Minutes of Regional Health Forum West Meeting held on Tuesday, 27th September, 2016 at 2.00pm in Room 1, Education Centre, HSE Offices, Merlin Park, Galway

Miontuairiscí Cruinnithe Chinn Bhliana an Fhóraim Réigiúnach Sláinte, a tionóladh ar an Mháirt 27th, Méan Fómhar, 2016 ag 2.00 .i.n, i Seomra 1 an tIonad Oideachais, Feidhmeannacht na Seirbhíse Sláinte, Páirc Mheirlinne, Gaillimh

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

Chairperson: Cllr Tom McNamara

In attendance:

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

576/65/16 Minutes of previous meeting 28th June, 2016

The minutes of the previous meeting held on the 28th June, 2016 were proposed by Cllr John Carroll, seconded by Cllr David Doran and adopted.

577/65/16 Matters Arising:

W63Q1794 – Post of Registrar in Thurles

Cllr David Doran is seeking an update on recruitment of the Registrar in Thurles. Action: T Canavan to revert to Cllr Doran with the update on the recruitment of the Registrar in Thurles.

RHF Plaque for Chairpersons:

Cllr. Padraig Conneely asked for an update on the progress of the plaque.

Action: RHF office confirmed to Cllr P Conneely that this was work in progress and they hoped to have it erected for the November 2016 meeting.

578/65/16 Chairman's Address:

New Councillors:

The Chairman welcomed Cllr Michael Loftus of Mayo Co Co who replaced Cllr Brendan Mulroy and Cllr Michael Sheahan, Limerick Co Co who replaced Senator Marie Byrne to their first meeting.

Significant Issues:

T Canavan highlighted some significant issues/good news stories that occurred in the hospital groups and CHO areas since the last meeting.

579/65/16 Questions:

W65Q1840 – Structure & Staffing Levels of bases of NAS in Co Donegal

Cllr G Crawford asked P O'Riordan to thank his colleagues who travelled and provided an informative meeting on the ambulance services with him and Forum members the previous week in Donegal. Action: P O'Riordan to organise a similar meeting for the other councillors in each of the areas.

Action: P O'Riordan to circulate the Capacity Review report he referred to at the meeting to each member of the Forum.

W65Q1841 – Social Workers for the Elderly in Tuam

Action: T Canavan to revert to Cllr Killilea with the breakdown of the social workers in Galway city.

W65Q1847 – New ED for Galway University Hospital

Cllr Mary Hoade proposed and Cllr Terry O'Flaherty seconded the proposal to send a deputation of 4 Councillors and the Chairman to meet the Minister for Health to discuss the new ED department for Galway University Hospitals.

Action: The Executive to forward the request for a deputation to meet the Minister for Health regarding a new ED for Galway University Hospitals.

W65Q1849 – Nurse recruitment to GUH/MPUH since 28-6-16

Action: A Cosgrove to revert to Cllr M Hoade with the number of nurse retirees during the period they recruited 113 nurses.

W65Q1854 – MPUH & GUH Park and Ride service

Action: A Cosgrove to revert to Cllr N McNelis with the total number of car park spaces in Merlin Park Hospital.

W65Q1858 – Overcrowding at A&E UL Hospital

Cllr Ger D'Arcy wished to put on record his acknowledgement of the good work the staff in UL hospital do and compliment the care he and his family received the previous week in the hospital.

W65Q1869 – Dentist in South Leitrim

Action: J Hayes to revert to Cllr Finola Armstrong McGuire with more specific information on the duration the dentist will be on study leave and the full replacement details.

W65Q1872 – Cancellation of Medical Procedures & Operations in MUH

Action: A Cosgrove to revert to Cllr Ml Kilcoyne with this data for Mayo in the next month.

W65Q1874– Delay in Ambulance patient to MUH

Action: P O'Riordan to seek information on the patient in order to analyse the incident with the call centre.

W65Q1880 – Staffing levels at Letterkenny University Hospital

Action: A Cosgrove to revert to Cllr McMonagle with an update on the filling of the post of Dietician in Letterkenny University Hospital.

W65Q1881 – Recruitment of an Additions Councillor for Donegal

Action: J Hayes to confirm the start date of the addiction counsellor for Donegal to Cllr G McMonagle, the number of referrals waiting and when they will receive their treatment?

580/65/16 - Motions

W65M66 – Roll out of Primary Care for the region

This motion was proposed by Cllr Ciaran Brogan, seconded by Cllr. Gerry Crawford and adopted. Action: It was agreed by the Executive that a presentation on Primary Care be given at a Regional Health Forum committee meeting.

W65M67 – Park & Ride facility from MPUH to GUH

This motion was deferred to the November meeting.

W65M68 – Re-open the A&E in Roscommon University Hospital

This motion was proposed by Cllr Paddy Kilduff, seconded by Cllr. Tony Ward and adopted. Action: This motion will be directed to the Minister for Health for a response.

Suspension of Standing Orders for 10 minutes

Cllr Ann Norton proposed a suspension of standing orders and it was seconded by Cllr PJ Ryan to discuss the plan for the recently announced bed bureau for the UL Hospital Group.

This suspension of standing orders was agreed by a majority vote.

CEO, UL Hospital Group explained the idea of the pilot project and assured the councillors she would keep them informed in the future of any changes in arrangements within the hospital group.

581/64/16 - Any Other Business:

582/64/16 Date & time of Next Meeting:

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

The next **Regional Health Forum meeting** is now scheduled to take place on Tuesday, 22nd November, 2016 at 2pm in Galway.

This concluded the business of the meeting.

Signed:

Cathaoirleach/Chairman Adopted at the Regional Health Forum West meeting

QUESTIONS & RESPONSES REGIONAL HEALTH FORUM WEST – 22nd November, 2016

NUMBER	QUESTION	RAISED BY	Page No:
W66Q1890	Rapid response vehicles for North Tipperary.	Cllr D Doran	2
W66Q1891	Helipad for Thurles.	Cllr D Doran	2
W66Q1892	Rapid response ambulance for North Tipperary.	Cllr J Carroll	2-3
W66Q1893	GP referral to the MAU Nenagh.	Cllr J Carroll	3-4
W66Q1894	Dental x-ray equipment at Merlin Park Hospital.	Cllr T O'Flaherty	4
W66Q1895	Dental x-ray equipment at Merlin Park Hospital.	Cllr T O'Flaherty	4
W66Q1896	Scheduling of Orthodontic patients.	Cllr T O'Flaherty	4
W66Q1897	Orthodontic waiting lists.	Cllr T O'Flaherty	4-5
W66Q1898	Communications Staff in Saolta.	Cllr P Conneely	5
W66Q1899	Outstanding Insurance monies Saolta Group.	Cllr P Conneely	5-6
W66Q1900	Charity Donation.	Cllr P Conneely	6
W66Q1901	External Review NAS ED Department GUH.	Cllr P Conneely	6
W66Q1902	Mental Health patients in Co. Roscommon	Cllr T Ward	6-7
W66Q1903	Completion of Review of Mental Health Services in Roscommon.	Cllr T Ward	7
W66Q1904	Mental Health Budget for Roscommon for 2014-2017.	Cllr T Ward	7
W66Q1905	School Dental Service in Ballyforan.	Cllr T Ward	7
W66Q1906	Primary Care Centre in Ennis.	Cllr's T McNamara	7-8
		& A Norton	0
W66Q1907	Operating Theatres at UL Hospital.	Cllr M McCreesh	8
W66Q1908	Fire Certificate at ED UL.	Cllr M McCreesh	8
W66Q1909	Additional staff/beds for ED UL.	Cllr M McCreesh	8
W66Q1910	Staff car parking at UL.	Cllr M McCreesh	8
W66Q1911	X-ray equipment for Orthodontics Merlin Park.	Cllr M Hoade	9
W66Q1912	New applications for Home Help in Galway.	Cllr M Hoade	9
W66Q1913	Funding for extra Home Care Packages Galway.	Cllr M Hoade	9
W66Q1914	Operating Theatres at UHG.	Cllr M Hoade	9-10
W66Q1915	Full Capacity Protocol at Letterkenny University Hospital.	Cllr G McMonagle	10
W66Q1916	Nurses employed at Letterkenny University Hospital.	Cllr G McMonagle	10
W66Q1917	Bed numbers at Letterkenny University Hospital.	Cllr G McMonagle	10
W66Q1918	Completion date for extension at Raheen Community Hospital, Clare.	Cllr P Burke	10

NUMBER	QUESTION	RAISED BY
W66Q1890	Is it the intention of the HSE to retain the current Rapid Response vehicles	Cllr D Doran
	network that covers North Tipperary since the closure of the A&E in Nenagh.	

The National Ambulance Service can confirm that the review referenced is a local review within the overall Mid-West area which is looking at the overall activity within the area to ensure that the NAS are optimising their resources in the area .i.e. correct mix of staff – Advanced Paramedic and paramedic, management of resources by day of week, time of day.

The review is being conducted following a number of developments across the MW.

- The expansion of the Intermediate Care Service to manage the transport and care of non-emergency patients.
- The introduction of the new National Emergency Operations Centre.
- The recent Capacity Review Lightfoot report.
- Ambulance Service has access to up to date data to conduct the review.

This has allowed the service to conduct a review across the MW including Tipperary, Limerick and Clare.

15 Intermediate Care staff were assigned to the MW in 2014 to cater for low acuity calls such as discharges from the hospital and transfer of non-emergency patients. In 2013 the front line emergency crews were utilised for this purpose looking after up to 300 patient transfers per month. This has now reduced to approximately 30 per month with front line Advanced Paramedic and Paramedic emergency crews now concentrating on emergency calls.

There is no intention to reduce service levels in the Mid-West area and any outcome of a review will be subject to full discussions at national level which will include service delivery and enhancement as an integral part of such discussions.

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

W66Q1891	When is the HSE going to provide a dedicated Helipad in Thurles, currently the Air	Cllr D Doran
	Ambulance is landing in Thurles Rugby club which is not adequate?	

The HSE has no current plans to build a Helipad in Thurles. All present sites have been reviewed in conjunction with the Aer Corps and the Coastguard with regard to their suitability.

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

W66Q1892	Please advise current HSE policy in relation to the attached policy issues:	Cllr J Carroll
	Ambulance - rapid response issue under threat at nenagh hospital. As a result of	
	the recent loss of the accident and emergency at nenagh hospital this service was	
	prioritised by the HSE, to get patients to limerick as speedily as possible It now	
	seems to the public in north Tipperary that these commitments are being diluted.	

The National Ambulance Service can confirm that the review referenced is a local review within the overall Mid-West area which is looking at the overall activity within the area to ensure that the NAS are optimising their resources in the area .i.e. correct mix of staff – Advanced Paramedic and paramedic, management of resources by day of week, time of day.

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

W66Q1893	Please advise current HSE policy in relation to the attached policy issues:	Cllr J Carroll
	Referral process by general practitioners to the medical assessment unit at	
	Nenagh is now being replaced by a direct referral process to a bed bureau in	
	Limerick. This is causing much annoyance and concern in north Tipperary and	
	Clare and again previous commitments by the HSE are now being dishonoured, in	
	order to present a more organised picture of the bottlenecks at Limerick regional	
	hospital.	

The Emergency Department at University Hospital Limerick is one of the busiest in the country with over 60,000 attendances annually. The numbers presenting continue to increase year-on-year and this has resulted in an increase in the numbers waiting on trolleys for admission.

UL Hospitals Group regrets that any patient has to face long waits for admission. Our new ED, which will be three times the size of the existing department at UHL, will open next year and will immeasurably improve the patient experience. Adding bed capacity is also part of the picture and UL Hospitals has long-term plans to add a 96-bed, single-room inpatient block at UHL.

In the meantime, it is imperative that all stakeholders examine and collaborate on how we can make processes more efficient to ensure that patients are directed to the most appropriate location for their care. The Bed Bureau is one of the measures UL Hospitals Group believes will help in this regard, with the overall aim of reducing the numbers waiting on trolleys.

The Bed Bureau will create a single point of contact for GPs and indeed for referring consultants. They will have the assurance that their call will be answered immediately and that they will be speaking to a trained case manager – typically a nurse – who will be able to go through a suite of options aimed at directing the patient along the most appropriate case pathway.

The system will be supported by software that will allow referring clinicians to access real-time information on the availability of beds across UL Hospitals Group.

It is not the intent of the Bed Bureau to in anyway impinge on the clinical judgement and clinical autonomy of referring GPs who are best-placed to recommend a course of action for their patients. For example, any patient who a GP feels needs the intervention of critical care specialists (coronary care, ICU, HDU etc) will be directed straight to UHL.

There may be other instances where a patient may be more appropriately referred to the next available slot in one of the Medical Assessment Units in Ennis, Nenagh or St John's rather than presenting at the ED in UHL. The overall aim is to reduce unnecessary hospital presentations across the board.

The Bed Bureau is being introduced on a trial basis in the coming weeks. It will initially be trialled with a small number of

GPs in order to snag and modify the system. A wider rollout will then commence.

The Bed Bureau is a cost-effective initiative that has the potential to significantly improve patient flows; improve the patient experience and alleviate work pressures on staff. The effectiveness of the initiative will be reviewed on a continuous basis and should it be demonstrated that it is having a positive impact, further measures will be implemented, including giving GPs greater ability to refer patients to rapid-access outpatient clinics.

Discussions between hospital consultants and GPs in the MidWest are part of the genesis of the Bed Bureau project. The initiative has been discussed with GP representatives in the MidWest through their representatives on the UL Hospitals Group GP Forum. GPs made positive contributions on the Bed Bureau at both the June and the September meetings of the GP Forum.

Further consultation is planned with GPs and other stakeholders ahead of the planned rollout.

The Bed Bureau is aimed at creating as seamless a care pathway as possible, ensuring our patients get their care in the most appropriate location and in the most timely manner achievable.

C Cowan, CEO UL Hospital Group

W66Q1894	What is the current situation regarding the replacement of dental x-ray equipment	Cllr. T O'Flaherty
	at the Radiography Department at Merlin Park University Hospital and how long is	
	it likely to be before orthodontic treatment is resumed.	

A dental x-ray machine for the Orthodontic Unit at Merlin Park Hospital has been procured and was delivered on site yesterday, Monday, November 21st. Following installation and commissioning, it is expected to be operational by Friday 25th November, once clinical licence and application training have been completed.

This piece of equipment was listed on our "End of Life" Equipment replacement programme, 2nd phase priority list in 2016. However, no allocation was received from the HSE equipment replacement Programme during 2016. Due to the ongoing critical situation, it has now been purchased from the hospital revenue budget.

All patients have been contacted to reschedule treatment dates which are expected to commence early December once equipment has been reinstated.

A. Cosgrove, COO, Saolta University Health Care Group

W66Q1895	When did the Orthodontic Department at Merlin Park stop seeing new patients as	Cllr. T O'Flaherty
	a result of current x-ray equipment bring deemed to be at the end of its working	
	life and a safe diagnostic service for patients deemed no longer possible, leading	
	to the cancellation of appointments for patients on a waiting list for years also	
	what is the cost and nature of the equipment to be replaced and the current	
	situation regarding the sourcing of funding for the replacement?	

The decision was made to contact all new patients requiring x-ray on Wednesday, 12th October 2016 once the dental equipment was deemed out of use.

The nature of the equipment to be replaced is two items of Dental x-ray equipment ie OPG/Ceph and Inter oral x-ray equipment. This equipment allows Clinicians to take lateral cephalometric radiographs, dental pantomograms and intraoral radiographs.

The cost is approximately €68,135.85 inc of Vat.

A. Cosgrove, COO, Saolta University Health Care Group

W66Q1896	What steps if any has been taken to make arrangements for patients to be seen at	Cllr. T O'Flaherty
	other hospitals, either within the Saolta Hospitals Group or elsewhere, and are	
	patients on the waiting list entitled to attend a private orthodontist under the	
	National Treatment Purchase Fund.	

Additional supports were utilised during this down time where approximately 20 of the patients were sent to UHG for radiographs and an additional 10 radiographs were facilitated by the Community Dental Service in Mayo.

There is no National Treatment Purchase fund for orthodontics in the Saolta region at this time.

A. Cosgrove, COO, Saolta University Health Care Group

W66Q1897How many patients are currently waiting for orthodontic treatment or assessment in Galway, what age ranges are they in, and how long have they been waiting for treatment.Clir. T O'FlahertyThe following is the Galway, Mayo and Roscommon (common) Orthodontic Waiting List: • Assessment Waiting List : 1634 - Wait time: 9 months • Treatment Waiting List : 2748 - Wait time: 3.25 years • Patients in Active Treatment: 3065Image: 9-16 years of age on the treatment waiting list.A. Cosgrove, COO, Saolta University Health Care GroupClir P ConneelyW66Q1898How many people are employed by SUHG in the area of communications and public relations directly and on a contract basis (including Setanta Communications)? What is the annual cost of employing these? Can a breakdown be provided of how these staff are assigned (eg to particular hospitals, services, competences, etc.)? How many communications or public relations staff attendedClir P Conneely	<u> </u>				
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by most recent meeting of the Regional Health Forum?	W66Q1898	public relations directly and on a contract basis (including Setanta Communications)? What is the annual cost of employing these? Can a breakdown be provided of how these staff are assigned (eg to particular hospitals, services, competences, etc.)? How many communications or public relations staff attended	Cllr P Conneely		
The Communications Department of the Saolta University Health Care Group provides a full range of communication	The Commun		ge of communications		

The Communications Department of the Saolta University Health Care Group provides a full range of communications services to the Group and its six constituent hospitals of: Galway University Hospitals; Sligo University Hospital; Letterkenny University Hospital; Mayo University Hospital; Portiuncula University Hospital; and Roscommon University Hospital. There are two employees in the Saolta Hospital Group Communications Department. Support services, including provision of out of hours and weekend cover for the Group and all of its constituent hospitals, are provided by an external agency, Setanta Communications Ltd, which is contracted to provide 104 company days of communications support per annum. The tendering process for this contract took place through HSE National Procurement. The support is necessary to manage the internal and external communications requirements, for a Group of six hospitals across seven sites, employing 9000 staff and serving a catchment in excess of 700,000 people.

Central HSE communications support ceased from August 2014. The resources are deployed flexibly in response to the requirements of the Group and the six constituent hospitals.

The two staff assigned in the Saolta Group are at Grade 5 and Grade 8. Please see the HSE website for salary scales. <u>http://www.hse.ie/eng/staff/Benefits_Services/pay/nov13.pdf</u>

The amount paid to date to Setanta Communications in 2016 to date is €100,737.

There is always one Saolta Communications staff member at each Forum meeting and that was the case at the September meeting. In addition at that meeting a Communications Officer from CHO Area 3 was in attendance as was a Communications Officer from the UL Hospital Group.

From time to time other HSE staff attend the meeting as observers.

A. Cosgrove, COO, Saolta University Health Care Group

W66Q1899	How much money currently owed to each hospital within the SUHG by	Cllr P Conneely
	private health insurance companies is outstanding due to delays by consultants in	
	signing off on claims? How long has this money been outstanding, and what	
	efforts are being made to rectify the situation?	

Private Patient Debtors - 31/10/2016

Hospital	Category	Region	Qty of Claims Awaiting Primary Consultant Action (less than 1yr)	Value of Claims Awaiting Primary Consultant Action (less than 1yr)	Qty of Claims Awaiting Primary Consultant Action (greater than 1yr)	Value of Claims Awaiting Primary Consultant Action (greater than 1 yr)	Qty of Claims Awaiting Non Primary Consultants Action	Value of Claims Awaiting Non Primary Consultants Action
Galway University	Statutory	West						
Hospitals	Statutory	West	2,566	5,684,654	207	414,087	144	196,651
Letterkenny General	Statutory	West	693	1,201,932	14	7,234	18	22,371
Mayo General	Statutory	West	786	1,174,805	372	283,291	144	84,055
Portiuncula Acute	Statutory	West	612	483,494	166	121,937	153	47,361
Roscommon General	Statutory	West	378	235,280	20	3,357	56	6,234
Sligo General	Statutory	West	952	1,723,792	50	97,520	126	141,985
Total			5,987	10,503,957	829	927,426	641	498,657

A. Cosgrove, COO, Saolta University Health Care Group

W66Q1900	Will you confirm that Galway PCCC received a cheque for €300,000 in May 2009,	Cllr P Conneely
	which was intended as a donation for the benefit of a children's cancer charity -	
	but only €50,000 of the amount was ever provided to the intended beneficiary?	
	Why was no money provided to the charity until 2011? Why the balance was	
	never paid to the charity?	

It appears that this question relates to the funding relationship between two distinct Voluntary Groups, the first being Boys Hope/Girls Hope and the second group now known as Hand in Hand.

Boys Hope/Girls Hope operated as a Voluntary Agency during the 1990's and 2000's in the Galway area. At that time it was funded almost completely by the Health Services. When it ceased operating around 2005 and following settlement of its affairs, it was obliged to return any remaining assets to the Health Service Executive. This in turn occurred in 2009 and it was hoped that these monies together with an additional funding stream of up to €150,000 over three years could be made available to Hand in Hand. This would have totalled €450,000.

Because of the very difficult financial position the Health Service experienced during this period, the HSE was not in a position to follow through with this funding. Hand in Hand were notified swiftly of the changed financial position in 2009 and they in turn took immediate and appropriate actions in this changed context. In 2010 the HSE was able to provide €50,000 in funding to Hand in Hand.

The Chief Officer met with representatives of Hand in Hand on 11th November, 2016 to discuss the historical funding position of this Voluntary Organisation with the HSE. Further correspondence has issued from the Chief Officer to this Voluntary Group explaining the historical position but also indicating a willingness to look at the funding position going forward. Further discussions will be required with this Group in order to finalise this process. We expect these discussions to take place over the coming weeks.

T. Canavan, Chief Officer, CHO 2

W66Q1901	Please provide an update on an external review being conducted in conjunction	Cllr P Conneely
	with the National Ambulance Service in relation to the death of an elderly woman	
	in the Emergency Department of UHG in September, and explain the	
	circumstances that gave rise to this review.	

The circumstances of this case are being reviewed by an external Emergency Department Consultant in conjunction with the National Ambulance Service and the Saolta University Health Care Group.

The Saolta University Health Care Group and the National Ambulance Service have offered the family concerned their deepest sympathy and will be communicating directly with them in relation to the review process.

A. Cosgrove, COO, Saolta University Health Care Group & P.O' Riordan, Area Operations Manager, West National Ambulance Service

W66Q1902	Can the HSE inform the members of this Forum as to how many mental health	Cllr T Ward
	patients are currently receiving treatment in County Roscommon? How many of	
	those patients are hospitalised at the psychiatric units and other centres in the	
	county?	

There are currently 78 Service Users in residence at Mental Health Sites in County Roscommon as per the below schedule.

	Total In Patients
Roscommon Psych Unit	22
Rosalie Unit	19
Knockroe House	3
Demense View	4
T Na gCarda 1	5
T Na gCarda 2	8
Boyle	6
Strokestown	7
Athleague	4
Total	78

There are an additional 734 service users being treated by Consultant Led Multi Disciplinary Teams across Roscommon (GR6) on an outpatient basis.

T. Canavan, Chief Officer, CHO 2

W	66Q1903	Can the HSE inform the members of this Forum of the timeline for completion of	Cllr T Ward
		the review under the vision for change to the Mental Health Service in County	
		Roscommon?	
The	e review of	the Mental Health Services in Roscommon was commissioned by the National Direct	ctor for Mental Health
and	d is being c	onducted independently of the HSE.	

We expect the review will be completed over the coming weeks and the Chief Officer is in regular contact with the National Director regarding the time frame for its conclusion.

T. Canavan, Chief Officer, CHO 2

W66Q1904Can the HSE inform the members of this Forum as to what amount of funding that
was made available to the Mental Health Services in County Roscommon for 2014,
2015, 2016 & 2017?Clir T Ward

		Actual	Actual
MCC/SCC	Jan to Oct 2016	2015	2014
Roscommon Psychiatry	€11,926,353.00	€12,664,152.00	€12,159,638.00
CAMHS Roscommon	€874,111.00	€955,191.00	€963,257.00
Total	€12,800,464.00	€13,619,343.00	€13,122,895.00

Note: Budgets have not been allocated for 2017 at this time.

T. Canavan, Chief Officer, CHO 2

W66Q1905	Can the HSE inform the members of this Forum of the reason for the closure of	Cllr T Ward
	the School Dental Service at Ballyforan, Co Roscommon. The School Dental Service	
	has been provided for the children of the catchment area in Ballyforan for the past	
	35 years.	

The school dental service at Ballyforan has been suspended pending the filling of the post of dentist in South Roscommon. This post has been advertised and interviews have taken place however due to budgetary constraints no job offer has yet been made. The position will be examined in the context of the Service Plan 2017.

T. Canavan, Chief Officer, CHO 2

W66Q1906	I call on the HSE West to outline its plans for a new Primary Care Centre in Ennis;	Cllr's T McNamara
	where will this Primary Care centre be located and what is the timeframe for it to	& A Norton
	be operational.	

HSE Estates plan to advertise for expressions of interest to develop Primary Care Centres in Ennis in the coming weeks. The HSE will be seeking to develop 2 centres within the town. The location for the centres will be dependent on the assessment of the expression of interests received. The time frame for development of Primary Care Centres can be between 2-4 years.

B Gloster, Chief Officer, HSE Mid West Community Healthcare

W66Q1907	How many operating theatres were closed at University Hospital Limerick during	Cllr M McCreesh
	the Midterm break period in November 2016 under the Peri-operative Directorate	
	plans to ensure that only emergency surgery would be performed? How many	
	planned non-emergency operations were cancelled or postponed during these	
	days?	

All of the elective operating theatres were closed in UHL for the week of Oct 31st. There was no planned non-emergency surgery cancelled or postponed as this was a closure that has been planned months in advance and therefore no patients were scheduled for surgery during this week.

C Cowan, CEO UL Hospital Group

	W66Q1908	Are there any outstanding fire certificate compliance concerns with regard to the	Cllr M McCreesh
		Emergency Department at University Hospital Limerick? The Chief Fire Officer visit	
		to the ED on Sunday 30 st October 2016 highlighted a number of serious concerns.	
		What immediate measures have been taken to ensure fire safety compliance?	
Г	Thora are no	fire contificate concerns outstanding in the CD department at UL Upspital	

There are no fire certificate concerns outstanding in the ED department at UL Hospital.

Subsequent to the recent Fire Officer's site visit every effort is being made to ensure compliance with the recommendation of having no greater than 16 additional trolleys in the department. This is continuously monitored.

C Cowan, CEO UL Hospital Group

W66Q1909	Have any additional staff or beds been assigned to the Emergency Department at	Cllr M McCreesh
	University Hospital Limerick in order to make some significant reduction on the	
	continuing high numbers of patients waiting on trolleys for long periods?	

Patients in the ED are cared for on trolleys before they are discharged or admitted to a ward. The number of trolleys in use fluctuates depending on the number of patients in the ED on any given day.

When the ED is busy, additional staff are deployed to the ED, either from other areas/wards across the hospital or through agency staff.

C Cowan, CEO UL Hospital Group

W66Q1910	Have any additional parking spaces been made available for staff at University	Cllr M McCreesh
	Hospital Limerick? What is the status of the temporary 90 space car park that	
	required planning permission one month after the opening of the new public car	
	park?	

Currently there are 400 public parking spaces at University Hospital Limerick (UHL), along with 28 public disabled parking spaces available. In additional there are 765 staff car parking spaces at UHL

Visitor car parking spaces were lost when the building of the new Dialysis Unit and the enabling works for the new ED got underway in UHL. To compensate for the loss of spaces, temporary planning permission for an interim car park for 90 parking spaces was granted by the local authority.

UL Hospitals Group have submitted a planning application to Limerick City and County Council to retain planning permission for this car park. Pending this decision, which is expected by the end of the year, the car park remains open and in operation.

No staff parking were made available in the new underground car park which opened in October with the exception of teams on-call for STEMI (cardiac) patients in the Critical Care Block.

C Cowan, CEO UL Hospital Group

W66Q1911	Can you confirm to me if the X ray machine in Orthodontics has been repaired.	Cllr M Hoade
	How many appointments were cancelled as a result of it not working. What is the	
	current number of children on the waiting list, and what is the longest waiting	
	time from once they are assessed.	

A dental x-ray machine for the Orthodontic Unit at Merlin Park Hospital has been procured and was delivered on site yesterday, Monday, November 21st. Following installation and commissioning, it is expected to be operational by Friday 25th November, once clinical licence and application training have been completed.

This piece of equipment was listed on our "End of Life" Equipment replacement programme, 2nd phase priority list in

2016. However, no allocation was received from the HSE equipment replacement Programme during 2016. Due to the ongoing critical situation, it has now been purchased from the hospital revenue budget.

All (130) patients have been contacted to reschedule treatment dates which are expected to commence early December once equipment has been reinstated.

The following is the Galway, Mayo and Roscommon (common) Orthodontic Waiting List:

- Assessment Waiting List : 1634 Wait time: 9 months
- Treatment Waiting List: 2748 Wait time: 3.25 years
- Patients in Active Treatment: 3065

Age range: 9-16 years of age on the treatment waiting list.

A. Cosgrove, COO, Saolta University Health Care Group

W66Q1912 Can you confirm if we are currently allocating home help hours in the Galway area, at the last meeting I was informed that we were overspent on this. Are new applications being considered at this time?

Cllr M Hoade

We are continuing to allocate Home Help hours on a prioritisation basis as the financial challenge still exists. All new applications are assessed and prioritised by a multi-disciplinary decision making forum. Those with the highest need and categorised as priority 1 (highest need) are awarded a service in line with their assessed need. Those with a priority 2 rating, while determined to require a service, are placed on a waiting list and are processed as hours become available from existing clients.

T. Canavan, Chief Officer, CHO 2

W66Q1913	What extra funding has been provided for home care packages in Galway in the	Cllr M Hoade
	budget, what is the current number of patients in UCHG awaiting discharge,	
	(waiting on home help packages, home help hours or nursing home places based	
	on Fair Deal.	

Funding has been provided for GUH for 6 additional Home Care Packages each week from 1st October '16 to the end of February 2017 to support the Winter Plan. All clients supported during this period will continue to be funded beyond February '17 while their need exists.

GUH delayed discharges varies on a daily basis depending on activity. The delays reported are in relation to such cases as Ward of Court applicants, Long Term Care applicants, Rehabilitation and specialised Community Supports.

T. Canavan, Chief Officer, CHO 2 & A. Cosgrove, COO, Saolta University Health Care Group

W66Q1914	Are all UCH theatres operational at present, how many staff does it take to staff	Cllr M Hoade
	an operating theatre, and how many are open in Galway at the weekends.	

UHG Theatres Complex is currently supporting approximately 90 sessions per week, subject to staffing levels and the Merlin Park theatre supports 16 sessions.

These sessions are staffed with Nursing, Anaesthesia and Surgical resources supported with Portering, Health Care Assistant, Cleaning staff which will vary, depending on the complexity of each case.

Weekend Theatres and scheduled on call arrangements are in place over Saturday and Sunday to accommodate general emergencies, Orthopaedic, Cardiac and Gynae Theatre.

A. Cosgrove, COO, Saolta University Health Care Group

W66Q1915	How many times has "The Full Capacity Protocol" been deployed at Letterkenny	Cllr G McMonagle
	University Hospital in 2016 and can I be told what the criteria for initiating the	
	Protocol at the Hospital and what is the effect on wider services for the	
	hospital for Patients/In Patients when its deployed?	

LUH has a formal Bed Management Escalation policy in place to respond to demands for in-patient beds on a day to day basis. The different stages of bed capacity are colour coded to identify the capacity state, i.e. green is sufficient capacity to cater for all demands both unscheduled and scheduled, amber for state of escalation, red for insufficient capacity via normal measures and finally black when extraordinary measures are required such as ambulance diversion, opening up areas not normally used for in-patient beds such as day services and such.

The Full Capacity Protocol is activated in both status red and black. The decision to activate the FCP can only be taken as a last resort when all other measures such as additional ward rounds by consultants, targeted diagnostics towards probable discharges, have been followed and can only be authorised by the Duty Manager, General Manager or Clinical Director. Bed Management meetings take place on a daily basis, both on a formal and as required basis where all stakeholders such as the on-call consultants in relevant specialties, nurse management and general management attend.

There is on-going contact with service colleagues in community services, especially with issues associated with admission avoidance and delayed discharges. The major impact of implementation of the FCP is that most of scheduled or planned admissions are deferred, consultants are requested to do additional ward rounds and patients are placed on in-patient wards in excess of bed designated areas. This measure has a direct affect on the hospital's ability to meet scheduled care demand as emergency admissions must take precedent over planned admissions. Since the 1st September, different elements of the FCP, mostly status red have been activated 30% of the time.

A. Cosgrove, COO, Saolta University Health Care Group

W66Q1916	What is the number of Nurses currently employed in Full Time/Part Time work at	Cllr G McMonagle
	Letterkenny University Hospital compared to the years 2010, 2011, 2012, 2013	
	2014, 2015?	

Date	Dec-10	Dec-11	Dec-12	Dec-13	Dec-14	Dec-15	Oct-16
Nursing	512.05	521.15	525.62	506.41	514.55	553.49	558.22

A. Cosgrove, COO, Saolta University Health Care Group

W66Q1917	What are the number of Beds at Letterkenny University Hospital and how many of	Cllr G McMonagle
	these are in constant use and how do these numbers compare with the years	
	2010, 2011, 2012, 2013, 2014, 2015?	

Number of Beds in Letterkenny University Hospital

2010	2011	2012	2013	2014	2015	2016*
308	302	294	300	314	325	325

A. Cosgrove, COO, Saolta University Health Care Group

W66Q1918	Cllr P Burke			
	Clare			
Construction is programmed to be completed by the end of this year and the building will be handed over to the HSE.				
Equipping of the building will be completed in the first quarter of 2017.				
B Gloster. Chief Officer. HSE Mid West Community Healthcare				