of large vaccination centres and county based vaccination centres. This service will require a significant workforce to deliver vaccinations to the population under 70 years and recruitment is currently underway. The identified large vaccination site for Donegal is Letterkenny Institute of Technology (LYIT) - this facility is currently undergoing fit out and should be completed shortly. Other satellite sites across the County are under consideration i.e. Inishowen, North West and West/South Donegal. These smaller vaccination centres can be set up to vaccinate priority groups. The vaccination programme is a unique partnership between the HSE, GPs, local pharmacists and local communities.

The National Allocations Strategy was published by the Government in early December 2020 and prioritises those over the age of 65 living in long-term care facilities, frontline healthcare workers who are in direct patient contact and those aged 70 and over.

The COVID-19 Vaccine Allocation Strategy was based on a Department of Health and National Immunisation Advisory Committee (NIAC) paper. It sets out the provisional priority list of groups for vaccination.

In addition, Dr Colm Henry, Chief Clinical Officer, HSE, has issued guidance on the sequencing of vaccination for all Healthcare Workers which includes public and HSE funded organisations, private hospitals, clinics and community based not-for-profit and private healthcare providers not directly funded by the HSE. Sequencing is based on the type of work and the setting in which this work takes place and maintaining a safe level of health and social care services.

The sequencing document lists the settings from 2(a)-2(g). Dentists are included in 2 (c) Healthcare workers who deal with unscheduled care patients/service users in a semi-controlled environment on a regular basis. These are HCWs who mainly see patients/service users by appointment but who may from time to time need to see urgent unscheduled patients/service users

- Urgent care facility clinical staff.
- GP practice staff - GPs/Practice Nurses
- Dentists and dental nurses providing urgent dental care.

Healthcare workers are invited to register on the HSE registration portal and following this they are they scheduled for vaccination as per the Dr Colm Henry, HSE, Sequencing document.

John Hayes, Chief Officer, CHO1

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| W92Q2881 | <p>What is the protocol for discharge of patients from the Mental Health Psychiatric Unit in Mayo? What level of personnel required to sign off a discharge?</p> <p>Is there a specific procedure for discharge into the Community following an urgent presentation at the Emergency Department at Mayo University Hospital, that does not result in admittance to the Psychiatric Unit?</p> <p>Does this protocol allow for Next of Kin/Emergency Contact Person, to be contacted in the event of a high risk patient discharging themselves from the Psychiatric Unit/Emergency Department? If so what is the timeframe for this contact?</p> <p>Is there a support person/advocate for families/carers in place to ensure they are informed, and for the safety of those discharged from the service?</p> <p>What is the timeframe for Mayo Community Mental Health follow up appointments/intervention once a person is discharged from the Mental Health Psychiatric Unit.</p> | Cllr J O Hara |
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Mayo Mental Health Service has a Discharge Policy for discharge of patients from the Adult Mental Health Unit in Mayo University Hospital. The decision to discharge a patient is made by the treating Consultant Psychiatrist in collaboration with members of the multidisciplinary team and the patient based on their presentation.

All patients who attend the Emergency Department at Mayo University Hospital are assessed either by the Liaison Mental Health Team or the non Consultant Hospital Doctor at night and weekends. They receive a full assessment including a detailed history, Mental State Examination and Risk Assessment. Collateral information may be sought from their next of kin and GP. The case is then discussed with the Senior Registrar or Consultant Psychiatrist on call and a treatment plan is agreed. Every effort is made to involve next of kin in the assessment and treatment plan.

Discharge planning begins on admission and the patient is invited to be involved in their own discharge at all times. The patient can be supported in their discharge by a family member or other person of their choice with their consent. Involvement for patients and next of kin includes the option to attend and be involved in discharge meetings, ongoing discussion regarding the discharge plan with the multidisciplinary team and key worker and the opportunity for the patient and next of kin to voice any concerns they may have regarding discharge. Every effort is made to identify the support needs of the next of kin where appropriate prior to discharge. Comprehensive information is provided by the key worker to the resident and his next of kin where appropriate upon discharge and this includes both generic and individualised information. Generic information includes contact details of Community Mental Health Services and details of how to access these services, contact details of other support services such as Advocacy Services, relevant voluntary organisations, relevant community groups and supported employment services, a crisis point of contact and details of how to re-access inpatient services including during out of hours. Individualised information includes information on the patient's medication and how to take it, possible side effects, information on diagnosis and any follow up plans made prior to discharge.

This information provided is discussed with the patient and his next of kin where appropriate prior to discharge to ensure that the patient understands the information given and to address any questions or concerns he or she may have prior to discharge.

Prior to discharge a follow up treatment plan is discussed with the patient and next of kin. Relapse prevention, crisis management, when and how much follow up contact the patient should have will be included in this treatment plan.

As outlined, family members with the patient's consent can participate in discharge planning and every effort is made to identify the support needs of the next of kin where appropriate prior to discharge. A risk assessment is completed prior to discharge which informs the discharge plan.

The decision to offer follow up contact and when and how much follow up to offer is a decision made by the treating multidisciplinary team in consultation with the patient and next of kin.

Prior to discharge a follow up treatment plan is discussed with the patient and next of kin. Relapse prevention, crisis management, when and how much follow up contact the patient should have will be included in this treatment plan.

Breda Crehan-Roche, Chief Officer, Community Healthcare West

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| W92Q2882 | <p>Why hasn't all our frontline and healthcare staff been vaccinated against Covid-19. With the high volume of Covid-19 in County Mayo I feel it is imperative that all hospital staff should be the first to be vaccinated.</p> <p>In the event of a person being vaccinated by one type of product and is due for a second jab 3 weeks later does it have to be the same brand of vaccine.</p> <p>Is it the policy of the board to pay nurses, students nurses and health care assistance time in lieu if they work extra hours, I feel it is very unfair in these pandemic times not to pay them properly.</p> | Cllr J O Hara |
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The key constraint to the rollout of the vaccine programme is the supply of vaccine so it is not possible to reach everyone as quickly as we would like.

On Friday the 5th of February all frontline staff were asked to register on the online portal. The link to this portal became available on Tuesday February 9th, 2021. The portal is being used to facilitate scheduling of vaccination appointments.

Frontline nursing staff are in group 2 of the provisional vaccine allocation groups for those that are patient facing. The sequencing of healthcare workers is not based on where people work (community or acute hospital), or who they work for (public sector, voluntary or private sector). The HSE is aiming to roll out the vaccination programme as swiftly as it can in line with the allocation groups.

Once a person receives dose 1 of the vaccine they will receive the same brand of vaccine for the 2nd dose.

All staff are paid in accordance with National Wage Agreements. Where hours over and above the basic are worked by staff they are usually paid at nationally agreed overtime rates. In some cases staff are offered the option of taking time in lieu where additional hours are worked.

Student allowances are paid in accordance with National Agreements.

T. Canavan, CEO, Saolta University Healthcare Group

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| W92Q2883 | <p>Are there any plans to expand the Orthodontic Service in Mayo?</p> <p>Would an increase in Orthodontists and support staff allow for more patients who are currently being discharged receiving the service, in particular those who are borderline for receiving treatment?</p> <p>As the private option is beyond the reach of many financially, could any type of adapted NTPF play a role here?</p> | Cllr J O Hara |
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There are no plans at the moment to expand the orthodontic service in Mayo.

Additional resources would allow patients on the waiting list to be treated in a more timely manner.

A waiting list initiative is currently being organised for orthodontics via the national oral health office. This organises long waiters to have treatment privately. However the numbers eligible for this are very small.

A. Cosgrove, COO, Saolta University Health Care Group

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| W92Q2884 | Can the HSE Issue a report to the Regional Health Forum West on the level of referrals to the Traumatic Bereavement Counselling Service over the years 2019 and 2020 Comparing: Cause of death in each case divided by (Confirmed or Suspected) <ul style="list-style-type: none"> • Suicide • Road Traffic Accident • Other Accidents • Infant Deaths | Clr D Gilroy |
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I can advise the following level of referrals received by the National Counselling Service [NCS] and Counselling in Primary Care [CIPC] in relation to traumatic bereavement counselling needs. The following tables set out below the details of each referral per geographical area for both 2019 and 2020.

Donegal Traumatic Bereavement Counselling Service Referrals;

| Reason for Referral to Traumatic Bereavement in Donegal from 01/01/2019 -31/12/2020 | | |
|--|-------------|-------------|
| Reason for Referral | 2019 | 2020 |
| Illness | 49 | 16 |
| Suicide | 16 | 2 |
| Sudden Death | 12 | 5 |
| RTA | 13 | 11 |
| Child Death | 2 | 1 |
| Homicide | 3 | 0 |
| Miscarriage | 0 | 1 |
| Accident | 10 | 7 |
| Medical Termination | 0 | 0 |
| Stillborn Baby | 0 | 0 |
| Unknown | 11 | 27 |
| Covid 19 | 0 | 0 |
| Total Referrals | 116 | 70 |

Sligo Leitrim Traumatic Bereavement Counselling Service Referrals;

| Reason for Referral to Traumatic Bereavement in Sligo Leitrim from 01/01/2019 -31/12/2020 | | |
|--|-------------|-------------|
| Reason for Referral | 2019 | 2020 |
| Illness | 35 | 37 |
| Suicide | 14 | 21 |
| Sudden Death | 13 | 15 |
| Multiple Deaths | 8 | 2 |
| RTA | 2 | 3 |
| Tragedy | 3 | 1 |
| Child Death | 5 | 1 |
| Homicide | 4 | 3 |
| Miscarriage | 2 | 2 |
| Accident | 3 | 4 |
| Medical Termination | 1 | 0 |
| Stillborn Baby | 1 | 3 |

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|------------------------|-----------|------------|
| Unknown | 4 | 3 |
| Covid 19 | 0 | 6 |
| Total Referrals | 95 | 101 |

John Hayes, Chief Officer, CHO1

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| W92Q2885 | <p>Can the HSE confirm when the Covid 19 Vaccine will be made available to</p> <p>A: The residents and staff in HSE Intellectual Disability Services De-Congregated settings. The residents are mostly under 65 and therefore fail to fall into the categories that are prioritised by the initial vaccine roll out as these residents are extremely vulnerable and the staff that care for them need to be prioritised without further delay.</p> <p>B: Pharmacy Frontline staff who are not pharmacists and not members of the Irish Pharmacy Union, Although an agreement appears to have been made between the HSE and the IPU the unfortunate staff who have been bravely coming face to face with the general public seem to have been forgotten.</p> | Clr D Gilroy |
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I can confirm that in line with the National Vaccination Programme schedule, the first round of vaccinations was delivered to residents aged over 65 years in Disability Residential Care Facilities across the nine CHO areas the week of the 25th January, 2021 and the 2nd dose is scheduled week beginning 22nd February. Vaccinations were delivered via a Hub model and CHO1, covering the counties of Donegal, Sligo, Leitrim, Cavan and Monaghan, delivered the vaccine to these residents from the Disability Vaccination Hubs established.

As determined by the National Vaccine Programme Team, CHOs were only provided with the number of vaccines required to vaccinate residents of Disability Residential Care Facilities over 65 years at these vaccination hubs. The HSE roll out is dependent on vaccine supply which remains a constraint. Once vaccine is available, CHO1 will move quickly to vaccinate all residents and staff of Disability Residential Care Facilities.

It is my understanding that the determination regarding vaccine allocation was based on the COVID-19 Vaccine Allocation Strategy which sets out a provisional priority list of groups for vaccination. The Strategy was developed by the National Immunisation Advisory Committee (NIAC) and Department of Health, endorsed by the National Public Health Emergency Team (NPHE), and approved by Government on 8 December 2020. I cannot provide an explanation as to why the vaccination provision to residents of Disability Residential Care Facilities differed to those in Nursing Homes as this determination is not made at CHO level.

I can advise that HSE Disability Services and the Section 38/39 Disability Service Providers through their representative bodies continue to advocate for the wider roll out of the vaccination programme across all Disability Residential Care Facilities and services.

The key constraint to the rollout of the vaccine programme is the supply of vaccine so it is not possible to reach everyone as quickly as we would like.

John Hayes, Chief Officer, CHO1

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| W92Q2886 | <p>While welcoming the appointment of additional Dieticians and Diabetes Nurses at Limerick Hospital. Those awaiting Insulin Pump treatment at Sligo University Hospital are still awaiting the appointment of additional Dieticians and diabetes nurse specialists so that this service can be made available to patients in the North West. Can the HSE please confirm when Insulin Pump Therapy service will be provided to adults in Sligo?</p> | Clr D Gilroy |
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Progress has been made in recent weeks regarding approval to proceed with 0.5 Dietician post to support existing pump users. However, a nurse to support this service is not yet approved or identified. As this is an essential component of the service, SUH cannot confirm a timeframe for new patients to commence Insulin Pump Therapy.

A. Cosgrove, COO, Saolta University Health Care Group

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| W92Q2887 | Can the HSE confirm when a decision will be taken on which of the Covid 19 Vaccines will be made available to Transplant patients and if they will be classified for the Pfizer Biontic vaccine only. | Cllr D Gilroy |
| <p>Now that there are safe and effective vaccines available we are aware that most people are keen to get vaccinated as quickly as possible. Currently the key constraint is that there is only a limited amount of vaccine available so it is not possible to reach everyone as quickly as we would like. Given that limitation the Government published a national list of Provisional Vaccine Allocation Groups on December 8th. This list is available at the following link. https://www.gov.ie/en/publication/39038-provisional-vaccine-allocation-groups/.</p> | | |
| <p>As more vaccines are approved and become available for distribution a broader population can then be targeted for vaccinations. Transplant patients are not a homogenous group and, therefore, each individual will be vaccinated in the vaccine allocation group that is appropriate to them or in Group 7 according to the allocation list. The decision on which vaccine to use is a Department of Health and National Immunisation Advisory Committee (NIAC) decision. The HSE is doing everything that it can to reach everyone as quickly as possible.</p> | | |
| <p>Dr Colm Henry, Chief Clinical Officer, HSE</p> | | |
| W92Q2888 | Given the significant increased population levels in our coastal communities during the 2020 summer season, and the full expectation of similar situation for the summer of 2021, can I be advised if the HSE are preparing plans, and what they are, to ensure adequate emergency medical cover is in place for 2021; and are there any plans to allocate extra Rapid Response Vehicles to increase the emergency cover capacity for those coastal communities which will see the biggest population increases. | Cllr C Murphy |
| <p>The average response times by the National Ambulance Service (NAS) for Category 1 (Life Threatening) calls in West Clare for the year 2020 was slightly above the Health Information and Quality Authority response target time of 18 minutes and 59 seconds at 19 minutes and 15 seconds. The 2020 Category 1 call volume was 875 calls for West Clare which equates to an average daily volume of 2.39 calls with a minor increase during the peak month of August 2020.</p> | | |
| <p>Determining the optimum number of Emergency Ambulances/Rapid Response Vehicles and their deployment locations is informed by both historical data (see above) and future projections of anticipated emergency call volumes within the areas to be served, i.e. an evidenced based approach. Currently, no additional resources have been sought for the West Clare area.</p> | | |
| <p>It should be noted that the NAS utilises dynamic deployment to meet any increased service demand requirements and this is used world-wide in progressive ambulance services. Dynamic deployment uses an ICT process that provides real-time basis information to the staff of the National Emergency Operations Centre who can then continually match currently available resources and their locations with service requirements. Therefore, the National Ambulance Service does not operate a static deployment model (station-based system) where a dispatched ambulance leave a coverage gap until they return to their home-base after service. Dynamic deployment deploys available emergency ambulances to different locations and this leads to shorter response times for patients in an emergency.</p> | | |
| <p>In addition, considerable planning and effort went into establishing the Emergency Aero Medical Service by the NAS, the Irish Air Corps and the Irish Coast Guard (IRCG) and it is an essential part of our country's emergency response and has greatly reduced scene to hospital times from rural areas.</p> | | |
| <p>For low acuity calls, where needs are more appropriately met via alternative care pathways other than the Emergency Department, the National Emergency Operations Centre's Clinical Hub (Hear and Treat) provides advice on self-care, discharge or referral to other appropriate local treatment pathway, e.g. GP and primary care, local based urgent care service, specialist services – such as mental health service, social care services and dental services.</p> | | |
| <p>Bill Forbes, Chief Ambulance Officer, National Ambulance Services West</p> | | |

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| W92Q2889 | Can I be provided with a detailed breakdown of the mental health services currently being provided by the HSE, to include whether directly provided by the HSE or indirectly funded through other agencies or organisations, in West Clare for a) child and adolescents and b) youths aged 18-24 | Cllr C Murphy |
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1. Child and Adolescent Mental Health Service in West Clare.
This service is provided by a Multidisciplinary Team based in Ennis covering the catchment area of west West Clare. This team consists of a psychiatrist, junior doctor, a team of nurses, social worker, occupational therapist, clinical psychologist and speech and language therapist. It is a community based service operating from 9-5 Monday to Friday and works with children and their families. The team is accessed by referral from the child/family's GP. When a referral is received it is reviewed by the multidisciplinary team and if appropriate an initial appointment is offered for assessment. The child's parents form an integral part of the assessment. In cases where a child or young person is acutely mentally unwell and requires hospital treatment, In patient services are accessed through the CAMHS in patient unit in Galway. In this case the consultant psychiatrist from Clare would refer the child to the team in Galway who complete and assessment prior to admission.

2. Youths aged 18 – 24 are considered adults in terms of Mental Health services and are seen as required by the General Adult Psychiatry Service specific to the person's address. In Clare there are four catchment areas for general adult mental health services. These services are delivered by multidisciplinary teams which consist of a consultant psychiatrist, junior doctor/s, clinical psychologist, a team of nurses including Community Mental Health Nurses who see people at home, occupational therapist and social worker. Community Mental Health Services are accessed through the GP who makes a referral to the Community Mental Health Team. The referral is discussed by the multidisciplinary team and appointment for assessment is offered as appropriate. In West Clare the Community Mental Health Team is based in Kilrush, the other three sector teams in Clare are based in Ennis, Shannon and Lisdoonvarna.

Indirectly funded through Agencies:

Lottery funding approved for Sailing Into Wellness CLG who provide a recovery programme named 'Sailing into Wellness' which accommodates 26 participants per course for both Adult and Young Service Users. A portion spaces of spaces on all funded courses are reserved for young people attending the Child & Adolescent Mental Health Service in West Clare.

M. Bridgeman, Chief Officer, Mid West Community Healthcare

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| W92Q2890 | Community Cardiac First Responder groups provide a life saving service for the, often very remote, communities within which they are based. I understand from the policy document covering the CFRs one of the supports provided is the replacement of clinical consumables? How is the supply of this clinical consumable support structured; through contact with their community engagement officer, the local NAS base, or directly from regional or national stocks? a) Can I be provided with the details of the cost of this? b) Has there been any research into the estimated cost saving to the HSE for the voluntary service being provided by the Community Cardiac First Responder groups? | Cllr C Murphy |
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The NAS is supported by Community First Responder schemes, responding to particular types of medical emergencies where it is essential for the patient to receive immediate life-saving care whilst an emergency response is en-route to the patient. Community First Responder are not knowingly asked to attend unsafe or potentially violent incidents or any other incidents which require specialist skills.

The NAS Community Engagement Officers are the conduits between the Community First Responders (CFRs) and the NAS. Clinical consumables are provided free of charge for the Community First Responders (CFRs) through their designated NAS Community Engagement Officers. There is no designated Cost Centre, nor is there a financial requirement to create one, for these clinical consumables. Therefore, individual costings are not available. CFR clinical consumable stocks are

provided from Divisional stocks.

The focus of research amongst Community First Responder groups has always been life-saving not financial cost-saving. Therefore, the deployment of CFR volunteers to life threatening emergencies is to supplement the overall response in line with the "Chain of Survival", i.e. early access, early CPR and early defibrillation. Above all, it's about local people being there for the people in their community.

Bill Forbes, Chief Ambulance Officer, National Ambulance Services West

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| W92Q2891 | Can I be updated as to the current status for the planned Primary Health Care Centre announced for Kilrush two years ago, to include; a) The phase in the process we are currently, b) A timeline for its completion and opening c) An indicative list of proposed services and opening times d) Whether services that will reduce the amount of non-urgent calls the ambulance service usually deals with will be included. | Cllr C Murphy |
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Expressions of interest were sought for potential Primary Care Centre Accommodation for the HSE in Kilrush back in May 2019. This stage the process was subsequently completed whereby a number of submissions were shortlisted for a number of sites in the Kilrush area. The key driver for securing such a primary care accommodation solution would be to enable the co-location of primary care services at a single location. A review of current facilities and overall accommodation requirements for the area is due to be undertaken in Q1 2021. This review has been delayed somewhat due to the current COVID-19 emergency. In the intervening period some of the primary care therapy services have relocated from Regina House to the existing Health Centre building in Kilrush. Once the review has been completed a decision will be made regarding the progression of the project and a timeline could then be established.

M. Bridgeman, Chief Officer, Mid West Community Healthcare

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| W92Q2892 | Why is the Libre Devise for the treatment and monitoring of type 1 diabetes only available to persons under 21years free of charge, were as persons over 21 years of age are charged €65.00 for a two week supply. Can the HSE also confirm if this is a nationwide protocol or is it specific to Co Donegal? | Cllr G McMonagle |
|-----------------|---|-------------------------|

Libre freestyle is only available on Long-Term Illness Scheme to patients with Type 1 Diabetes aged 4yrs up to 22nd birthday.

This is a National protocol and not specific to Donegal.

The sensors can be bought at a cost of €60 online or in a chemist. (2 week supply)

A. Cosgrove, COO, Saolta University Health Care Group

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|-----------------|---|-------------------------|
| W92Q2893 | Has SAOLTA/HSE due to COVID 19 and the cancellation of normal services at LUH and other Hospitals throughout HSE West Forum area entered into contracts for Beds and or theatre space from Private Hospitals in this region in relation to meeting the demand of Patients with Cancer and other time sensitive procedures, if so how many beds had been secured and how much Theatre space was also secured and were the services secured adequate enough to deal with the demand and necessity of Patients in need of Time Sensitive Procedures and diagnostic services? | Cllr G McMonagle |
|-----------------|---|-------------------------|

Letterkenny University Hospital has secured capacity in Kingsbridge Private Hospital, Sligo for 15 endoscopy sessions up until end of March and discussions are on-going to secure capacity for the Gynaecology and Urology services.

Galway Clinic

Oncology – GUH

In mid January, 20 oncology beds were made available to GUH and on 14th January 18 Medical Oncology inpatients were transferred from GUH to the Galway Clinic. Clinical staff have moved from GUH to the Galway Clinic to deliver care

to Oncology patients. Pathways of care for scheduled and unscheduled Oncology admission have been put in place.

Acute Medical Admissions

A minimum of 10 beds are available in the Galway Clinic for acute general medical patients from GUH under the governance of the general physicians. This Service Level Agreement was put in place prior to the National Safety Net Memorandum of Understanding (MOU). Since the commencement of this pathway on 30th November a total of 56 patients have been transferred. Although beds are available, it is not always possible to identify suitable patients for transfer to these beds.

A pathway for transfer of acute medical patients from PUH to the Galway Clinic is also currently being developed.

Theatre & Endoscopy – GUH & MUH

Under the National MOU access to theatre has been secured for a number of specialties. Whilst access has been significantly less than that requested the majority of sessions offered have been optimised by specialties.

MUH have availed of some limited Endoscopy access in the Galway Clinic, however, short notice of availability has challenged optimisation of this access.

Radiology - MUH

MUH have been allocated 25 CT slots per week in the Galway Clinic for diagnostics for Oncology patients. Following imaging patient images are transferred to MUH where reporting is completed by MUH Consultant Radiologists.

Bon Secours Hospital Galway

Theatre – GUH

Under the National MOU access to theatre has been secured for a number of specialties for time critical urgent surgery – plastics, urology, breast, ophthalmology and ENT.

Endoscopy – GUH & PUH

Endoscopy access for GUH has transitioned under the National MOU. 45 patients are referred to the Bon Secours weekly with a total of 168 transferred since commencing the pathway.

5 patients per week are transferred for endoscopy from PUH to the Bon Secours.

Radiology – GUH

Radiology access has transitioned under the National MOU. 300 patients have received CT Scans to date and it is hoped to continue this access over the next two months.

Cardiac Diagnostics - GUH

Patients from GUH have been referred for stress tests and holter monitors in the Bon Secours.

Frailty Pathway

Beds in the Bon Secours Hospitals are available to a cohort of patients that meet the criteria for short stay frailty. The pathway commenced on 19th October and bed availability increased from 10 to 15 at the end of November. Available beds were increased further to 25 in response to COVID surge in GUH. Up to 12th February 2021 a total of 65 patients have been transferred under this pathway.

Kingsbridge Sligo

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LUH have also confirmed some sessions for Gynaecology procedures in March /April 2021 which will enable 15 patients to have their procedures undertaken.

SUH have utilised capacity in Kingsbridge in relation to ENT, General Surgery, Ophthalmology and Orthopaedics for less complex procedures. To date 60 patients have had their procedure completed. Sligo also continue to deliver their Antenatal Outpatients services from Kingsbridge.

Summary as at 19th February, 2021

The below table outlines the number of patients outsourced to private hospitals through the Safety Net 2 MOU Agreement for CT diagnostics or care. Specialties include: Endoscopy, General Surgery, Gynaecology, Oncology, Ophthalmology, ENT, Orthopaedics, Plastics, Vascular, Breast and Urology.

| Hospital | No of patients outsourced to Private Hospitals |
|---------------------------------|--|
| Galway University Hospitals | 517 |
| Portiuncula University Hospital | 20 |
| Mayo University Hospital | 18 |
| Letterkenny University Hospital | 92 |
| Sligo University Hospital | 60 |

Number of patients outsourced to private hospitals by site

A. Cosgrove, COO, Saolta University Health Care Group

| | | |
|-----------------|---|-------------------------|
| W92Q2894 | How many members of staff at LUH are currently off work or self isolating due to Covid 19 or close contact reasons what is their field of work and can I have an update in relation to the success or otherwise of the recent recruitment drive for New Nurses and Doctors to be employed at LUH? | Cllr G McMonagle |
|-----------------|---|-------------------------|

| 11th Feb 21 | |
|-------------------------------------|--------------|
| All Covid-19 Related Absence | Total |
| Consultant | 3 |
| NCHDs | 1 |
| Nursing | 47 |
| HCA's | 11 |
| AHPs | 11 |
| Support Staff | 18 |
| Clerical Admin | 6 |
| Total | 97 |

In relation to nursing, we have hired 17 nurses since 1/12/2020 and have panelled another 13 from recent interviews. We are currently offering post to people on the panel.

A recruitment drive for NCHDs is ongoing. Medical SHOs were interviewed on 10/02/21, 4 were offered posts. An advert for July NCHD intake is currently on Saolta website.

T. Canavan, CEO, Saolta University Health Care Group

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|-----------------|---|-------------------------|
| W92Q2895 | Are Staff members of HSE paid full wages when off due to contracting Covid or because they are off due to being classified as a Close Contact or is there a Sickness Payment made and how is this worked out? | Cllr G McMonagle |
|-----------------|---|-------------------------|

HSE Staff who contract Covid - either in the workplace or via Community transmission – or who are displaying Covid symptoms and are medically advised to self-isolate, can avail of Covid Special Leave with Pay (**SLWP**) from their employer. SLWP may continue for up to 28 days if necessary, where it is supported by a positive test for COVID-19 and ongoing medical certification. If an employee is still unwell after 28 days they will normally move to ordinary sick leave arrangements.

Please click [here](#) for the DPER FAQ's in regards to Covid leave which outlines each scenario.

John Hayes, Chief Officer, CHO1/ A. Cosgrove, COO, Saolta University Health Care Group

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| W92Q2896 | May I have an update on the anticipated opening date of the New Community Medical Centre in Carrick on Shannon. | Cllr Armstrong McGuire |
|-----------------|---|-------------------------------|

The HSE plan to open the new Primary Care Centre in Carrick on Shannon in early March 2021.

The new Primary Care Centre in Carrick on Shannon is over 30,000 sq. feet in total, 27,000 sq. feet is for HSE and the services going into the new Primary Care Centre are;

Public Health Nursing,
 Physiotherapy (Adult and Children),
 Orthoptic,
 Ophthalmic,
 Antenatal/Gynae,
 Cardiac Diagnostics,
 Nowdoc (GP Out of Hours Service),
 Dietetics,
 Occupational Therapy,
 Dental,
 Speech and Language,
 Podiatry,
 Psychology,
 Community Medicine,
 Paediatric Consultant clinics,
 Mental Health and the two GP Practices

The remainder will be used by the Medical Centre practice and a private Pharmacy. There are 100 car parking spaces exclusive for the HSE and Medical Centre practice.

John Hayes, Chief Officer, CHO1

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|-----------------|---|-------------------------------|
| W92Q2897 | What is the policy in this region for dealing with anticipated “No Shows” when community vaccination is being rolled out in future weeks and months? (By “No shows” I mean clients who do not turn up for appointments for vaccination as organised by GPs and Community hubs). | Cllr Armstrong McGuire |
|-----------------|---|-------------------------------|

The Covid-19 vaccine programme is entirely voluntary and is an opt-in programme. Members of the public who do not attend for vaccination can be scheduled for another appointment. If people cannot attend for vaccination, we would ask them to kindly let us know in advance, so their appointment can be given to the next person on the list. As we begin, to roll out the programme in the over 85 population, extra efforts will be made to ensure people have access to transport to enable them to attend for appointment. The community and voluntary sector and local transport initiatives may be able to assist. We need the uptake to be as high as possible across our communities.

A communication campaign has been launched to maximise understanding of the importance of getting vaccinated and protecting yourself, your family and community from Covid-19. Particular focus will be to connect with hard to reach, vulnerable and vaccine hesitant populations as well as focussed approached to those communities at highest risk of Covid-19. This campaign will run across a number of platforms over the coming weeks including, TV, local radio and social media.

John Hayes, Chief Officer, CHO1

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|-----------------|---|-------------------------------|
| W92Q2898 | What is the policy in this region where at close of business on any day there may be open vials of vaccine without anticipated clients in line? | Cllr Armstrong McGuire |
|-----------------|---|-------------------------------|

The HSE has a Vaccine Implementation Steering Group in place which oversees the vaccination programme for Counties

Donegal, Sligo, Leitrim, Mayo, Galway and Roscommon. This Group has membership across all key services and is currently meeting each week to plan the allocation of vaccines to various centres across the region. Each week, very significant efforts are made to ensure a good match between the numbers of doses of the vaccine allocated to each area and the need in each area.

As part of our roll out strategy, our key aim is to provide a safe and efficient vaccination service to the population. One of our key objectives is to reduce any wastage. A weekly schedule for CHO 1 vaccinations is in place and detailed planning takes place between the CHO 1 Vaccination Team and National HSE Vaccination Team re our order of vaccines for the week. In advance of vaccination, CHO 1 identifies the specific cohort for vaccination, so it is a case of names beside doses of vaccine, this order is placed with the National Cold Chain Service and the vaccine is then delivered to key sites across the CHO area. This is a detailed and logistically challenging, however it has resulted in no vaccines being wasted in CHO 1.

A national guidance document on the sequencing/prioritisation of all health care workers for vaccination was issued by Dr Colm Henry, Chief Clinical Officer, HSE. All units/Vaccination centres have standby lists of frontline healthcare workers that are available to attend at short notice in the event that spare doses or vials are available. Unopened vials of the Pfizer/BioNTech vaccine can be stored for up to 120 hours and unopened vials of Astra Zeneca can be stored for up to 30 days.

T. Canavan, CEO, Saolta University Healthcare Group

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|-----------------|---|-------------------|
| W92Q2899 | Noting that the Health Centre Practice and the Medicentre Practice, have not paid any rent or fees for the offices they use in the Primary Care Centre, Barrack Street, Sligo, since they took up occupation of the offices in 2002, I am asking that the Forum be provided with an up to date report on the matter, including the measures taken by the HSE to recover the outstanding rents/fees in the period since the last Forum meeting; and if the offices in question have been revalued so as to ensure that a realistic rent/fee will be charged in future. | Clr D Bree |
|-----------------|---|-------------------|

Local HSE management have considered this matter in the context of the ongoing COVID Pandemic situation, the recent significant surge in COVID cases in the region and the resulting strenuous demands this has placed on GP practices in recent months. As a consequence the HSE has prioritised the management of the current pandemic and the COVID vaccine delivery programme, therefore in the interests of Public Health and the general population requiring continued access to services, we have not engaged in any discussions that may distract any health service provider from these priorities. This has allowed all services, including GP Practices, to concentrate entirely on the medical and clinical demands they face at this time.

However the HSE is committed to this matter being revisited with the GP practices concerned when current pandemic situation eases sufficiently. At this time the matter of recovering outstanding rents/fee's will again be addressed as will the matter of possible continued use of these HSE premises by all of the GP practices concerned after expiry of their current licence term of occupation in 2022. The renewal of a rental/licence agreement for the premises concerned from 2022 onwards will be based on the current national licensing agreements, provided by National Contracting Office for Primary Care, and CHO 1 will adhere to these processes fully. The HSE is willing to refer the issue of outstanding rents to an independent agreed arbitration process rather than seeking a resolution via a legal route.

John Hayes, Chief Officer, CHO1

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| W92Q2900 | To ask if the HSE provides a portering service for the medical practices based in the Primary Care Centre, Barrack Street, Sligo, and to ask if a separate fee is charged for such a service in addition to rent. | Clr D Bree |
|-----------------|---|-------------------|

The HSE does not provide a portering service for the medical practices based in the Primary Care Centre, Barrack Street, Sligo.

John Hayes, Chief Officer, CHO1

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|-----------------|---|-------------------|
| W92Q2901 | To ask what progress, if any, has been made in regard to the provision of a | Clr D Bree |
|-----------------|---|-------------------|

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| | permanent catheterization lab at Sligo University Hospital | |
|--|--|--|

Sligo University Hospital Cath Lab services have not been operational for a number of months due to staff pressures during the pandemic. However, it is expected that the service will resume in the near future. Urgent cases are facilitated in University Hospital Galway.

No further update is available regarding the provision of a Cath Lab facility as the outcome of the National Cardiology review is still pending.

A. Cosgrove, COO, Saolta University Health Care Group

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| W92Q2902 | <p>What responses have been received by the disability service from the National HSE to progress and provide full time residential placements for adults presently in ongoing emergency respite care in Riverwalk Respite House? In the year past, how many of the forty six registered service users in Inishowen have been deemed compatible with the people living at Riverwalk Respite House and are availing/or have availed of the one remaining bed? (What is the frequency of rotation?) How many of the 46 registered users have accepted a home support package to provide respite within their own homes? Will the HSE and the service disability prioritise the restoration and increase of proper Respite facilities in Inishowen and provide for the registered users and their families the supports deserved?</p> | Cllr A Doherty |
|-----------------|---|-----------------------|

Regarding alternative residential placements for the two people currently living in Riverwalk Respite I can confirm the following:

A premises has been identified which is being assessed for suitability for one person currently residing in Riverwalk Respite House on an emergency basis. A number of options are actively being considered for the second person residing in Riverwalk Respite House and planning is ongoing in relation to this.

With regard to the compatibility of service users to share the accommodation with the two people in Riverwalk Respite House, I can confirm that numbers identified were very low. As such it would not be best practice to have ongoing admissions and discharges to the Respite Centre. One service user who was assessed as compatible was a resident in the facility for a period of five weeks due to family circumstances.

Home Support Packages were offered to all service users in lieu of residential respite. Fourteen service users and their families accepted home support packages but it was declined by the remaining families due to their expressed concerns in relation to COVID-19.

Riverwalk Respite service will operate at full capacity in line with Public Health Guidelines when the plans for both residents are in place.

John Hayes, Chief Officer, CHO1

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| W92Q2903 | <p>How many staff are currently employed at Sligo University Hospital and how many staff were employed at the same time in 2020? Please list by occupation and how many are permanent, temporary, agency. How many staff vacancies are currently in Sligo University Hospital?"</p> | Cllr D Bree |
|-----------------|---|--------------------|

| Category | Jan 2020 WTE | Jan 2021 WTE | No. Of Permanent Staff Members at 1/2/21 (Headcount) | No. Of Temporary Staff Members at 1/2/21 (Headcount) | Average Agency Staff per Month (2020 data) | Vacancies in Recruitment at 1/2/21 |
|-----------------|--------------|--------------|--|--|--|------------------------------------|
| Health & Social | 180.66 | 181.57 | 159 | 40 | 2 | 71 |

| | | | | | | |
|--|----------------|----------------|-------------|------------|-----------|------------|
| Care Professionals | | | | | | |
| Medical Dental | 228.91 | 247.18 | 72 | 179 | 10 | |
| Mgmt Admin | 220.45 | 227.78 | 225 | 32 | 0 | 46 |
| Nursing/ Midwifery | 640.54 | 659.86 | 728 | 47 | 13 | 93 |
| Patient & Client Care* | 128.63 | 155.70 | 149 | 19 | 27 | 18 |
| Support Services | 204.76 | 217.81 | 190 | 50 | 0 | 26 |
| Grand Total | 1603.95 | 1689.90 | 1523 | 367 | 52 | 254 |
| * Patient and Client Care = HCA | | | | | | |

T. Canavan, CEO, Saolta University Health Care Group

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|-----------------|---|-----------------------|
| W92Q2904 | Can the HSE confirm the current status for the Tuam area with regards to Covid, what were the number of tests done, what were the number of missed appointments for testing for the Tuam area and what plans were put in place to help nursing homes both public and private. | Clr D Killilea |
|-----------------|---|-----------------------|

We test at the Airport in Galway for all of the county, so the information we have is for all of the county and not specific to Tuam or the Tuam area.

Up to and including Saturday last (13th) from March 2020 to date we have conducted 70,711 Covid tests in both the Airport and NUI Galway with 4,614 DNAs.

Private Residential Care Facilities (RCF) and Community Nursing Unit's (CNU) are supported equally by the Health Service Executive in Tuam area. The primary responsibility of a Registered Proprietor of a Residential Care Facility is the delivery of safe care to its residents. The Health Service Executive's role is to assist Community Nursing Units and Private Residential Care Facilities prevent an outbreak and then manage the Covid 19 outbreak if it occurs

We can advise that HSE Assistance provided to both Public and Private Residential Care Facilities in the Tuam area include:

1. Regular Outbreak Control Team meetings chaired by Public Health Consultant to advise and assist the facility to manage the outbreak
2. A Consultant Geriatrician medically reviewed all residents in one facility and was available to all GPs for medical advice for residents in both public and private facilities.
3. Infection Control supports were available from an experience HSE Assistant Director of Nursing. The Assistant Director of Nursing (DoN) has attended the facilities on many occasions and also provides telephone back up
4. Personal Protective Equipment (PPE) is supplied by the HSE weekly or twice weekly as required
5. Oxygen supplied by the HSE
6. Senior HSE Director of Nursing – providing daily support and advice
7. HSE assisted facilities seek agency Nurses, health care & cleaning staff
8. A Senior Nurse from a HSE Hospital supported management of the facilities and the care of residents
9. Additional Funding for Private Nursing Home from NTPF – Temporary Assistance Scheme
10. HSE Psychological Supports have been provided

Breda Crehan-Roche, Chief Officer, Community Healthcare West

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| W92Q2905 | Can the HSE confirm the status of new residential care unit for Tuam. Is funding approved for the overall project and what is the total cost of the project estimated at. | Cllr D Killilea |
|-----------------|---|------------------------|

HSE Board Approval is now in place for the award of the public works contract for the construction of the 50 Bed Residential Care Centre at Seán Purcell Road, Tuam, Co. Galway. The funding required (in addition to the charitable donation available to part fund the project) is included in the current HSE Capital Plan. The total overall project cost estimate to include design team fees, construction works, equipping and other costs associated with the project is in the region of €22.5 million. Estates are currently reviewing the outstanding issues to be resolved with a view to being able to proceed with the award of the contract and establish a commencement date for the works.

Joe Hoare, Assistant National Director, Estates West

| | | |
|-----------------|--|------------------------|
| W92Q2906 | Can the HSE confirm the status of the development of the Old Grove Site, has the HSE board approved the capital fund for the re construction of the unit and what is the estimated cost. | Cllr D Killilea |
|-----------------|--|------------------------|

Tenders for the proposed works at the site of the Old Grove Hospital in Tuam were sought by HSE Estates from the short-listed works contractors with a return date of Thursday 11th February 2021. The scope of works includes accommodation for both mental health and disability services. The assessment of tenders received is ongoing but nearing completion. It is hoped that the tender report can be finalised in the coming week. The request for award of the works contract will then be progressed through the required HSE approval process. This project has been prioritised by the HSE and allowance has been made in the HSE Capital Plan for funding to award this contract and progress these works in 2021.

Joe Hoare, Assistant National Director, Estates West

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|-----------------|--|------------------------|
| W92Q2907 | Can the HSE confirm that Galway Co Co has approached them for a list of lands and buildings that are available for housing. Can you also confirm a list of properties/lands owned by HSE in Tuam town and its environs and what plans are in place for them. | Cllr D Killilea |
|-----------------|--|------------------------|

From an Estates and Property perspective, Galway County Council have not specifically formally approached us for a list of lands and buildings that might be available for housing. However, there is an open channel and ongoing dialogue between Estates and the Housing Department of Galway Co. Council on various property matters. Also, apart from the St Brigid's lands in Ballinasloe and possibly the Toghermore campus the potential for HSE lands to be available for uses other than healthcare is very limited. The HSE has a number of properties in the Tuam area which are listed as follows;

- Arás Mhuire Community Nursing Unit
- Aisling House Hostel
- Tuam Health Centre
- The Grove (former Community Hospital Site)
- Tuam Ambulance Base
- Toghermore Campus
- Tuam Primary Care Centre

A major capital project is due to commence shortly at the Old Grove site and the other sites above are all currently in use. A group has also been established to look at potential future uses for the Toghermore lands.

Joe Hoare, Assistant National Director, Estates West

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|-----------------|---|------------------------|
| W92Q2908 | Can the Forum be provided with the occupancy levels of the Acute Mental Health Unit at GUH for the months of November and December 2020 and January 2021? | Cllr J Connolly |
|-----------------|---|------------------------|

The attached spreadsheet documents the occupancy levels of the acute inpatient unit at University Hospital Galway from 2019 to January 2021.

Occupancy Levels at the AAMHU 2019 v 2020

| Month | 2019 | 2020 | Difference | % Difference 2019 v 2020 | 2021 |
|-------|------|------|------------|--------------------------|------|
|-------|------|------|------------|--------------------------|------|

| | | | | | | |
|---------------|--------------|--------------|------|--|------|---|
| January | 1609 | 1469 | 140 | 8.7% decrease in January 2020 | 1056 | 28.11% decrease Jan 21 v Jan 20 34.3% decrease Jan 21 v Jan 19 |
| February | 1379 | 1443 | -64 | 4.43% increase in February 2020 | | |
| March | 1540 | 1218 | 322 | 20.9% decrease in March 2020 | | |
| April | 1419 | 944 | 475 | 33.4% decrease in April 2020 | | |
| May | 1480 | 1048 | 432 | 29.1% decrease in May 2020 | | |
| June | 1376 | 1193 | 183 | 13.29% decrease in June 2020 | | |
| July | 1548 | 1295 | 253 | 16.34% decrease in July 2020 | | |
| August | 1448 | 1289 | 159 | 10.9% decrease in August 2020 | | |
| September | 1437 | 1443 | -6 | .41% increase in September 2020 | | |
| October | 1410 | 1381 | 29 | 2.05% decrease in October 2020 | | |
| November | 1413 | 1340 | 73 | 5.16% decrease in November 2020 | | |
| December | 1369 | 1291 | 78 | 5.69% decrease in December 2020 | | |
| Totals | 17428 | 15354 | 2074 | 11.84% decrease from Jan-Dec. 2019 v Jan-Dec. 2020 | | |

Breda Crehan-Roche, Chief Officer, Community Healthcare West

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|-----------------|--|------------------------|
| W92Q2909 | How many children, 12 years and under having been referred for Speech and Language Assessment are awaiting an initial appointment in CHO Area 2? | Cllr J Connolly |
|-----------------|--|------------------------|

| COUNTY | Number of children referred – Aged 12 years & under awaiting Initial Appointment |
|---------------|---|
| Galway | 701 |
| Mayo | 283 |
| Roscommon | 115 |

Breda Crehan-Roche, Chief Officer, Community Healthcare West

| | | |
|-----------------|--|------------------------|
| W92Q2910 | Phase 1 of the Enhanced Community Care Programme proposes the development of and community ambulatory care hub in Galway City offering a single point of access for older persons with complex care needs; can the forum receive an update on the progression of this project? | Cllr J Connolly |
|-----------------|--|------------------------|

NSP 2020 included provision to commence a reform programme in line with Sláintecare to Enhance Community Care (ECC) and redesign acute hospital care pathways to support older people and those with chronic disease.

Sláintecare has been designed to create a modern, responsive health and social care service which meets the changing needs of Ireland's population. The new model of coordinated health and social care will meet the needs of our older population, with its more complex set of clinical and social care needs, and to address the growing prevalence of chronic disease. (Sláintecare Report, 2017)

The aim of the Chronic Disease Community Specialist Team is to support evidence-based GP-led care for individuals with chronic disease in the community with a particular focus on enabling the GP Chronic Disease Management Programme for the four major chronic diseases: Cardiovascular Disease, Chronic Obstructive Pulmonary Disease, Asthma and Type 2 Diabetes Mellitus. The Chronic Disease Specialist Team will be made up of a range of medical staff, Health and Social Care Professionals (HSCPs) and Clinical Nurse specialist with expertise in managing one or more of the four major chronic diseases.

Ambulatory care hubs are sites identified outside of the hospital setting that will provide access to specialist services within the community. Each hub will be affiliated with a local hospital and will serve a population of approximately 150,000 and will focus primarily on the prevention and management of complex chronic disease. These hubs will be established to support the provision of care closer to home and to facilitate ready access to diagnostics, specialist services and specialist opinions in order to enhance the delivery of patient-centred care, support early intervention and avoid hospital admission where possible.

A suite of alternative outpatient pathways, support from multidisciplinary Chronic Disease Specialist Teams and access to diagnostics including radiology and laboratory testing will support the work within each hub and the provision of the right care, in the right place, at the right time.

In Community Healthcare West recruitment of staff for the Chronic Disease Community Specialist teams has commenced. HSE Estates is tasked with identifying accommodation to support the Ambulatory Care Hubs in both Galway City and in Ballinasloe. Each Ambulatory Care Hub will deliver services to a population of 150,000 across three Community Health Networks.

Breda Crehan-Roche, Chief Officer, Community Healthcare West

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|-----------------|---|------------------------|
| W92Q2911 | How many beds were made available to public patients in the Galway Clinic and Bon Secours Hospital Galway during the month of January 2021 and how many public patients received care and treatment in those hospitals? | Cllr J Connolly |
|-----------------|---|------------------------|

Private Hospitals Safety Net 2 Agreement

In response to Covid 19 and the requirement to provide capacity to support the Public Acute Hospital Services, a national agreement was implemented with private hospitals. This agreement has been implemented in Saolta with specific service arrangements agreed with three private hospitals, namely, Galway Clinic, Bons Secours Galway and Kingsbridge Hospital Sligo.

The following is an outline of the service provision under the Memorandum of Understanding to date.

Galway Clinic

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Bon Secours Hospital Galway

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Summary as at 19th February, 2021

The below table outlines the number of patients outsourced to private hospitals through the Safety Net 2 MOU Agreement for CT diagnostics or care. Specialties include: Endoscopy, General Surgery, Gynaecology, Oncology, Ophthalmology, ENT, Orthopaedics, Plastics, Vascular, Breast and Urology.

| Hospital | No of patients outsourced to Private Hospitals |
|---------------------------------|---|
| Galway University Hospitals | 517 |
| Portiuncula University Hospital | 20 |
| Mayo University Hospital | 18 |
| Letterkenny University Hospital | 92 |
| Sligo University Hospital | 60 |

Number of patients outsourced to private hospitals by site

A. Cosgrove, COO, Saolta University Health Care Group

| | | |
|---|--|-------------------------|
| W92Q2912 | Was there ever any consideration given to prioritising vaccination of those with serious underlying health conditions in the Over 70 age category first before the vaccine was rolled out to others in the same age category? (b) Was the Head of Infectious Diseases in the Saolta Health Group consulted when the priority list for vaccination was being drawn up. | Cllr D McDonnell |
| <p>The COVID-19 Vaccination Strategy is based on seven guiding principles –</p> <p>https://www.gov.ie/en/publication/bf337-covid-19-vaccination-strategy-and-implementation-plan/.</p> <p>The objective of the vaccination programme is to ensure equitable access to a safe and effective vaccines with the goals of limiting mortality and morbidity from COVID-19, whilst protecting healthcare capacity and enabling social and economic activity.</p> <p>NIAC (National Immunisation Action Committee) have noted that the <i>“order and the groups/individuals may change as more information becomes available. The timeframe for the rollout of the vaccination programme is dependent on several factors, e.g., availability of vaccines and vaccine characteristics”</i>.</p> <p>NIAC, the National Immunisation Advisory Committee (NIAC) within the Royal College of Physicians of Ireland comprises a wide range of medical and healthcare expertise that provides evidence-based advice to the Chief Medical Officer to inform policies on vaccines and immunisation in Ireland. NIAC is chaired by a Consultant Paediatrician and Paediatric Infectious Diseases Specialist</p> <p>https://www.rcpi.ie/policy-and-advocacy/national-immunisation-advisory-committee/</p> <p>Dr Colm Henry, Chief Clinical Officer, HSE</p> | | |
| W92Q2913 | Why aren't private carers, particularly family carers caring in the home being given priority vaccinations? | Cllr D McDonnell |
| <p>The key constraint to the rollout of the vaccine programme is the supply of vaccine so it is not possible to reach everyone as quickly as we would like.</p> <p>Carers employed by the HSE are considered as frontline workers and are in group two. They should have access to the portal to register for an appointment.</p> <p>Family carers are a diverse group, therefore, each individual will be vaccinated in the group that is appropriate to them.</p> <p>The HSE is doing everything that it can to reach everyone as quickly as possible in line with the Government's Provisional Vaccine Allocation Groups</p> <p>Dr Colm Henry, Chief Clinical Officer, HSE</p> | | |
| W92Q2914 | Are we using private hospitals to full capacity to tackle waiting lists for elective surgery and what plans are in place to use these facilities in to tackle waiting lists the coming months? | Cllr D McDonnell |
| <p>Over the past year, Saolta access to elective surgical capacity in the private hospitals has been impacted by Covid 19 and the requirement on the private hospitals to support the acute hospital clinical services and acute urgent time dependant surgeries. Saolta are working with the Private Hospitals to ensure that all approved and NTPF funded elective procedures and treatments will be delivered in 2021. All patient procedures outsourced to the private hospitals are approved and co-ordinated in conjunction with the National Treatment Purchase Fund.</p> <p>In 2021 Saolta has secured funding from the NTPF to outsource over 12,000 patients from across the Group. This is a mix of in-patients, day cases, out-patients and scopes.</p> <p>Please see below summary of patient services being provided under the current National Safety Net 2 MOU in response to</p> | | |

Covid 19 impacts.

Galway Clinic

Oncology – GUH

In mid January, 20 oncology beds were made available to GUH and on 14th January 18 Medical Oncology inpatients were transferred from GUH to the Galway Clinic. Clinical staff have moved from GUH to the Galway Clinic to deliver care to Oncology patients. Pathways of care for scheduled and unscheduled Oncology admission have been put in place.

Acute Medical Admissions

A minimum of 10 beds are available in the Galway Clinic for acute general medical patients from GUH under the governance of the general physicians. This SLA was put in place prior to the national Safety Net MOU. Since the commencement of this pathway on 30th November a total of 56 patients have been transferred. Although beds are available, it is not always possible to identify suitable patients for transfer to these beds.

A pathway for transfer of acute medical patients from PUH to the Galway Clinic is also currently being developed.

Theatre & Endoscopy – GUH & MUH

Under the National MOU access to theatre has been secured for a number of specialties. Whilst access has been significantly less than that requested the majority of sessions offered have been optimised by specialties.

MUH have availed of some limited Endoscopy access in the Galway Clinic, however, short notice of availability has challenged optimisation of this access.

Radiology - MUH

MUH have been allocated 25 CT slots per week in the Galway Clinic for diagnostics for Oncology patients. Following imaging patient images are transferred to MUH where reporting is completed by MUH Consultant Radiologists.

Bon Secours Hospital Galway

Theatre – GUH

Under the National MOU access to theatre has been secured for a number of specialties for time critical urgent surgery – plastics, urology, breast, ophthalmology and ENT.

Endoscopy – GUH & PUH

Endoscopy access for GUH has transitioned under the National MOU. 45 patients are referred to the Bon Secours weekly with a total of 168 transferred since commencing the pathway.

5 patients per week are transferred for endoscopy from PUH to the Bon Secours.

Radiology – GUH

Radiology access has transitioned under the National MOU. 300 patients have received CT Scans to date and it is hoped to continue this access over the next two months.

Cardiac Diagnostics - GUH

Patients from GUH have been referred for stress tests and holter monitors in the Bon Secours.

Frailty Pathway

Beds in the Bon Secours Hospitals are available to a cohort of patients that meet the criteria for short stay frailty. The pathway commenced on 19th October and bed availability increased from 10 to 15 at the end of November. Available beds were increased further to 25 in response to COVID surge in GUH. Up to 12th February 2021 a total of 65 patients have been transferred under this pathway.

Kingsbridge Sligo

LUH have utilised Endoscopy sessions in February which it is planned will continue into March/April 2021. To date it has

given 60 patients access to the service.

LUH have also confirmed some sessions for Gynaecology procedures in March /April 2021 which will enable 15 patients to have their procedures undertaken.

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The below table outlines the number of patients outsourced to private hospitals through the Safety Net 2 MOU Agreement for diagnostics or care. Specialties include: Endoscopy, General Surgery, Gynaecology, Oncology, Ophthalmology, ENT, Orthopaedics, Plastics, Vascular, Breast and Urology.

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Number of patients outsourced to private hospitals by site

A. Cosgrove, COO, Saolta University Health Care Group

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| W92Q2915 | Please clarify the schedule of priority and planned roll out process to provide covid vaccination to home and family carers who manage care for people in high risk and housebound groups taking into account asynchronous infection control protection 'bubble' risks and access / care gap issues arising. | Cllr E Francis Parsons |
|-----------------|--|-------------------------------|

The key constraint to the rollout of the vaccine programme is the supply of vaccine so it is not possible to reach everyone as quickly as we would like.

Family carers are a diverse group, therefore, each individual will be vaccinated in the group that is appropriate to them.

The HSE is doing everything that it can to reach everyone as quickly as possible in line with the Government's Provisional Vaccine Allocation Groups.

Dr Colm Henry, Chief Clinical Officer, HSE

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| W92Q2916 | Please provide an update on the status of the GP Post in Kilconnell which became vacant on 1st Feb. Has an exit interview been carried out? Please clarify HSE HR processes around staging GP interviews - the timing, costs and personnel involved, payments to same. What consideration is given to the creation of panels from shortlisted candidates deriving from a single interviewing process to fill upcoming posts and already vacant posts in a defined area? | Cllr E Francis Parsons |
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The GP position in Kilconnell became vacant on 1st February, 2021 following the resignation of the GP there. Efforts to fill it through the General Medical Services Scheme have been unsuccessful to date but are continuing. In the meantime a GP has been recruited through a Locum Agency so there has been no disruption to the services provided to the people in the area. The usual procedures were followed with the GP who resigned as regards exit interview etc.

Each GP position that becomes vacant is advertised in the Sunday National Papers, followed by a repeat advertisement in the following Thursdays National Papers together with the relevant Medical Journals and the HSE Website, where the Job Specification and Application Form for applying are also available. All applications received by the closing date are examined and eligible candidates are called for interview. The Interview Board consists of a General Practitioner from an approved list provided by the Irish Medical Organisation/Irish College of General Practitioners, a Specialist in Public Health

Medicine and a HSE Manager. Candidates who are deemed suitable at interview are ranked in order of merit and the position is offered, in the first instance, to the first place candidate. If that person accepts, the competition is closed. If the first placed candidate turns down the offer, it is then offered to the second placed candidate etc. until the position is filled. If it is not filled, it is re-advertised. The costs associated with the interview process are travelling expenses to the Interview Board members where appropriate, and a locum fee to the General Practitioner who is not a HSE employee.

Each vacant position is advertised separately as payments to GPs in respect of Medical Cards patients are primarily based on the number of patients on the GPs panel. This varies from practice to practice. Additional supports such as Rural Practice Allowance are also available in small rural areas but not in other areas. The level of available private practice would also vary from area to area which has a bearing on potential applicants. Panels are therefore not maintained from a single interviewing process to fill upcoming vacancies due to the differences that exist between each GP position.

Breda Crehan-Roche, Chief Officer, Community Healthcare West

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| W92Q2917 | Please provide an update on the status of Consultant posts in PUHB. Which consultant posts are currently vacant and for how long? Have the posts been advertised and have interviews been held or scheduled? Given medical manpower concerns what measures are being carried out to attract suitable applicants from at home and abroad? | Clr E Francis Parsons |
|-----------------|--|------------------------------|

There are currently 8 consultant posts filled on a temporary basis – these posts are in surgery, medicine, emergency medicine and anaesthesia.

These posts are at various stages of approval at national level and two of the above posts are advertised on a permanent basis via the public appointments service.

Posts are advertised locally and internationally.

In addition, the majority of posts at PUH have a scheduled commitment to Galway University Hospitals to make the posts more attractive

We have considered posts on a full-time basis, job sharing and reduced hours

T. Canavan, CEO, Saolta University Health Care Group

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| W92Q2918 | Given that Domestic and Gender Based Violence is acknowledged as a shadow pandemic within a pandemic please clarify what HSE supports and aligned services are available to support and victims and survivors in CHO2. How has the COVID Crisis impacted on these services and have additional resources been made available to deal with the documented rise. What analysis has been made on the statistics? | Clr E Francis Parsons |
|-----------------|---|------------------------------|

The HSE, including CHO 2, has developed a range of supports in response to the Covid-19 pandemic. When it became clearer that the extent of the Covid-19 public health emergency was more far reaching and longer lasting, the HSE's Covid-19 Integrated National Operations Hub (INOH) set up the National Health Sector Psychosocial Response Steering Group. The steering group was tasked with bringing together "different strands of existing services already engaged in responding to psychosocial aspects of Covid-19, to develop a national health sector psychosocial response plan and put in place an integrated strategic framework". A final report was published and it provides guidance on how the HSE will implement a sustainable long-term and co-ordinated healthcare response for the general public, healthcare workers and priority groups. The report also details implementation processes highlighting the importance of building on existing services and working in partnership with other service sectors, community organisations, volunteers, private and independent organisations. The report and supporting documents can be accessed as follows under:

<https://www.hse.ie/eng/services/list/4/mental-health-services/psychosocial-response-group/>

- [HSE Psychosocial Response to the Covid -19 Pandemic 2020](#)
- [Summary of the HSE Psychosocial Response to the Covid -19 Pandemic](#)
- [Appendices for the HSE Psychosocial Response to the Covid -19 Pandemic](#)

The HSE, including CHO2, also compiled a list of services and resources for Domestic, Sexual and Gender Based Violence (DSGBV) in response to Covid-19 (Coronavirus). These can be accessed on

- [Covid-19 Sharing Resources DSGBV - HSE.ie](https://www.hse.ie/eng/health/covid19/sharingresourcesdsgbv)

These resources comprise of:

- Partner pack - posters, videos and more
- Up to date information
- Services, supports and reports
- Translations and easy read documents
- Stop Domestic Violence posters in various languages
- Social media accounts
- Mental health resources
- Community supports

Additional posts have been approved and put in place in CHO2 Primary Care, mainly in the areas of psychology to provide psychological first aid supports to those who require these services. The remit for the psychosocial first aid response is very broad. It is to support the public in general as well as for staff. There is not specific, ring fenced funding for victims of Domestic, Sexual and Gender Based Violence.

We received confirmation from the Psychology Service that they are not aware of what HSE /associated services for Domestic and Gender-based violence are doing in terms of their analysis of the statistics. The expectation is that the National Programme Board for the Psychosocial Response will seek to obtain the analysis of the statistics for this cohort and consider what psychosocial responses are required. This Board is not yet established.

Breda Crehan-Roche, Chief Officer, Community Healthcare West

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| W92Q2919 | Can we get an updated report on new primary centre in Newtowncunningham, the services being provided and a timeframe for same? | Cllr C Brogan |
|-----------------|--|----------------------|

The Primary Care Centre in Newtowncunningham is currently in construction and due to be complete Q4 2021, operational Q1 2022.

John Hayes, Chief Officer, CHO1

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|-----------------|--|----------------------|
| W92Q2920 | Can we can a updated report per county for the proposed roll out of the vaccine and how we intend to do it throughout the community? | Cllr C Brogan |
|-----------------|--|----------------------|

The safe roll out of the vaccine programme will be delivered in a number of phases depending on the availability of vaccines. As vaccine availability increases and a greater number of cohorts become eligible to access the vaccine, the delivery model (the locations and workforce) will transition to support a larger volume of vaccinations. In the initial phase, vaccinations are being delivered to older people over 65years and staff in long term care settings. As the availability of vaccines increases, additional groups from the National Vaccine Allocation Framework will receive their vaccinations.

The vaccine is currently being rolled out to the following key groups:

- Residents (aged over 65 years) across Older Persons, Mental Health and Disability Residential Care settings - Pfizer/BioNtech vaccine
- Priority Groups i.e. residents living in non designated settings i.e. supported living, where they live in groups of 6 or more sharing bathroom and living areas (Pfizer/BioNtech)
- Over 70 population via GPs with the initial focus starting this week being the over 85 age group (Pfizer/BioNtech)
- Healthcare Workers (public, community and voluntary/section 38&39 agencies and private) as per Dr Colm Henry, CCO, HSE, sequencing priorities (Astra Zeneca/Pfizer BioNtech)

The national vaccination plan includes the delivery of large vaccination centres and county based vaccination centres. This service will require a significant workforce to deliver vaccinations to the population under 70 years and recruitment is

underway. The identified sites are as follows:

Donegal - Letterkenny Institute of Technology - this facility is currently undergoing fit out and should be completed shortly. Other satellite sites across the County are under review i.e. Inishowen, North West and West/South Donegal

Sligo - Knocknarea Arena at Sligo Institute of Technology. Fit out completed and the centre was used to vaccinate priority groups of health care workers and residents in non-designated centres last week. The vaccination of GPs, Practice Nurses and patient facing admin staff also took place on Sun 14th.

Leitrim – New Carrick on Shannon Primary Care Centre has been listed as the provisional Vaccination Centre for Leitrim, pending finalisation of details,

Cavan –Kilmore Hotel, Cavan is currently undergoing fit out.

Monaghan –Hillgrove Hotel is currently undergoing fit out

Mayo – Breaffy House Hotel, undergoing fit out.

Galway – Galway Race course, undergoing fit out.

Roscommon – The Abbey Hotel, Roscommon, undergoing fitout.

Clare – The West County Hotel Ennis.

Limerick – The Radisson Hotel, Limerick

Tipperary – The AbbeyCourt Hotel, Nenagh.

Other satellite sites across the County are under consideration i.e. Inishowen, North West and West/South Donegal, North West Mayo and West Galway. These smaller vaccination centres can be set up to vaccinate priority groups as required.

Ireland now expects to have received a total of 1.1 million doses of the three approved vaccines (Pfizer-BioNTech, Moderna, AstraZeneca) by the end of March. The vaccination programme involves a national partnership with GPs, Pharmacists and other Healthcare Professionals across Ireland.

T. Canavan, CEO, Saolta University Healthcare Group.

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| W92Q2921 | Can we engage more with private hospitals to ensure that patients waiting on treatment or surgery are not neglected due to the ongoing pandemic to ensure patient care? | Clr C Brogan |
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Saolta executives are actively working with the private hospitals within the region to ensure that all access granted under the current National Safety Net 2 Memorandum of Understanding (MOU) is utilised by our hospitals.

There are limitations to this access and also clinical judgement which governs the patients and the procedures which are appropriate to transfer to the private hospitals.

Please see below summary of patient services being provided under the current National Safety Net 2 MOU in response to Covid 19 impacts.

Galway Clinic

Oncology – GUH

In mid January, 20 oncology beds were made available to GUH and on 14th January 18 Medical Oncology inpatients

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Cardiac Diagnostics - GUH

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Number of patients outsourced to private hospitals by site

In 2021 Saolta has secured funding from the NTPF to outsource over 12,000 patients from across the Group. This is a mix of in-patients, day cases, out-patients and scopes which we will seek to optimise throughout 2021.

A. Cosgrove, COO, Saolta University Health Care Group

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|-----------------|---|---------------------|
| W92Q2922 | Can we have a updated report on the current mental health services being provided to help and support the many people that are facing huge challenges due to the ongoing pandemic ? | Clr C Brogan |
|-----------------|---|---------------------|

I can advise the following in respect of the current Mental Health services for Donegal and Sligo /Leitrim - Many people are struggling mentally and emotionally in response to the challenges brought about by the pandemic. As the number of COVID infections decrease and restrictions are lifted, for many, their current struggles will also be relieved. This is evidenced in the Amarach Public opinion fortnightly surveys, which shows emotional wellbeing correlated with the number of COVID infections in the country. As the number of infections increase so too does reported levels of worry, anxiety and stress. As the number of infections fall, so too do reported levels of anxiety, stress and worry. The HSE Psychosocial Response to the COVID-19 Pandemic Plan was published in Jan 2021 and this is now being progressed and implemented in CHO1. To date a range of national and local responses have been put in place to meet the varied mental health and emotional needs of the population and in particular those most vulnerable (i.e. the bereaved, the elderly, young people, health care workers and those with pre-existing mental health / psychological difficulties).

The national HSE have made available additional resources and services to support people throughout the pandemic. These supports are promoted through national media and online and are available through www.yourmentalhealth.ie. These include:

Minding Your Wellbeing an online evidence informed programme which supports people to learn more about mindfulness, gratitude, self care and resilience.

Turn2Me is an online free counselling and support service for young people (aged 12 to 17) and adults.

MyMind is an online counselling service for adults

Stress Control, an evidence based programme for managing anxiety and stress has been made available on a rolling basis online.

The HSE have established a National Bereavement Support line and in CHO1 the Northwest Bereavement Service have extended their referral criteria to all those bereaved since March 2020 and they are prioritising a response to those who make contact. Alone have been supported by the Dept of Health and HSE to establish a national support line for the elderly.

The HSE is actively establishing a new service for young people who engage in self-harm in Sligo / Leitrim and the HSE has funded Jigsaw Donegal to extend the age range of service provision for young people from 15 to 25 years to between 12 and 25 years. A phone support service was established in March 2020 for all health care workers in the region and a national service has also been established. The CHO1 support line has been extended to targeted members of the public who need additional supports, e.g. those attending COVID test centres.

The HSE mental health, psychology and counselling services (NCS & CPSI) continue to accept referrals and provide services to the public through the course of the pandemic. Services continue to provide face to face appointments, as well as telephone and video call appointments. Additional information and supports were offered to those with disabilities, e.g. summer camps for children or supports (phone, video call or bespoke day service supports) to those identified as particularly struggling due to not being in services / school.

In relation to prioritisation of specialist mental health services in Donegal and Sligo/Leitrim the following update has been provided

Donegal Mental Health Services

- Donegal Mental Health Services [DMHS] continue to provide mental health services to people through the normal pathways and this has not changed. Referrals continue to be received by either a person's GP or Now Doc or from the Emergency Department.
- GPs can refer people who present with suicide ideation to the Suicide Crisis Assessment Nurse (SCAN) who will see people referred in their GP surgery or where relevant GPs can refer people to the Deliberate Self Harm Nurse (DHS Nurse) who are located in the Emergency Department of LUH for assessment or to the NCHD or Consultant on Call in an emergency situation.
- GPs are also familiar with the in-patient unit (Department of Psychiatry) referral pathway for anyone who may require admission for in-patient mental health services.
- People may also self-present to either Now Doc, the Emergency Department or their own GP for support.
- During the Covid crisis the Community Mental Health Teams continue to provide multi-disciplinary support to service users either face to face or virtually when required and as part of their care plan needs. Supports are also provided to those service users who avail of additional support through The Willows nurse-led recovery team.
- Worklink Day Service, based in Letterkenny, Dungloe and Carndonagh is continuing to provide a therapeutic day service for people with mental health who are referred through the Community Mental Health Team, In-patient Department of Psychiatry, INTREO, HSE Day Service Support Guidance and Development Unit and GPs.
- Park View Day Hospital are also providing therapeutic services to people referred there from the Central Sector Community Mental Health Team.
- The Covid crisis for all mental health services is supported by the established CHO 1 Covid Management Team who monitors all infection control measures and associated risks.

Sligo Leitrim Mental Health Service

- Sligo Leitrim Mental Health Services [SLMHS] similarly have continued to provide mental health services to people through the normal pathways and this has not changed since the Covid 19 crisis occurred. SLMHS has remained operational throughout the most recent lockdown. To comply with the public health recommendations, a business continuity plan was devised to reconfigure services and to ensure the safety of both clients and staff was central in

the delivery of the services. This is supported by the established Covid Management Team who monitors all infection control measures and associated risks.

- Referrals continue to be received by either a person GP or Now Doc, or from the Emergency Department.
- SLMHS continue to provide a broad range of mental health services in collaboration with Primary Care and Social Care colleagues and other community agencies.
- SL MHS Services provided include: General Adult Psychiatry ; Psychiatry of Old Age; Rehabilitation & Recovery; Mental Health of Intellectual Disability [MHID] and Children & Adolescent Mental Health Services [CAMHS]
- The new acute inpatient Adult Mental Health Unit [AMHU] located on the Sligo University Hospital (SUH) campus which opened on the 9th October 2020 is fully operational. This acute service can accommodate 25 Service Users in single rooms with en-suite bathrooms. This acute setting is designed to facilitate client recovery and to provide optimal care for people who are very unwell in this very challenging time.
- However in some instances consistent with social distancing and public health recommendations, Day Services have been temporarily paused. Alternative measures have been put in place for staff to remain in contact with clients and a meals service has been continued for vulnerable Service Users.
- Day services are currently being upgraded to comply with the Health & Safety Authority's Return to Work guidance. This work is ongoing to ensure day services will be ready to resume in line with Government recommendations and timelines.
- The Community Mental Health Teams remain in operation with support being provided by telephone. However, face to face appointments are available via the Mental Health Hubs if required. There has been considerable investment in digital technology like Attend Anywhere to provide consultations with clients. In addition, digital technology such as WebEx is in use for team meetings.
- A digital technology group has been established in SLMHS. The purpose of this group is to make better use of technology in the provision of care for clients. Funding has been obtained for 1 year for a staff member to continue with digital transformation. The funding is via the Integrated Care Clinical programme for Older Persons.
- SLMHS Children and Adolescent Mental Health Service (CAMHS) Teams continue to operate. This service is provided mainly by telephone consultation and face to face appointments are facilitated where necessary.
- Modular Buildings have been purchased to extend capacity of within some of the high support residential services to comply with social distancing recommendations.

Other operational updates impacting services are:

- A vaccination team has been established in both DMHS and SLMHS. These teams have undertaken the necessary training as recommended by the HSE. The team consists of nurses and administration staff. The Covax IT system is currently being used to register clients and staff for vaccination.
- The roll out of vaccinations for service users began at the end of January for Service Users over the age of 65. There is a full vaccination programme currently in train with emphasis on the most vulnerable in line with national advice until all Service Users and staff are vaccinated.
- A review of the business continuity plan is on-going through the Area Mental Health Management Teams in both DMHS and SLMHS to ensure compliance with Government recommendations and timelines. The Health & Safety

Authority's Return to Work guidance has informed the delivery of service for everyone.

In relation to specific responses to coping with the current COVID pandemic, the following website provides up to date information on accessing mental health supports during the COVID pandemic and can be accessed by anyone who is facing challenges at present: <https://www2.hse.ie/services/mental-health-supports-and-services-during-coronavirus/mental-health-supports-and-services-during-coronavirus.html>

J. Hayes, Chief Officer, Area 1

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| W92Q2923 | Can The HSE Midwest provide additional Community Psychiatric support for vulnerable families and individual during the current Covid pandemic please. Several Carers, families, vulnerable adults and professionals have contacted me to say they are under unmanageable pressure currently. | Clr S Crawford |
|-----------------|--|-----------------------|

The Mid West Mental Health Service has remained open with services available for both new and existing service users throughout all phases of the pandemic the Covid Pandemic. The referral pathway to Mental Health Services remains the same with access through the GP. Emergency appointments are available for existing Service Users through their Community Mental Health Team.

The Crisis service at the Emergency Department at University Hospital Limerick also continues to be available for both existing and new service users and can be contacted on 061 301111 (24/7). Additional Crisis Services are available in Clare (087 7999857) and Tipperary (086 830 6663) until 3am.

For professionals there is a national helpline available for support. A local helpline was also available for staff throughout 2020 during the Covid Pandemic. Mid West Mental Health Services have also established a staff welfare forum to engage with staff around their needs during the pandemic. Psychosocial support training was provided through HSE Psychology services during the pandemic to facilitate line managers to support their staff.

M. Bridgeman, Chief Officer, Mid West Community Healthcare

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| W92Q2924 | Can the provision of in-hospital support be increased for each County during the current pandemic please. Professionals working in Ennis General have asked that further support be provided particularly to address those with acute psychiatric illness/distress? | Clr S Crawford |
|-----------------|---|-----------------------|

Both Acute Psychiatric Units (Unit 5B UHL and APU at Ennis General) remain open to people requiring acute hospital treatment in the Mid West. Additional capacity has been secured with a Private Hospital should the need arise for the Mid West to have access to additional beds. To date there has been no requirement/demand to access the additional beds secured.

M. Bridgeman, Chief Officer, Mid West Community Healthcare

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| W92Q2925 | Can the reopening of the ECT Centre at Ennis General Hospital be explored to support those patients in need of same. The ECT Suite in University Hospital Limerick ceased ECT in March 2020 and remains closed. | Clr S Crawford |
|-----------------|---|-----------------------|

ECT is provided for the region in University Hospital Limerick (UHL). This is where the specialist facility is located and the specialist staff. ECT was suspended during Covid due to limited access to theatre at UHL as a result of the impact of the virus. ECT has now resumed and can be provided at UHL if required. Private arrangements were funded by Mid West Mental Health Services for ECT to take place in private hospitals for clients who required the service during the time when ECT was suspended locally.

M. Bridgeman, Chief Officer, Mid West Community Healthcare