

**Minutes of Regional Health Forum West meeting was held on  
Tuesday, 28<sup>th</sup> July 2020 at 2.00pm by Zoom.**

Miontuairiscí Cruinnithe an Fhórait Réigiúnach Sláinte a tionóladh Dé Máirt, 28<sup>ú</sup> Iúil 2020 ag 2.00 trí súmáil

**Chairperson:** Cllr John Carroll

<b>Members Present</b>	<b>Members Present (continued)</b>	<b>Apologies</b>
Cllr Finola Armstrong McGuire	Cllr Michael Kilcoyne	
Cllr Declan Bree	Cllr Donagh Killilea	
Cllr Ciaran Brogan	Cllr Dara Mulvey	
Cllr Liam Carroll	Cllr Cillian Murphy	
Cllr Tom Conaghan	Cllr Martin McLoughlin	<b>Members Absent</b>
Cllr John Connolly	Cllr Gerry McMonagle	
Cllr Gerry Crawford	Cllr Martina O'Connor	
Cllr Albert Doherty	Cllr Daithí Ó Cualáin	
Cllr Francis Foley	Cllr John O'Hara	
Cllr Blackie Gavin	Cllr Pete Roche	
Cllr Donal Gilroy	Cllr Tony Ward	

**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)  
 John Hayes, CHO, Area 1  
 Colette Cowan, CEO, UL Hospitals Group  
 Norah Owens, Regional Health Forum Office  
 Marian Cavanagh, Regional Health Forum Office  
 Anna Lyons, Regional Health Forum Office

**737/89/20 Minutes of previous meeting – 23<sup>rd</sup> June, 2020**

The minutes of the previous meeting held on the 23<sup>rd</sup> June 2020 were proposed by Cllr Martin McLoughlin, seconded by Cllr Albert Doherty and adopted.

**738/89/20 Matters Arising:**

**Cllr M Kilcoyne requested responses to his questions submitted for the March Regional Health Forum.**

**Action:** Regional Health Forum office will forward the questions to the relevant Managers for response.

**W84Q2597: Cllr Declan Bree requested that the responses to his November 2019 question are circulated to all the members.**

**Action:** Regional Health Forum office to circulate responses to all the RHF Members.

**W88Q2700: The response to Ciaran Brogan's Question to be forwarded to all members when available.**

**Action:** Regional Health Forum office to forward response to all RHF Members when available.

**Cllr Michael Kilcoyne requested information regarding the National Guidelines for visiting Community Nursing Units**

**Action:** Breda Crehan-Roche to provide Cllr Michael Kilcoyne with the National Guidelines regarding the visiting of Community Nursing Units.

**739/89/20 Update on COVID-19**

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

**740/89/20 Questions:**

**W89Q2713: Update on the second Consultant Endocrinology Post in NW**

**Action:** Ann Cosgrove to provide Cllr G McMonagle with an update on this post.

**W89Q2723: Ambulance Service West Clare**

**Action:** Tony Canavan to liaise with the Ambulance Service for a more area-specific reply and respond to Cllr Cillian Murphy.

**W89Q2724 NAS/HSE Community First Responders**

**Action:** Tony Canavan to ask the Ambulance Services to contact Cllr Cillian Murphy regarding what resources are available to Community First Responder Groups.

**W89Q2727: Carndonagh and Buncrana CNU's**

**Action:** John Hayes to provide Cllr Albert Doherty with the exact number of Ard Aoibhinn patients and details of the patient impact.

**W89Q2728: Dunshenny House/JCM Decongregation**

**Action:** John Hayes to provide Cllr Albert Doherty with an update on the progress and timeframe of the use of Dunshenny House for decongregation purposes.

**W89Q2731: Income Limits changes for Medical Card eligibility.**

**Action:** Tony Canavan to liaise with the National Medical Card Unit regarding any changes to the Over 70's thresholds.

**W89Q2734: Special Care Dentistry in Galway.**

**Action:** Breda Crehan-Roche to advise Cllr Dáithí Ó Cualáin if the Special Care Dentistry is a stand-alone service in Galway.

**W89Q2737 Garda training for dealing with individuals with Mental Health illnesses.**

**Action:** John Hayes agreed to facilitate a meeting between the Donegal RHF Members, HSE and Chief Superintendent of Donegal regarding local arrangements needed for Gardai.

**W89Q2740: Vacant Positions in Primary Care, Community Healthcare West.**

**Action:** Breda Crehan-Roche to provide Cllr John Connolly with a more detailed response regarding the current vacancies in Primary Care.

**W89Q2742 “Attend Anywhere” CHO1 & W89Q2744 Staff Supports related to Covid 19 pressures.**

**Action:** Cllr G Crawford suggested a survey be done for the public and staff to give feedback on the systems used in CHO 1 Area regarding “Attend Anywhere” and Covid-19 staff supports.

**741/89/20 AOB:**

**742/89/20 Date & Time of Next Meeting:**

The next **Regional Health Forum** meeting will take place on Tuesday, 22<sup>nd</sup> September, 2020 at 2pm, the format of which will be advised to the members as soon as possible.

This concluded the business of the meeting.

Signed:

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Cathaoirleach/Chairman  
*Adopted at the Regional Health Forum West meeting*

## QUESTIONS AND RESPONSES

### REGIONAL HEALTH FORUM WEST – 22<sup>nd</sup> SEPTEMBER 2020

NUMBER	QUESTION	RAISED BY	PAGE No.
W90Q2745	Ambulance service in West Clare during July and August	Clr C Murphy	3
W90Q2746	Adult Diabetes Service in UL hospitals.	Clr C Murphy	3
W90Q2747	UL Hospitals group outpatient adult diabetes clinics.	Clr C Murphy	3 -4
W90Q2748	Waiting list for physiotherapy appointments at local community hospital Donegal.	Clr T Conaghan	4
W90Q2749	Update on radiographer appointment to Donegal, Killybegs & Shield community hospital?	Clr T Conaghan	4 -5
W90Q2750	Full Review of all Departments/Specialities at LUH	Clr G McMonagle	5
W90Q2751	Update on the 103 Bed Residential Care Centre in Letterkenny.	Clr G McMonagle	5 -6
W90Q2752	Reinstatement of Day Care Services (Mental Health) at St Conal's Hospital.	Clr G McMonagle	6
W90Q2753	Continuation of Treatment Abroad Scheme/Cross Border Directive re Brexit.	Clr G McMonagle	6 – 7
W90Q2754	Closure of 2 wards at Mayo University Hospital and its effect on trolley numbers	Clr M Kilcoyne	7 – 8
W90Q2755	Re opening dates for Day Care centres and supports for service users. (Galway City & County).	Clr D Killilea	8
W90Q2756	Waiting list numbers for elective surgery (including the time on waiting lists) in Galway hospitals and update on the new surgical units in Merlin.	Clr D Killilea	8 – 9
W90Q2757	Extra planned services are proposed for the Primary Care Unit in Tuam? Update on Xray/Ultrasound unit/Service for the Tuam area.	Clr D Killilea	9
W90Q2758	Planned role out of Flu Vaccinations for Galway, fee structure for GP Practices.	Clr D Killilea	9 – 10
W90Q2759	HSE Rental/free of charge premises in Sligo, a full and comprehensive reply.	Clr D Bree	10 – 11
W90Q2760	Inpatient and outpatient (by speciality) waiting list at SUH.	Clr D Bree	11 – 12
W90Q2761	Since Covid-19 began; no. of tests daily in Sligo, Leitrim; positive result number, deaths by county from Covid 19.	Clr D Bree	12 – 13
W90Q2762	Current vacancies at SUH; the grade of each vacancy; the length of time of each vacancy (in tabular format).	Clr D Bree	13
W90Q2763	Milltown House Carndonagh/HSE and Friends of James Connolly Hospital Carndonagh.	Clr A Doherty	13 – 14
W90Q2764	Resumption of Maternity Outreach Clinic Services in Inishowen, Carndonagh and Buncrana CNU's	Clr A Doherty	14
W90Q2765	What services are currently in situ or are being sought to reduce spiralling waiting lists, will the HSE seek assistance from Private Hospitals to reduce waiting lists?	Clr A Doherty	14
W90Q2766	Secure resumption of transport facilities to Respite and Day care services?	Clr A Doherty	14-15
W90Q2767	Health Inspections frequency at the Patients' Food Preparation Area in MUH following recent incident.	Clr M Kilcoyne	15
W90Q2768	Covid 19 Testing centres in operation in Mayo; number of staff, working hours per day, where are the Covid tests in Mayo currently being analysed?	Clr M Kilcoyne	15
W90Q2769	Average number of outpatients seen at MUH each week during the month of August 20?	Clr M Kilcoyne	15
W90Q2770	Mental Health Services and staffing - Sligo	Clr D Gilroy	15 – 16
W90Q2771	Additional Consultant Geriatrician services for Sligo Leitrim West Cavan area to care for and achieve early diagnosis of Dementia/Alzheimer's	Clr D Gilroy	16-17

<b>W90Q2772</b>	Update on the Primary care units at Cliffoey and Carrigans Co. Sligo, and what services for senior citizens will be maintained at these units when the new primary care centres in Grange and satellite centre at Drumcliff are built.	<b>Cllr D Gilroy</b>	<b>17</b>
<b>W90Q2773</b>	Freestyle Libre Blood Glucose Monitoring system for Over 21's re LTI Card	<b>Cllr D Gilroy</b>	<b>17 – 18</b>
<b>W90Q2774</b>	Orthodontic services in Merlin Park, Galway, waiting time added, recommencement of Service?	<b>Cllr M O Connor</b>	<b>18</b>
<b>W90Q2775</b>	Onerous delay in Staff Nurse replacement - UHG	<b>Cllr M O Connor</b>	<b>18 – 19</b>
<b>W90Q2776</b>	Update on location and commencement dates of Day Hospital Galway City.	<b>Cllr M O Connor</b>	<b>19</b>
<b>W90Q2777</b>	Annual Leave - UHG.	<b>Cllr M O Connor</b>	<b>19</b>
<b>W90Q2778</b>	No of social workers employed in Galway city and county? Breakdown of vacancies and location of vacancies?	<b>Cllr D Ó Cualáin</b>	<b>19 – 20</b>
<b>W90Q2779</b>	Update on a Primary Care Centres for Knocknacarra, Moycullen and Spiddal? Plans for a Primary Care Centre in the Casla/Carraroe or Lettermore area?	<b>Cllr D Ó Cualáin</b>	<b>20</b>
<b>W90Q2780</b>	Cleaning procedures for the internal cleaning of HSE National Ambulance Service West vehicles in relation to Covid-19.	<b>Cllr D Ó Cualáin</b>	<b>20 – 21</b>
<b>W90Q2781</b>	What plans are in place for the upcoming winter months in GUH/Acute and Community settings, if extra capacity identified/ additional staff?	<b>Cllr D Ó Cualáin</b>	<b>21 – 22</b>
<b>W90Q2782</b>	Update on the 50 bed replacement ward at PUHB and timeline?	<b>Cllr Dr E Francis Parsons</b>	<b>22</b>
<b>W90Q2783</b>	Increase in mental health issues from Covid 19 across all age groups. How are the health services planning to address the increased need for Child and Adolescent mental health services?	<b>Cllr Dr E Francis Parsons</b>	<b>22 – 23</b>
<b>W90Q2784</b>	What provision or extra measures has HSE West made to support family carers providing care at home during the current COVID-19 crisis?	<b>Cllr Dr E Francis Parsons</b>	<b>23 – 24</b>
<b>W90Q2785</b>	Current procedure for disposal of used COVID-19 PPE waste from hospitals and community residential care facilities?	<b>Cllr Dr E Francis Parsons</b>	<b>24 – 26</b>
<b>W90Q2786</b>	Has a Design team has been put in place for the new 50 bedded CNU at the Sacred Heart Hospital Roscommon?	<b>Cllr T Ward</b>	<b>26</b>
<b>W90Q2787</b>	Has the HSE has any plans to open the St. Bridget's Ward at Roscommon County Hospital on a seven day week basis?	<b>Cllr T Ward</b>	<b>26</b>
<b>W90Q2788</b>	Amount of funding made available to the Mental Health Services in County Roscommon for 2019 and 2020?	<b>Cllr T Ward</b>	<b>26</b>
<b>W90Q2789</b>	An update on the provision of extra car parking spaces at Roscommon County Hospital?	<b>Cllr T Ward</b>	<b>26</b>
<b>W90Q2790</b>	Update on the status of the plans to develop a new ED at UHG, status of plans to develop new oncology facilities at UHG?	<b>Cllr J Connolly</b>	<b>26 – 27</b>
<b>W90Q2791</b>	Number of children currently with live applications under the assessment of need process in Co Galway and data on the range of waiting times experienced by the applicants?	<b>Cllr J Connolly</b>	<b>27</b>
<b>W90Q2792</b>	Capacity of the CAMHS facility in Merlin Park for In-Patient treatment? How many Number of in-patient admissions to CAMHS Merlin Park in 2019? Data on bed occupancy at the facility throughout 2019?	<b>Cllr J Connolly</b>	<b>27</b>
<b>W90Q2793</b>	Data on the number of postponed procedures at Galway University Hospitals to date in 2020?	<b>Cllr J Connolly</b>	<b>27</b>
<b>W90Q2794</b>	A report on the audiology services in Donegal and confirmation if we have the adequate resources to deal with the needs of our clients, and what if any impact Covid has had on the service?	<b>Cllr C Brogan</b>	<b>28</b>
<b>W90Q2795</b>	Updated report on outstanding vacant positions in LUH and how are we still using agency staff?	<b>Cllr C Brogan</b>	<b>28</b>

NUMBER	QUESTION	RAISED BY
<b>W90Q2745</b>	Can I be provided with details of what, if any, extra resources are provided to the ambulance service in West Clare during July and August to take account of the huge swing in population from urban areas to coastal communities for the summer tourism season	<b>Cllr C Murphy</b>
<p>The National Ambulance Service provides pre hospital care to the population of the state and does so with various mechanisms including dynamic deployment and emergency deployment points. All ambulance calls to National Emergency Operations Centre are triaged using AMPDS (Advanced Medical Priority Dispatch System) and the closest ambulance is dispatched to the patient. This model of dispatch includes in some cases the use of Rapid Response Vehicles, Emergency Ambulances and Community First Responder schemes and if required Aeromedical if available within the area, thus ensuring that the patient receives rapid and appropriate response.</p> <p><b>Bill Forbes, Acting Chief Ambulance Officer, NAS West</b></p>		
<b>W90Q2746</b>	What steps are being taken by <u>UL Hospitals</u> group to provide Insulin Pump Therapy and Type 1 Diabetes Self-Management Education to adults with Type 1 diabetes attending their clinics, and can they confirm they have included diabetes dietitians and diabetes specialist nurses who can provide insulin pump therapy for their Adult Diabetes Service in UL hospitals in their 2021 budgetary estimates?	<b>Cllr C Murphy</b>
<p>There is currently one whole-time equivalent (WTE) consultant endocrinologist in UL Hospitals Group working with adult diabetic patients. A second consultant endocrinologist is due to commence in October 2020.</p> <p>The adult diabetes service is supported by a dedicated team of clinical nurse specialists (CNS) and staff nurses. There is diabetic nurse support in St Johns, Ennis and UMHL. There are currently two diabetic CNS posts in UL Hospitals one in UHL and one in Ennis. One of these nursing posts has a remit to Nenagh Hospital. There are also three diabetic staff nurse positions within the diabetes unit.</p> <p>Currently, the service is unable to commence adult patients on insulin pumps due service demands. We do, however, accept patients established on pumps from elsewhere and these patients are managed under the care of the consultant endocrinologist. The largest group of these patients are those who have transferred from the Paediatric Diabetes Service in UHL. All of our insulin pump patients are seen in UHL.</p> <p>There is a specialist dietitian working with our paediatric diabetes patients. However, there is currently no specialist dietitian in post for adults with Type 1 Diabetes. Patients are seen by a ward dietitian as inpatients but there is no specialist care or outpatient appointments for diabetes patients in UHL.</p> <p>We have identified this as a significant gap in our service and are committed to securing additional specialist posts (nursing and dietitian) to deliver an insulin pump service.</p> <p>Developing our diabetes services a core focus for UL Hospitals Group and we are committed to improving the service for our patients, to that end we will be submitting a bid to develop this service and it will form part of our 2021 estimates process.</p> <p><b>C. Cowan, CEO, UL Hospital Group</b></p>		
<b>W90Q2747</b>	What steps are <u>UL Hospitals</u> group taking to; a) address the 60% capacity reduction, from 20 people per clinic to 8 people, of the three weekly outpatient adult diabetes clinics, b) provide telephone or video consultations and support to those who are not receiving their clinical review appointments within the recommended 4-6 months?	<b>Cllr C Murphy</b>
<p><b>a) address the 60% capacity reduction, from 20 people per clinic to 8 people, of the three weekly outpatient adult diabetes clinics,</b></p>		

Prior to Covid-19 approx. 50-70 patients were seen at a clinic. Currently we see approx. eight patients in our face to face diabetes clinics with additional virtual clinics also running where we see approx. 10. A virtual clinic is one in which the patient and clinician interact in real time, via a video or telephone. The numbers of patients who are seen virtually are restricted due to availability of clinical space, which has been under further pressure since the pandemic.

We are conscious that the unfortunate but necessary reduction of so much scheduled work has been difficult on our patients, especially those who had already been waiting a long time for their appointment.

A project to evaluate the Outpatient service across UL Hospitals Group has been established. The project is in response to the public health emergency including the requirement for social distancing and growing waiting lists. The working group will provide recommendations and oversight on how best the OPD services can be organised and delivered. The project is expected to run till early 2021.

**b) provide telephone or video consultations and support to those who are not receiving their clinical review appointments within the recommended 4-6 months?**

Review clinics are held on a monthly basis in St John’s, Ennis & Nenagh Hospital. Both face-to-face and virtual clinics are being offered to patients within the service and this applies to patients with both Type 1 and Type 2 diabetes.

OPD diabetic clinics take place in UHL, Ennis, Nenagh and St John’s Hospital.

New referrals across all specialties are facilitated in order of clinical prioritisation and this is in line with the resumption of services across our Hospitals Group. However we recognise that the demands on our Group’s diabetes service are significant, in 2019, there were 3,107 attendances to our adult diabetes clinics. Waiting time for a routine diabetes appointment has increased significantly to approx. five years. However new patients may be triaged sooner on the basis of the clinical information that is provided by the referring physician.

We are carefully scaling up services in line with the national public health guidance and in a manner which optimises patient care while minimising risks to patients, staff and the wider healthcare system.

**C. Cowan, CEO, UL Hospital Group**

<b>W90Q2748</b>	Why is there a waiting list of at least 5/6 weeks for physiotherapy appointments at local community hospitals, such as Donegal Community Hospital for patients that have had surgery?	<b>Clr T Conaghan</b>
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Donegal Community Physiotherapy Service provides for the delivery of inpatient, outpatient and domiciliary physiotherapy services across County Donegal. Service provisions include orthopaedics, neurology, MSK, paediatrics, lymphoedema, incontinence, women’s health, palliative care, respiratory integrated care and intellectually disabilities. These services are provided in 20 locations throughout County Donegal.

Between March 2020 and July 2020 the Physiotherapy Service was restricted to urgent referrals due to Covid-19. Virtual appointments through the “Attend Anywhere” IT platform were and continue to be made available to all service users where clinically appropriate. The Physiotherapy Service is currently returning to normal service delivery and apologise for delays in service provision over the last number of months.

The maximum waiting time for initial assessment post- surgery in Donegal Community Hospital is five days unless otherwise indicated on the referral letter.

**John Hayes, Chief Officer, CHO1**

<b>W90Q2749</b>	What is the update of the appointment of a radiographer to Donegal, Killybegs and the Shield community hospital?	<b>Clr T Conaghan</b>
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I can advise that a Radiographer commenced in post in Donegal Town on the 7<sup>th</sup> September 2020.

The decision was made at the beginning of the Covid 19 pandemic to operate one X-ray facility in Donegal Town rather

than Killybegs. As most referrals are best suited to Donegal the decision was made at the start of the pandemic to operate the facility in Donegal Town. We are actively considering the patient safety elements of reopening Killybegs.

The X-ray service in the Shiel Hospital moved to the GP Primary Care Centre in An Clochar when it opened in Ballyshannon. A Radiographer was appointed to the service in Ballyshannon at the end of January 2020. This staff member was due to commence in April 2020 once all relevant training was completed. However, as a result of the Covid pandemic, all non-urgent imaging stopped which included Ballyshannon. Sligo University Hospital are still committed to opening this service, especially in the new Covid environment. Currently they are unable to redeploy a Radiographer from SUH as this would impact on acute services.

**John Hayes, Chief Officer, CHO1**

<b>W90Q2750</b>	When will Saolta carry out an immediate and Full Review of all Departments/Specialities at LUH on the back of the recent Damming Report into Gynaecology Services at LUH as was promised to elected Representatives at the recent ZOOM meeting and to help restore citizens confidence in the services currently being provided at LUH?	<b>Cllr G McMonagle</b>
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The Saolta Group commissioned a Review of the Gynaecology Service (with a particular focus on post-menopausal bleeding pathways) at Letterkenny University Hospital (LUH) in November last year.

This external review was commissioned by the Saolta Group's, Saolta Group Chief Clinical Director Dr Pat Nash following concerns identified regarding patient care which related to delays in diagnosing cancer of the endometrium. These concerns were either brought to the hospital's attention directly by a number of patients or their families or identified through Letterkenny University Hospital's own processes for monitoring patient quality and safety

The purpose of the review was to assess the quality and safety of the LUH Gynaecology Service, with a focus on the pathway of care for women presenting with post-menopausal bleeding including subsequent diagnostic pathways for potential gynaecological cancers. As part of their work, Dr Price and his team considered the findings of reviews of the care provided to eight women who had been patients of the gynaecology service; relevant pathways for women who present at LUH with post-menopausal bleeding; and how governance for quality and safety for the gynaecology service is delivered. In his report Dr Price identifies areas of good practice, identifies areas for improvement and makes recommendations to implement those improvements.

The Clinical Services Review Report made six recommendations including increasing capacity and staff capability, reviewing the referral and triage system for gynaecology patients, improving communication processes and improving governance structures.

These recommendations are currently being put into effect by an Implementation Group within Saolta. In addition, a national level Oversight Group will provide assurance that the recommendations are actively implemented within the agreed timeframe. Furthermore, a Special Measures Team has been on-site in Letterkenny University Hospital since early July identifying and driving operational changes.

In the review report, Dr John Price recommended that the LUH Gynaecology Service should undertake a self-assessment against the HIQA National Standards for Safer, Better Healthcare, 2012. Work undertaken to date on the self-assessment will be expanded in the coming months to include all clinical services in the hospital.

**T. Canavan, CEO, Saolta University Health Care Group**

<b>W90Q2751</b>	Can I have an update on what stage the 103 Bed Residential Care Centre in Letterkenny is at, when will works begin and what is the approximate completion date?	<b>Cllr G McMonagle</b>
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Planning permission for the development of a 110 bed Community Unit has been granted and it is expected that construction will commence in 2021 and the unit will open in 2023. (Press Release issued under separate cover).



**John Hayes, Chief Officer, CHO1**

**W90Q2752**

When will the Day Care Service for those with Mental Health issues at St Conals Hospital be reinstated?

**Cllr G  
McMonagle**

St. Conal's Day Centre was closed in March due to the government guidelines and restrictions imposed as a result of the COVID 19 pandemic. Since then, the service users who previously attended the Day Centre are receiving face to face and telephone interventions appropriate to their individual care plan. These supports have been facilitated both by Day Centre Staff and Adult Community Mental Health Team staff.

Due to current guidelines regarding social distancing, the maximum numbers in a room and the government advice for those individuals with chronic conditions to continue to cocoon, the Day Centre at St. Conal's Hospital remains closed as the safety and welfare of all users of the Centre is a priority.

Although St Conal's Day Centre is closed, the members of staff have been working hard and creatively to minimise the impact of such closure on very vulnerable service users. For instance, people that were reliant on Day Centre meals, have been supported either to learn how to prepare their own simple meals or to access meals prepared by local food shops. The team supporting the Day Centre service users have also rolled out small social groups in the community developed to meet each person's individual needs, that maintain a low COVID 19 risk and provide a higher level of choice and independent living as stipulated by individual assessments and care plans. Two great examples of these are the walking and the art groups which not only comply with COVID-19 protective measures (e.g. low numbers, social distancing...) but also provide a great opportunity for people to engage in meaningful social activities.

The Donegal Mental Health Service is linking with the Recovery College who are finalising their curriculum for the Autumn semester and many of these programmes will be available for those who have attended the Day Centre at St. Conal's.

Nationally a discussion is taking place as to the future of Day Service provision and how Day Services can be delivered in a more person centred way which provides a meaningful therapeutic and safe service to those individuals who require it. Donegal Mental Health Services are engaging in that discussion as part of the wider CHO 1 Mental Health Service Division and are actively co-ordinating alternative plans to address individual needs of supported community engagement as an alternative to the traditional Day Centre model during the current COVID 19 pandemic.

The re-opening of day services safely is under active review and attention but will not occur unless and until we are satisfied regarding safety, COVID-19 compliance and sustainable resourcing of staff and infrastructure.

**John Hayes, Chief Officer, CHO1**

**W90Q2753**

Will there be any change to the current model of Treatment Abroad Scheme/Cross Border Directive due to Brexit and will Patients from this jurisdiction still be able to avail of the services in Northern Ireland or the UK after Brexit?

**Cllr G  
McMonagle**

The HSE has been working to ensure that the necessary arrangements are in place to maintain continuity of health services post Brexit and has been liaising closely with the Department of Health on a wide range of Brexit contingency planning and mitigating actions. HSE Brexit preparation structures, which were paused at the end of February due to COVID-19, resumed from July 2020, with key areas in terms of risk mitigation focused on the following:

- a) Continued access to healthcare services in the UK (and Northern Ireland) for patients from Ireland.
- b) Qualifications recognition and continued free movement of health professionals and personnel between Ireland and the UK.
- c) Preparations for increased Environmental Health service presence at ports in relation to food safety controls.
- d) Preparations to mitigate for restrictions on the movement of goods and services from or through the UK – with particular reference to medicines and medical devices.
- e) Arrangements to ensure GDPR compliance in the form of signed-off Standard Contractual Clauses with key vendors,

suppliers and UK based service providers.

In relation to the continuity of patient services, the focus of the mitigation measures is on ensuring that Service Level Agreements (SLAs) and Memorandums of Understandings (MOUs) are in place where necessary. This applies to specific service areas such as emergency cross border arrangements, cardiac and cancer services, treatment abroad placements and Cooperation & Working Together (CAWT) arrangements.

The Common Travel Area (CTA) is a long-standing arrangement involving Ireland and the United Kingdom that facilitates the ability of our citizens to move freely within the CTA, with associated reciprocal rights and privileges enjoyed by Irish citizens in the UK and British citizens in Ireland. The service to service arrangements that are detailed above are underpinned by the CTA.

Discussions between the Department of Health and the UK Department of Health and Social Care on the Common Travel Area reciprocal healthcare agreement are underway and the HSE is supporting the Department in these discussions. Individual Service Provision Agreements are also being prepared with UK & NI Hospitals (including Transplant Hospitals) for the continued provision of services to patients from Ireland post Brexit.

Forum members will be kept informed of progress in relation to these issues as the transition period comes to a conclusion in December 2020.

**Office of the National Director/Acute Strategy & Planning**

<b>W90Q2754</b>	Who took the decision to close 2 wards at Mayo University Hospital for refurbishment and why was it necessary to close them? What other options other than closing the wards were considered? When will they be reopened? How many beds were taken out of service? How many people were on trolleys at Mayo University Hospital each day since the wards were closed?	<b>Cllr M Kilcoyne</b>
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Urgent infrastructural work to address infection prevention and control issues is currently underway in two of the wards in Mayo University Hospital. This work is necessary as it has been an ongoing risk for the hospital for quite some time but the urgency was heightened by the onset of Covid 19. It is important that this work is completed in advance of winter 2020/21.

The decision to proceed with these works was taken by hospital management, Saolta Group management and HSE Estates.

The work is too complex to be carried out with patients remaining in the ward. The project work is in two phases to ensure minimal impact on capacity. Phase one (38 beds) has half of each ward closed and the second phase (28 beds) will start on the 5<sup>th</sup> of October. All of the work is expected to be completed by mid November.

The hospital has access to a forty bedded ward in St. John's in the Sacred Heart Hospital and is utilising this ward as required to support the hospital capacity.

Since the 17<sup>th</sup> of August the following number have been on trolleys in the Emergency Department and on wards at Mayo University Hospital;

17/08/2020	Monday	10	18/08/2020	Tuesday	18
19/08/2020	Wednesday	8	20/08/2020	Thursday	2
21/08/2020	Friday	12	22/08/2020	Saturday	2
23/08/2020	Sunday	4	24/08/2020	Monday	5
25/08/2020	Tuesday	9	26/08/2020	Wednesday	21
27/08/2020	Thursday	11	28/08/2020	Friday	12
29/08/2020	Saturday	11	30/08/2020	Sunday	12
31/08/2020	Monday	17	01/09/2020	Tuesday	22
02/09/2020	Wednesday	20	03/09/2020	Thursday	25
04/09/2020	Friday	16	05/09/2020	Saturday	6

06/09/2020	Sunday	12	07/09/2020	Monday	4
08/09/2020	Tuesday	15	09/09/2020	Wednesday	7
10/09/2020	Thursday	7	11/09/2020	Friday	7
12/09/2020	Saturday	0	13/09/2020	Sunday	4
14/09/2020	Monday	5	15/09/2020	Tuesday	10

We are working very hard on a daily basis to minimise risk or discomfort to patients.

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

<b>W90Q2755</b>	Can the HSE confirm when Day Care centres will re-open and what plans/supports are in place to facilitate service users and affected families (Galway City & County).	<b>Cllr D Killilea</b>
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While guidance issued nationally on the preparation of the resumption of Day Care Services across Older Peoples Services (OPS), in light of NPHE and Public Health advice received by National Older People Services on 4th September last, Community Healthcare West's OPS Day Care Services will not reopen at this time.

Further clarification is currently being sought from Public Health regarding the re-opening of Day Care Services and accordingly HSE Community Healthcare West awaits an update on this matter from National Older Peoples Services once this clarification is received.

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

<b>W90Q2756</b>	Can the HSE supply the waiting list numbers for elective surgery (including the time on waiting lists) in Galway hospitals and what plan is in place to tackle these numbers and an update on the new surgical units in Merlin please.	<b>Cllr D Killilea</b>
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**1. Elective Surgery Waiting List Numbers as of Sept 11<sup>th</sup> 2020: 11,615**

Time on waiting list breakdown of these numbers –see table below.

<b>0-3Mths</b>	<b>2138</b>
<b>3-6Mths</b>	<b>1284</b>
<b>6-12Mths</b>	<b>3632</b>
<b>12-18Mths</b>	<b>1811</b>
<b>1.5-2Years</b>	<b>885</b>
<b>&gt;2.0Years</b>	<b>1865</b>

**Inpatients:**

We have restored some level of elective activity in UHG and MPUH with the most urgent patients being prioritised, however the backlog and COVID situation continue to pose challenges.

Work is ongoing at MPUH to provide access to a second theatre for the Orthopaedic Service to bring back operating theatre access to previous levels.

Building work on the planned Orthopaedic Theatre in MPUH is due to commence at the end of 2020.

There is a group-wide theatre governance project that has recently been initiated with the aim of which is to increase the efficiency of our theatres across the group and also facilitate the decanting of more patients to the level 2 and 3 hospitals.

There is an on-going programme of nursing recruitment with the aim to increase the number of theatre sessions

available in GUH.

The agreement reached nationally that on a temporary basis the private hospitals would become a public resource ended on July 1<sup>st</sup> 2020. These pathways allowed us to operate on patients in the Galway Clinic and the Bon Secours during that time. Procedures were carried out across most specialties including, Cardiothoracic, Cardiology, GI, Plastic Surgery and Urology and a significant numbers of patients were treated.

We are continuing to work with NTPF to outsource patients to the private sector and we have had a number of bids accepted by NTPF for insourcing initiatives.

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

<b>W90Q2757</b>	Can the HSE confirm what extra planned services are proposed for the Primary Care Unit in Tuam and is there an update on Xray/Ultrasound unit/Service for the Tuam area.	<b>Cllr D Killilea</b>
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Tuam Diagnostic Service is being developed in conjunction with Portiuncula University Hospital Ballinasloe, the Saolta Group, Primary Care Services Community Healthcare West and HSE Estates.

Once off funding has been approved by Primary Care Strategy and Planning for development of a Diagnostics area in Tuam. On 1<sup>st</sup> September 2020 a meeting took place to agree the preferred option. HSE Estates are preparing for the next stage which will be direct consultation with PPPCo. who are the owners of Tuam PCC

The Ultrasound service will commence later this year in Tuam PCC.

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

<b>W90Q2758</b>	Can the HSE confirm what is the planned role out for Flu Vaccinations in Galway and what is the fee structure for GP Practices.	<b>Cllr D Killilea</b>
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The Flu Vaccine is expected to be available at the end of September and planning is currently underway for administration of the flu vaccine to the general public and all Healthcare Staff.

The details of the National Flu Campaign were recently announced by the Minister for Health, Stephen Donnelly TD. The details of the press release dated 1st September are available on the Department of Health website. <https://www.hse.ie/eng/health/immunisation/pubinfo/flu-vaccination/about-the-vaccine/>  
<https://www.hse.ie/eng/health/immunisation/pubinfo/flu-vaccination/flu-vaccine-for-children/>

Negotiations have recently been completed with the IMO on the administration of the Flu Vaccine by G.P's

Following consultation with the IMO, the Minister for Health, with the approval of the Minister for Public Expenditure and Reform, has determined, pursuant to Section 42 of the Public Service (Pay and Pensions) Act, 2017, that the following fee rates should apply for the administration of the seasonal Influenza Vaccination Programme for winter 2020/21.

- The existing fee of €15 will be maintained for all QIV Influenza vaccinations, GMS and non-GMS;
- In addition to this, each GP will be eligible for a further payment of €100 for every 10 unique patients to whom he/she administers the QIV Influenza vaccination;
- A fee of €20 will be made available for vaccinations using the (nasal) Live Attenuated Influenza Vaccine (LAIV) for children aged from 2 to 12 years inclusive;
- In addition, each GP will be eligible for a *further payment* of €150 for every 10 unique patients aged from 2 to 12 years inclusive to whom he/she administers the LAIV;
- GPs will continue to be eligible for a payment of €28.50 for administration of a Pneumococcal Polysaccharide Vaccine (PPV) to an eligible individual in the relevant at risk group under the GMS provided that the vaccine is not administered by the GP (or by another GP in the same practice) on the same day as an Influenza vaccine.

- The existing fee of €42.75 will continue to apply for the administration of combined Influenza and PPV vaccinations on the same day by the GP or by the GP concerned and another GP in the same practice. Each such instance of combined influenza and PPV vaccination will count as one for the purpose of calculating the level of *further adult payments (as described above)* that a GP will be eligible to receive.

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

<b>W90Q2759</b>	That a full and comprehensive reply be provided to the following question which I submitted to the Forum in November 2019: "That the Forum be provided with a list of properties which the HSE is (i) renting to third parties in Sligo, including the names of the companies/individuals who are renting the properties and the details of the rent received by the HSE for each property; (ii) providing free of charge to third parties in Sligo, including the names of the companies/individuals who are being provided with the property.	<b>Clr D Bree</b>
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(i) There are only a very small number of properties which have been identified that the HSE are renting to third parties in Sligo. The relevant details are as follows;

<b>Name &amp; address of property</b>	<b>Description of property</b>	<b>Purpose for which property is used</b>	<b>Annual Rent</b>	<b>Lessee</b>	<b>Comments</b>
Bunowna, Easkey, Co Sligo	4 bedroom bungalow	Residential accommodation for Learning disability clients	€100.00 per annum	PRAXIS Care, unit 11B, Beulah Buildings, Sligo	Part of Service Level agreement
Ballytivian Hostel, Ballytivina, Sligo	Bungalow type accommodation. Gross internal area 180 sq mt on site of 0.17 hectares	Hostel to provide accommodation for homeless persons	€100.00 per annum	Sligo Social Services, Charles Street, Sligo	Part of Service Level agreement
Garden Centre, Ballytivian, Sligo	Garden Centre and associated office/training areas	Training for Mental Health Service Clients	€100.00 per annum	Sligo Leader Development Company, Pearse Road, Sligo	Part of Service Level agreement

ii) In terms of properties which the HSE are providing free of charge to third parties in Sligo, no standalone properties have been identified following review. However, the HSE does provide some space within HSE properties free of charge to the following organisations;

National Council for the Blind Ireland (NCBI) have been provided with a room at JFK Parade, Sligo. Down Syndrome Ireland have been provided with a room at Medi Centre, Kempton Parade, Sligo.

There is a practice of providing sessional accommodation for a number of voluntary organisations working in the Health/Social Care sector. This includes, for example, use of accommodation in various Health Centres by Care of the Aged Committees, use of accommodation by groups such as Alcoholics Anonymous etc. The Physio Hall in Nazareth was being used by some voluntary groups pre Covid, i.e. the Parkinsons Association, the Sligo Sports Recreation Partnership and the Irish Heart Foundation. There are arrangements in place whereby companies such as Affidea / Diabetic screening, also provide services from HSE premises.

North West Hospice are provided with accommodation at Sligo University Hospital where a new capital developed is being progressed in collaboration with the HSE. Also, a building (Molloway House) was refurbished last year on the grounds of Sligo University Hospital for use by the North West Neurology Institute (NWNi). A licence agreement arrangement is in the process of being put in place which will reflect their capital contribution towards the works done.

Furthermore, there is a specific commercial arrangement (as opposed to a rental arrangement) in place with Aramark regarding the operation of the shop at University Hospital Sligo on behalf of the hospital.

Finally, there are GPs / GP Practices in Sligo who operate out of various health facilities under various arrangements made with them at a particular time. Historically back in the time of the health boards some but not necessarily all GPs who operate out of health centres may have made contributions to health centre upgrade projects from the Drugs Savings Scheme. That could have been considered in lieu of a licence fee and the GP would then not have paid any subsequent ongoing contribution for their ongoing use of the space. Thus, there are many GP practices which could be classified as having access to space “free of charge”. The HSE does not generally rent space to GPs but instead GPs have been given access to space under licence agreements. As such the HSE would not receive any rent but instead there could be a licence fee charge arising to the HSE in such cases. Below is a summary of information in regard to GP arrangements in Sligo.

**GPs / GP Practices Sligo Table: Ctrl + Click on Appendix 1**

**J. Hoare, Asst National Director Estates (West)**

<b>W90Q2760</b>	How many (a) inpatients (b) outpatients (by speciality) are currently on the waiting list at Sligo University Hospital, how many have been waiting less than one year, how many have been waiting 1 to 2 years, 2 to 3 years and over 3 years	<b>Clr D Bree</b>
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**Sligo University Hospital In-Patient Waiting list as at 02.09.2020**

<b>Specialty</b>	<b>Waiting less than 1yr</b>	<b>Waiting 1- 2years</b>	<b>Waiting 2- 3years</b>	<b>Waiting over 3years</b>
Dermatology	15			
Endocrinology	5			
General Medicine	206	2		
General Surgery	697	18		
Gynaecology	254	27	4	1
Neurology	66	9		
Ophthalmology	763	183	14	
Orthopaedics	334	82	1	
Otolaryngology (ENT)	280	93	35	13
Pain Relief	42	46		
Rheumatology	405	68	1	
Urology	171	55	1	2
<b>Grand Total</b>	<b>3238</b>	<b>583</b>	<b>56</b>	<b>16</b>

OPD WL Sligo University Hospital 02.09.2020				
Specialty	Waiting Under 1 Year	Waiting 1-2 Years	Waiting 2-3 Years	Over 3 Years
Dermatology	988	103		
Diabetes Mellitus	5	4		
Endocrinology	206	240	106	7
General Medicine	861	327	79	27
General Surgery	884	376	50	104
Gynaecology	498	168	29	12
Haematology	82	6		1
Immunology	15	1		
Nephrology	9	1		
Neurology	238	171	122	156
Oncology	6			
Ophthalmology	1035	259	5	
Orthopaedics	1402	1112	914	68
Otolaryngology (ENT)	1389	1218	13	
Paediatrics	394	96	1	
Pain Relief	267	161	39	1
Radiotherapy	3			
Rheumatology	689	254	34	4
Urology	300	315	53	84
<b>Grand Total</b>	<b>9271</b>	<b>4812</b>	<b>1442</b>	<b>464</b>

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

<b>W90Q2761</b>	In the period since the Pandemic commenced how many Covid-19 tests have been carried out each day in (a) Sligo (b) Leitrim; the number of positive results in each location; the total number of people who died of Covid 19 in each county since the start of the pandemic.	<b>Clr D Bree</b>
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**Testing Details**

Table 1: The following table displays the number of tests carried out per month in each of the testing centres Sligo (commenced 23rd March) and Leitrim (commenced 30th March until 11th July).

Dates	Sligo Garden Centre and then Finisklin from 1st April	Leitrim IWA Carrick-on Shannon
March 23rd-31st	449	10
April	683	88
May	685	80
June	368	84
July	711	42
August	1357	0

**Positive Results**

Table 2: Total Positive Cases in Sligo Leitrim @ 11<sup>th</sup> September 2020

Leitrim	Sligo	Total Positive Cases
111	163	274

**Patient Deaths**

Table 3 below displays the total number of recorded deaths from COVID 19 since the start of this pandemic in Sligo Leitrim.

Table 3: Total Deaths Reported in Sligo Leitrim @ 11<sup>th</sup> September 2020

Leitrim	Sligo	Total Positive Cases
5	5	10

**John Hayes, Chief Officer, CHO1**

<b>W90Q2762</b>	That the Forum be advised as to the current number of vacancies at Sligo University Hospital; the grade of each vacancy; the length of time of each vacancy (in tabular format).	<b>Clr D Bree</b>
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**Sligo University Hospital Vacant WTE /Posts at August 2020**

Staff Category	Current Total WTE	Total Vacant /In Recruit WTE at August 2020
Health and Social Care Professionals	<b>188</b>	<b>17</b>
Nursing and Midwifery	<b>694</b>	<b>38</b>
Medical/Dental	<b>254</b>	<b>7</b>
Management/Admin	<b>233</b>	<b>13</b>
Patient and Client Care	<b>194</b>	<b>5</b>
Support Services	<b>247</b>	<b>9</b>
<b>Total SUH Vacant Posts/WTE at August 2020</b>	<b>1809</b>	<b>89</b>

It is not possible to provide specific report as requested for duration of vacancies.

Approximate breakdown of duration is 37 posts vacant <3 months; 32 posts vacant < 6 months; 20 posts vacant >9 months

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

<b>W90Q2763</b>	<p>Milltown House Carndonagh. HSE and Friends of James Connolly Hospital Carndonagh. The final version of the Heads of Terms was issued to the Friends of JCM's solicitors on July 21st 2020 by the HSE. Is an agreement regarding the future of Milltown House including the lease of the property by the HSE now agreed between the concerned parties? What staffing and care provision is envisaged at Milltown House? Will the HSE respond positively to the desire and demand by HSE clients et al and ensure that Hydrotherapy facilities are restored and accessible again at Milltown House?</p>	<b>Clr A Doherty</b>
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The Heads of Terms was issued to Friends of JCMs' Solicitor, July 21<sup>st</sup> 2020, however agreement on the terms has not been reached between the HSE and the friends of JCM. The HSE has requested the Friends of JCM through their solicitor to try and close out this agreement as a matter of urgency.

In relation to the staffing and care provision provided at Milltown House, this will be in accordance with the service provided and based on the needs of the services users. Confirmation has been provided to the Friends of JCM that services will be provided for people with a disability.

Finally, the HSE can confirm that the future plans for service delivery at Milltown House, does not include the provision



of a swimming pool.

The HSE will continue to engage with the Friends of James Connolly Hospital with a view to finalising an agreement regarding the future use of Milltown House.

**John Hayes, Chief Officer, CHO1**

<b>W90Q2764</b>	Maternity Outreach Clinic Services in Inishowen. Have maternity services previously provided at Carndonagh Community Hospital and Bunrana resumed? Please update on present situation. (W84M104 motion adopted Nov 2019)	<b>Clr A Doherty</b>
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Midwifery lead clinics recommenced in Carndonagh Community Hospital on the 16<sup>th</sup> September 2020.

**T. Canavan, CEO, Saolta University Health Care Group**

<b>W90Q2765</b>	What services are currently in situ or are being sought to reduce spiralling waiting lists ie: Physio, OT, Psychology, Diagnostic Services, (CT scans, Ultrasounds, X- ray) Medical and Surgical services. Will the HSE seek assistance from Private Hospitals to reduce waiting lists?	<b>Clr A Doherty</b>
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LUH supported by the NTPF are engaged in both in-sourcing and outsourcing initiatives to address waiting lists. These include initiative on-site outpatients clinics in a number of specialities including ENT, cardiology, respiratory and urology, with gynaecology clinics to commence in the coming weeks. In 2020 to date 604 patients have been scheduled to initiative clinics with 47 patients not attending on the day of clinic.

Patients on in-patient and day services waiting lists for procedures who meet the NTPF selection criteria are offered outsourced to the private sector on an on-going basis. In 2020 to date 650 patients have received this offer with 234 accepting.

LUH supported by the National Validation Unit validate all patients waiting greater than 6 months on outpatient, in-patient & day services waiting lists to ensure that all waiting list data is accurate and all patients on the waiting lists still require an appointment.

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

The arrival of the Covid-19 pandemic in Republic of Ireland and subsequent “lockdown” in mid- March 2020 brought to an abrupt end the provision of face-to-face therapy services in Donegal. The immediate public health priority was the fight against the spread of Covid-19 infection and the establishment of testing centres, providing the staff to facilitate the testing programme from start to finish.

The therapy services noted are currently in situ and continue to provide services, based on clinical assessment and prioritization while adhering to Covid-19 regulations. Virtual appointments are being offered, again clinically assessed as appropriate, through “Attend Anywhere” IT platform. Covid-19 regulations have unfortunately reduced the capacity for service provision and the HSE continues to implement a plan for the prioritization of health care continuity in the context of the parallel requirements for the ongoing public health campaign against the spread of Covid infection.

Recruitment initiatives are also being prioritized and progressed for swabbers and clerical administration support for the Community Test Centre – appointments to these positions will facilitate the release of redeployed therapy and clerical staff back to substantive roles which will support and strengthen the HSE’s health care continuity plan.

**John Hayes, Chief Officer, CHO1**

<b>W90Q2766</b>	Has the HSE been in negotiations with private transport providers and clients to ensure and assure the prompt, safe and secure resumption of transport facilities to Respite and Day care services?	<b>Clr A Doherty</b>
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The HSE has a Memorandum of Understanding with SITT (Local Link Donegal) to provide a coordinated transport service

for people attending day services in Donegal, Sligo and Leitrim.

Disability day services in CHO1 recommenced on a phased basis in August 2020. SITT worked with the HSE Infection Prevention control team, disability services and the HSE quality patient safety team to ensure all procedures were in place to manage safe transport support for services.

A quality and safety transport committee has been set up by the HSE in CHO1 to ensure regular contact is in place with SITT to maintain communication and deal with any issues arising.

**John Hayes, Chief Officer, CHO1**

<b>W90Q2767</b>	How often is the Patients' Food Preparation Area in Mayo University Hospital inspected by Health Inspectors? What procedures have been put in place following the recent incident at the hospital when a patient was served fungi infected blue moulded bread. What steps have been taken to ensure there is no reoccurrence of this?	<b>Cllr M Kilcoyne</b>
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The Catering Department is inspected by the Health Inspector 2-4 times per year in line with environmental health guidance.

Catering teams have been reminded to check meals for any issues of concern before they are provided to the patients.

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

<b>W90Q2768</b>	How many Covid 19 Testing centres are currently in operation in Mayo? Where they and how many staff are employed in each? How many hours per day do they operate? Where are the Covid tests in Mayo currently being analysed?	<b>Cllr M Kilcoyne</b>
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There is one drive through location in Mayo – GAA McHale Park

It is open 7 days per week – times vary depending on demand and we can ramp up as required.

The staffing varies depending on demand.

Tests are collected each day and forwarded to Enfer Laboratories in Naas for analysing.

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

<b>W90Q2769</b>	How many outpatients on average have been seen at Mayo University Hospital each week during the month of August 20?	<b>Cllr M Kilcoyne</b>
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**August 2020 OPD Attendances**

**Week 1 776**

**Week 2 824**

**Week 3 899**

**Week 4 969**

**Total 3468**

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

<b>W90Q2770</b>	<p>Can the HSE Advise</p> <ul style="list-style-type: none"> <li>• What mental health services if any will be provided at the two new primary care centres in North Sligo</li> <li>• Will there be any accommodation for Mental Health staff at these centres if required?</li> <li>• Are there any plans to build a purpose-built hub for Mental health in North Sligo?</li> <li>• Are there imminent plans to increase frontline staff in the community mental health services in Sligo?</li> <li>• Are there plans to fill current vacant roles such as Mental Health Co-Ordinator role?</li> <li>• What plans are in place to bring staffing levels of Dialectical behaviour therapy and Cognitive behavioural Therapy to a level that will reduce waiting</li> </ul>	<b>Cllr D Gilroy</b>
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times.

**1) What mental health services if any will be provided at the two new primary care centres in North Sligo**

The Sligo Leitrim Mental Health Service (SLMHS) have an agreement in regard to accessing bookable rooms at both Primary Care Centres. A range of Mental Health Services will continue to be provided from Markievicz House for North Sligo. Within these bookable rooms there is the potential to provide Outpatient Clinics for Psychology, Social Work, Community Mental Health Nurses, Occupational Therapy and Consultant Psychiatrists in respect of reviewing Service Users in the Primary Care Centres which are community based.

**2) Will there be any accommodation for Mental Health staff at these centres if required?**

Bookable rooms will be available to the Mental Health Services in both Primary Care Centres where services will be delivered by the relevant Community Mental Health Team (CMHT) members.

**3) Are there any plans to build a purpose-built hub for Mental Health in North Sligo?**

There are no plans to build a purpose-built hub for Mental Health Services in North Sligo, as services will be delivered within integrated settings in line with the goals and objectives of Slaintecare.

**4) Are there imminent plans to increase frontline staff in the community mental health services in Sligo?**

There are plans underway to strengthen the existing teams e.g. Liaison Psychiatry Team & Homelessness. A Consultant Liaison Psychiatrist has been in place for the last year. This has been a very positive intervention service for people accessing the Emergency Department in conjunction with Sligo University Hospital. A NCHD has joined this team in recent months. A Clinical Nurse Specialist has been recruited and is currently working on focused work with Service Users who have housing difficulties and are in some cases homeless. The Suicide Prevention Officer is also working in tandem with this service to ensure the rollout of Connecting for Life Strategy. An Early Intervention Psychosis team has been established in SLMHS. This team consists of key workers, Family Therapist, Psychologists, Occupational Therapists and is lead out by a Consultant Psychiatrist. The clinical care programme for ADHD is also established and staff has been recruited for Occupational Therapy, Psychology and is also lead out by a Consultant Psychiatrist. A new Executive Clinical Director was appointed in March of this year to SLMHS.

**5) Are there plans to fill current vacant roles such as Mental Health Co-Ordinator role?**

A recruitment process was previously commenced for this post and a panel identified. Subsequently, there has been a national decision not to progress with filling the posts. SLMHS is committed to filling this role when approval has been granted by the National Office.

**6) What plans are in place to bring staffing levels of Dialectical Behaviour Therapy [DBT] and Cognitive Behavioural Therapy [CBT] to a level that will reduce waiting times?**

Funding has been identified to provide training to existing staff in DBT and CBT. There are also plans for an additional 0.5 wte Psychologist post to be allocated to DBT services due to commence by the end of the year

**John Hayes, Chief Officer, CHO1**

<b>W90Q2771</b>	Does the HSE Plan to provide additional Consultant Geriatrician services for Sligo Leitrim West Cavan area to care for and achieve early diagnosis of Dementia/Alzheimer's and to develop 7 Day care plans for those suffering with this condition who wish to continue to live in the community? Are there any plans to carry out genetic testing for Alzheimer's? Does the HSE have any plans to introduce a Fair Deal type plan for home care that would allow families to care for relatives who suffer from Alzheimer's in their own homes.	<b>Cllr D Gilroy</b>
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CHO 1 have recognised the requirement of a dedicated community based geriatrician whose remit will include clinical responsibility for clients living with Dementia / Alzheimer's. A request for funding has been submitted for 1 WTE

consultant geriatrician and associated multi - disciplinary team for Sligo Leitrim, South Donegal and West Cavan to the National HSE and preparatory work is underway should such funding become available.

The level of funding provided will dictate whether a 7 day a week service is made available. There are multi complex case meetings where cases are reviewed by Geriatrician's, Neurology and Psychiatry of Old Age in relation to early diagnosis of Dementia and Alzheimer's. There are plans to recommence the cognitive rehabilitation and cognitive stimulation therapy programme along with the reopening of the Memory Technology resource room in Sligo/Leitrim. These services are available to adults with no age restrictions.

At present there is a Clinical Nurse specialist in Dementia care and an Older Person's Registered Advanced Nurse Practitioner (R ANP) with a special interest in cognitive issues. Both these staff members provide domiciliary care to clients and families living with Dementia/ Alzheimer's. They work under the clinical governance of a consultant geriatrician who provides outreach services to the community from Sligo University Hospital.

Post Covid, CHO 1 in conjunction with the Alzheimer's Society is offering a variety of services for respite care including respite in the client's own home. This is offered for a number of block hours per week based on needs and risk assessment. The plan of care is tailored to individual needs and offers the carer some much need time out.

Genetic Testing is not routinely done except with onset familial cases. It will continue to be done where indicated.

In relation to the question relating to HSE plans to introduce a similar Fair Deal scheme for clients living with Alzheimer's to remain at home: - the introduction or changes to any current scheme is under national direction and guidance, however there is a national commitment to provide home support on a statutory basis.

**John Hayes, Chief Officer, CHO1**

<b>W90Q2772</b>	Can the HSE Provide an update on what plans are in place for the Primary care units at Cliffoney and Carrigans Co. Sligo and what services for senior citizens will be maintained at these units when the new primary care centres in Grange and satellite centre at Drumcliff are built.	<b>Cllr D Gilroy</b>
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Direction was received from NPHE and Public Health on the 4<sup>th</sup> September 2020 advising that Day Care Services should not reopen at this time. In the interim Sligo Leitrim Older Persons Service continues to provide access to Meals on Wheels, additional home help hours based on needs assessment and Day Care at Home.

Further clarification is awaited from NPHE and the Public Health Department.

**John Hayes, Chief Officer, CHO1**

<b>W90Q2773</b>	Can the HSE give an update on when the Freestyle Libre Blood Glucose Monitoring system will be made available to all patients with Type 1 Diabetes? This is currently available on the Long-Term Illness scheme to Children and young adults up to the age of 21 but is not available to Adults with Diabetes over that age regardless of Clinical needs. Does the HSE Accept that this is a discrimination based on Age?	<b>Cllr D Gilroy</b>
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Consultant Endocrinologists may apply to the HSE, on behalf of specific patients, for reimbursement support of FreeStyle Libre Flash Glucose Monitoring (FGM) sensors. This includes those persons with Long Term Illness (LTI) eligibility. The application process is undertaken by means of a dedicated online portal, which has been operational since 3rd April 2018. In line with the recommendations outlined of the Health Technology Assessment Group (HTAG), access to this product was made available to children and young adults (4 -21 years). However, the application process does cater for the Consultant to make an application in very exceptional circumstances for a type 1 diabetic patient outside of this group. It is a matter for the Endocrinology Clinics whether they register an application and outline any exceptional circumstances that may apply if all of the listed criteria are not satisfied.

Whilst it was anticipated that the review of FreeStyle Libre Flash Glucose Monitoring System would be finalised at the end of Q1 2020, the public health emergency that has occurred in the meantime has resulted in members of the HTAG, whose primary roles are in Public Health Medicine, being redirected fully to public health emergency duties. Therefore, PCERS is currently undertaking a separate analysis of the reimbursement costs associated with FreeStyle Libre since its implementation. The budget impact of extending the recommendations made by HTAG will be scoped through this analysis which is anticipated to be completed by Q4 2020. The HSE needs to consider this information before a decision regarding further funding / reimbursement of FreeStyle Libre sensors is made.

The HSE does not accept that this is discrimination based on age. It is clear from the above that the HSE accepted a recommendation from HTAG so that affordability could be managed and exceptional arrangements were put in place for consultant endocrinologists to apply for specific patients.

***K Mulvenna MPSI, Head of Pharmacy Function, PCRS***

<b>W90Q2774</b>	Orthodontic services in Merlin Park, Galway What is the estimated time that has been added to the waiting period from assessment to commencement of “braces” treatment for adolescents in Merlin Park? Has a full service recommenced, and if not what is the roadmap to recommence same?	<b>ClIr M O Connor</b>
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Approximately 6 months has been added to the treatment waiting list for Orthodontics. Currently patients are being taken off the waiting list in order to try to clear the backlog of patients that were not seen during the lockdown. The aim is to finish as many patients as possible before the Winter. A full service has recommenced but due to COVID guidelines with regards to cross-infection control, it is only possible to see approximately 60% of the patients that would have been seen previously per day. Assessment appointments to establish eligibility for treatment have not as yet recommenced.

***T. Canavan, CEO, Saolta University Health Care Group***

<b>W90Q2775</b>	Onerous delay in Staff Nurse replacement – UHG The process for approving and appointing replacement staff during anticipated long absence e.g. maternity leave is onerous and impractical. It results in ongoing shortages in frontline care services. I call for a simplification of maternity cover replacement process and a management strategy that can be dealt with at the localised level of Director of Nursing. What steps can be take urgently, to ensure that service areas caring directly with patient in particular, have a more efficient streamlined staff replacement system?	<b>ClIr M O Connor</b>
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All student nurses and midwife graduates have been offered contracts of employment. The process for managing replacements of all staff who are on maternity leave is managed through the individual sites and the hospital group employee control process. Within this process are clear steps for managers at hospital level to follow when they identify replacement posts which are needed in the service, be that for short term and or long term vacancies. This process is designed to ensure resources are managed in a manner which ensures patient safety, protects essential services and ensure that resources are managed in an equitable manner.

It should also be noted, recruitment for appointments in the HSE is subject to the provisions of the public service management (Recruitment and Appointments Act 2004) and is also regulated by the Commission for Public Service Appointments (CPSA). The CPSA has Codes of Practice which sets out the principles to be observed in respect of both external and internal appointments to positions in the HSE. The CPSA carry out random audits to ensure that our recruitment policies, practices and support systems are operated in accordance with these Codes of Practice. The Director of Nursing in all of our hospitals is an essential part of this process.

While these approaches provides a transparent process we experience some challenges with having the additional workforce that are available to meet some of the shortfalls from both short term and or long term vacancies.

To address these challenges in the Saolta Group we continue to run rolling Campaigns for the high turnover staff groups i.e. Staff Nurses. All advertisements are uploaded to the HSE and Saolta Website as well as on twitter and LinkedIn to ensure they reach as wide an audience as possible.

We also have increased the number of staff who support the recruitment process and we work closely with our education partners (NUIG) to address our long term workforce needs.

**T. Canavan, CEO, Saolta University Health Care Group**

<b>W90Q2776</b>	Day Hospital. The much anticipated Day Hospital planned to be built in Galway City, Where is it planned to be built and when should we expect the project to commence on site?	<b>Cllr M O Connor</b>
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Out-patients Department (OPD) services are currently located on the main UHG Campus, adjacent to the main Emergency Department building . Existing OPD facilities are less than optimum particularly in the context of the current Covid-19 Emergency. Consequently it is proposed to relocate many OPD services to the Merlin Park Campus. This OPD relocation proposal is consistent with the wider strategic plan for health service provision in Galway City, as outlined in Saolta University Health Care Group’s Regional Options Appraisal for Acute Hospital Services and Elective Hospital Scoping Study. Planning permission drawings for this initial OPD block, together with a potential Cystic Fibrosis OPD building are progressing well following a useful Pre-Planning consultation with the Galway City Council Planning Department. The intention would be to complete the full design phase over the next 10 months or so with a view to being in a position to progress the project to construction subject to availability of capital funding in 2021 / 2022. The overall proposed Elective Hospital itself will be a significant capital investment and will be progressed in the coming years in line with the overall national approach for such facilities.

**J. Hoare, Asst National Director Estates (West)**

<b>W90Q2777</b>	Annual Leave. UHG There had been some delay of Annual leave for frontline staff during the pandemic, has process been put in place to review leave taken is up to date and if not how will you ensure adequate rest and recovery for staff who were asked to do so much more than ever before, particularly as we face the busy winter season	<b>Cllr M O Connor</b>
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Annual leave was interrupted for staff in the early stages of COVID 19. Managers are now making every effort to ensure that their staff avail of the maximum possible amount of annual leave in the current leave year and, at a minimum, avail of their statutory annual leave entitlement. Staff have been circulated with the relevant guidance from HSE and this will be re-issued on a regular basis.

**T. Canavan, CEO, Saolta University Health Care Group**

<b>W90Q2778</b>	How many Community social workers are employed in Galway city and county? W2778 here are they based and what specific specialist areas do they cover? How many social worker vacancies are in Galway city and county? What areas and locations are these vacancies in and how long have these positions been vacant? How many Adults/Children are awaiting Social Worker review?	<b>Cllr D Ó Cualáin</b>
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There is 1 Basic Grade Social Worker at present in Galway Primary Care covering the West of Galway city (Knocknacarra and Shantalla, City Centre and Salthill).

The Social worker is based in St Francis PC Centre, Newcastle. Inclusion criteria for referral include – advocacy, information and advice, promotion and enhancement of health and social wellbeing, person centred care planning, psycho social assessments, problem solving with major life changing events, assistance with alcohol/substance abuse, supporting family carers, linking homeless clients and those at risk of homelessness with relevant support services. Generic Social Work service that seeks to support the delivery of health and personal social service at a local level.

There is 1 vacancy since the 19<sup>th</sup> June 2020 in Galway city east based in Doughiska.

The Social Worker in the West of Galway City is only dealing with emergencies in the east of the city while the Social Work post in the east of the city is vacant. There are 3 emergency cases actively being worked on in the east of the city at present. There is currently a waiting list of 35 in the west of the city.

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

<b>W90Q2779</b>	Can I get an update with regards to the progress that is being made in relation to Primary Care Centres for Knocknacarra, Moycullen and Spiddal? What stage are these works at? Are there any plans to progress a Primary Care Centre in the Casla/Carraroe or Lettermore area in South Connemara and if not, why not?	<b>Cllr D Ó Cualáin</b>
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An Agreement for Lease (AFL) is in place for a new Primary Care Centre (PCC) in Moycullen and construction work is now underway on site on substructures. It is anticipated that the new PCC will be completed in Q4 2021 and become operational in January 2022.

As opposed to developing a Primary Care Centre in Knocknacarra it was decided to service all the needs within the West of Galway City area via one large primary care centre development. Estates have progressed this and following an expression of interest process a suitable site in the vicinity of University Hospital Galway has been identified and draft plans have been developed. It is hoped that a planning application will be lodged within the next few months. This would provide accommodation for the HSE Health Professionals who make up the Knocknacarra Primary Care Team. Separately a fit out is being progressed in Knocknacarra to provide a mental health facility for the area.

Estates advertised for expressions of interest to develop Primary Care Centres in a number of locations including in 2019. The process for this location has subsequently been progressed through Stages 1 and 2. The next step (stage 3) will be to seek priced offers from the shortlisted developers. Progress has been impacted somewhat due to the COVID-19 emergency and the need to prioritise urgent matters arising. It is hoped to complete Stage 3 in early 2021 for this location and to then work with the successful developer to deliver the new Primary Care Centre.

There are no immediate plans to develop a Primary Care Centre facility in South Connemara. The view has been that the geographical make-up of the area with a number of peninsulas may not lend itself to one central primary care facility. At present services are delivered from several sites namely Carraroe, Lettermore, Rosmuc and Carna to reflect the spread out geographic nature of the area.

**J. Hoare, Asst National Director Estates (West)**

<b>W90Q2780</b>	What cleaning procedures are in place in the Western Region for the internal cleaning of HSE National Ambulance Service vehicles in relation to suspected or confirmed cases of Covid-19? What is the normal protocol for cleaning of ambulances between calls, regardless of call type? Are ambulances deep cleaned professionally after all calls or only in confirmed infected calls? Who cleans the ambulances and what training has been provided to whoever cleans the ambulances?	<b>Cllr D Ó Cualáin</b>
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National Ambulance Service (NAS) policy has always been to assume all patients are potentially infectious and we use standard precautions for all patients as frequently NAS will not know the current infectious status of the patients presenting pre-hospital. We use Health Protection Surveillance Centre (HPSC) COVID-19 Risk Assessment when our service is the primary point of contact to try to identify potential COVID-19 positive patients. In addition we identify correct Personal Protective Equipment (PPE) to be worn and correct procedure to be followed in relation to infection control.

**NAS cleaning procedures in place in the Western Region for the internal cleaning of HSE National Ambulance Service vehicles in relation to suspected or confirmed cases of Covid-19.** NAS provide combined detergent/disinfectant wipes. Post call hygiene incorporates comprehensive cleaning and disinfection of surfaces that a patient or staff member

caring for patient may have touched/contaminated.

**NAS normal protocol for cleaning of ambulances between calls, regardless of call type,** NAS staff clean and disinfect ambulance vehicle and equipment after every call. NAS staff clean and disinfect anything the patient or staff member caring for the patient may have touched/contaminated with detergent/disinfectant wipes.

**Are ambulances deep cleaned professionally after all calls or only in confirmed infected calls?** In line with standard precautions, NAS policy is to clean and disinfect ambulances and equipment after every call. This ensures that NAS hygiene standards are maintained. NAS staff clean the vehicles and equipment they use.

In addition, NAS policy is that ambulances are deep cleaned weekly by NAS staff. All NAS Paramedics have a minimum of a Diploma or Higher Diploma from a 3<sup>rd</sup> level University, and have completed a module in Infection Prevention and Control. In situations where the NAS is notified, by a hospital, of a patient with an infection, and additional decontamination control measures are recommended, NAS may utilise the services of the contracted hospital cleaners. Where NAS staff complete a call, where the vehicle is grossly contaminated, e.g. significant blood loss, NAS may utilise the services of the contracted hospital cleaners.

**Bill Forbes, Acting Chief Ambulance Officer, NAS West**

<b>W90Q2781</b>	What plans are in place for the upcoming winter months to deal with the usual surge in activity in GUH - particularly this year with an anticipated second wave of covid-19 also to be considered? Has planning commenced to address the expected increase in demand for services within the Acute and Community settings and if so, can I get a breakdown of what this involves and where extra capacity has been identified? Will additional staff be hired to deal with possible sick leave and increased demand within the Hospital/Community?	<b>Cllr D Ó Cualáin</b>
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GUH have submitted a winter plan as part of the 2020/21 Winter Planning process which includes a range of multi-disciplinary team initiatives and additional diagnostics which would improve the patient journey through the hospital. We are awaiting a national decision on this plan. Currently we are undertaking infrastructural works in the ED to create additional capacity to enable the streaming of all patient groups, i.e. covid 19 / non covid 19 patients and surgical and medical patients. This will also create some additional capacity. Works are expected to be completed by early November

The (CTICU) Cardiothoracic ICU is being converted to create single isolation rooms with ability to have negative pressure ventilation which will assist with capacity. The works have commenced and it is anticipated that this capacity will be available end of September/early October.

Discussions are also taking place at group level with the private hospitals for options to create capacity for the period October 2020 – March 2021.

Roscommon University Hospital will support GUH, PUH and MUH during the winter period and we will continue to use all available capacity in the public and private long stay units.

Additional staff have been and continue to be recruited in the context of COVID 19 and managing patients safely over the coming winter period.

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

Implementation of Community Healthcare West's Winter Action Plan for Older Peoples Services (OPS is subject to sufficient funding being made available and timely and effective recruitment of the specialist staff/teams required.

Community Healthcare West's Winter Action Plan for Older Peoples Services (OPS) for winter 2020/2021 covers 3 main areas:



- Hospital Avoidance including keeping Nursing Home residents medically managed within the Nursing Home.
- Supporting early discharge from hospital using “Home First” and reducing the dependency on short stay admissions to step down units unless absolutely necessary
- Supporting Older People to live and stay well in their own homes and communities.

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

<b>W90Q2782</b>	With regard to progression of the 50 bed replacement ward at Portiuncula University Hospital – the existing need for these single en suite hospital bedrooms in terms of providing confidentiality, patient dignity and privacy has been given further impetus and urgency by the requirement of stringent infection control measures necessitated by the COVID-19 Pandemic. Can it be confirmed that the contract for the enabling works has (a) been awarded, (b) that works have been commenced and (c) if there has been a delay in either a or b what is the nature of same and (d) if delayed what timeline is currently in place given the current viral pandemic compounding the urgent clinical need for these 50 individual rooms.	<b>Cllr Dr E Francis Parsons</b>
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The contract for the enabling works has been awarded to Carey Developments Ltd, 6B Liosban Business Park, Tuam Road, Galway. These works commenced on site as of the 17<sup>th</sup> of August 2020 and are scheduled to be completed by mid-2021. The contract also includes for upgrade works to the radiology department which are due for completion in February 2021. This is on the assumption of no cessation of works due to Covid 19 issues. In terms of the main contract for the new 50 bed ward block, the intention would be to go to tender to shortlisted contractors around year end with a view to then being in a position to commence works in Q3 2021 subject to approval of contract award in 2021. The new ward block itself is likely to take 15 to 18 months to deliver once the contract is awarded.

**J. Hoare, Asst National Director Estates (West)**

<b>W90Q2783</b>	A rise in mental health issues and a demand for increased access to mental health support services in reaction to COVID-19 restrictions is manifesting across all age groups. The effect of lockdown on children’s mental health is particularly concerning as a result of children’s routine being impacted, their education being affected, and their social and personal development being disrupted, and some parents find juggling home schooling and working from home has impacted their own ability to cope and parent well. In addition there is a documented rise in the incidence of domestic abuse. How are the health services planning to address the increased need for Child and Adolescent mental health services as society opens back up from this pandemic? What additional service provision and supports will be made available to ensure that these adverse childhood events do not leave a permanent mark on this young generation’s mental health as well as their education and career prospects?	<b>Cllr Dr E Francis Parsons</b>
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The CAMHS service continued to operate throughout the covid crisis facilitating continuity of care through telehealth platforms e.g. attend anywhere, telephone consultations as well as face to face meetings when indicated. The GRMHS recognises the increased response that will be needed for young people in the aftermath of the pandemic and additional funding has been committed by government for the CAMHS Connect project. This will use a combination of e-mental health solutions and a hub and spoke model of day hospitals in Castlerea and Galway to provide secondary mental health services across CHO2 and reaching into Sligo/Leitrim. This service will operate over 7 days and will provide a real alternative to hospital admission for young people with moderate to severe mental health issues. It will also provide therapeutic intervention both face to face and across e mental health platforms providing flexibility and equitability across a large geographical area. The Consultant for this service has already taken up post. Three other team members an Advance Nurse Practitioner, Senior Social Worker, Senior Occupational Therapist are

being recruited this year with the remainder of the staff (8WTES) coming on stream next year.

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

<b>W90Q2784</b>	What provision has HSE West made to support family carers providing care at home during the current COVID-19 crisis? What homebased elderly care services are available apart from GP doctor visit cards? Is eligibility for same dependent on medical card status? What extra measures if any will be put in place to support home based carers providing care for all age groups in need of care and infection protection especially with winter's imminent influenza season and further spikes in COVID-19 likely to place heightened demands on hospital services and mitigate against admission to hospital except in clinically acute cases?	<b>Clr Dr E Francis Parsons</b>
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The HSE Carers Department, Galway provides ongoing support, information and advice to family Carers registered with the Department. A COVID-19 support letter was issued to just over 1,000 family Carers registered with the Department at the end of March 2020. Advice included information on emergency care plan completion, the community support Helplines for arranging deliveries of groceries, prescriptions and fuel, the Age Action/Irish Red Cross Hardship Fund, the Family Carers Ireland (FCI) 24/7 Careline number, and COVID-19 social welfare supports for family Carers. Family Carers were advised to contact the HSE Carers Department with any queries relating to caring and to contact their regular service provider.

The HSE Carers Department analysed its active database and prioritised contacting full-time family Carers in the high risk groups i.e. increasing age, medical history, level of dependency of CFP, and on an ongoing basis have discussed any unmet needs, such as, counselling, home support services review, PPE need etc. All family Carers registered, are made aware that they can contact the Department with any queries in respect of their caring role and new Carers are referred weekly on an ongoing basis by Carers themselves and by health professionals in both community and the acute sector.

The HSE Carers Department in Galway has a Service Arrangement with Family Carers Ireland (FCI) and part-funds the FCI Carer Support Manager's position based in Tuam and covering Galway. FCI secured funding for PPE for family Carers and the HSE Carers Department has made referrals for PPE to both national and local FCI office on behalf of family Carers and continues to do so. The Carers Department also provide some family Carers with PPE from its own supply. Information on the correct use of PPE such as face coverings is included.

The HSE Carers Department has also established an effective referral process with the Counselling in Primary Care Service (CIPC), and with the consent of family Carers who have been adversely affected by the COVID-19 pandemic, such as closure of day services for older people and for people with disabilities, closure of residential respite; the Carers Department continues to refer family Carers to the CIPC Service to avail of up to 6 counselling sessions free of charge including those who do not have a medical card (which pre COVID-19 was a requirement for referral).

The HSE Carers Department prioritise full-time family Carers based on their individual circumstances to enable them to receive a much needed break from their caring role. (Carers do not have to be in receipt of a medical card).

Services provided through the Disability Services PA Service and Older Persons Services - Home Support Services, also have the dual benefit of supporting family Carers as well as the person directly receiving these services.

The HSE Carers Department is currently undertaking a second COVID-19 support mailshot to all registered family Carers in Galway with an emphasis on the importance of them and the person they care for receiving the seasonal flu vaccine, in particular if they are in the at-risk groups, and also the completion of the newly launched FCI Emergency Care Plan to ensure family Carers in Galway receive their Emergency Card, this FCI Emergency Care Plan was officially launched by Taoiseach Micheál Martin on 31<sup>st</sup> August. Immediately following the launch, the HSE Carers Department in Galway engaged with the FCI National Office who have agreed to send sufficient leaflets for inclusion in its 2<sup>nd</sup> COVID-19 support mailshot. The HSE Carers Department in conjunction with HSE Communications have recorded a "Thank You

and Information Support” Video for family Carers and have also recorded videos with two full-time family Carers with the central theme of family Carers supporting each other and asking for help.

The HSE Carers Department in Galway contacts registered and new family Carers on a daily basis. They have advised that having a central point of contact as a family carer, to help them navigate the various services, supports and information is a relief.

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

<b>W90Q2785</b>	What is the current procedure for disposal of used COVID-19 PPE waste from hospitals and community residential care facilities from perspectives of infection control and environmental impact considerations? What has been the requirement for increased bio-waste disposal services above level of disposal in pre-pandemic conditions in Regional Health Forum West Area? What additional expenditure is necessarily incurred in disposal of used COVID-19 PPE waste in Regional Health Forum West Area above costs of bio-waste disposal in pre-pandemic conditions?	<b>Cllr Dr E Francis Parsons</b>
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COVID-19 PPE waste from all hospitals is disposed of as per HPSC guidelines and the Department of Health ‘Segregation, Packaging and Storage Guidelines for Healthcare Risk Waste’ 2010, 4<sup>th</sup> Edition.

Clinical waste generated from COVID-19 suspected or confirmed cases including the contaminated PPE is treated as Category B, clinical waste, packaged in UN approved clinical waste packaging and collected in UN approved yellow wheelie bins.

PPE that is currently worn by staff in non Covid areas as a precaution is disposed of in the regular household waste stream.

To reduce the volume of PPE waste many hospitals have purchased reusable gowns which are washed at 60 degrees.

**Galway University Hospitals**

There is a Monday to Friday collection for food waste/ biodegradable waste. The number of collections has not altered during the pandemic. But there was a decrease in the quantity of food waste collected per month between February and May.

General waste collections have remained the same, with no increase in the frequency of collections from the UHG waste compound. The hospital uses a 40cy compactor which is collected and emptied twice a week. There was a decrease in the quantities of general waste collected from UHG between April to July.

We have increased the number of collections of clinical waste from the UHG waste compound from 4 collections per week to 5 collections per week. An average of 35 x 770 litre yellow wheelie bins being collected every Friday in addition to the Monday to Thursday collections by the Healthcare Risk Waste contractor.

For clinical waste (Category B) it is difficult to identify what the increase in disposal costs are in relation to the disposal of PPE via the clinical waste stream as contaminated PPE would be in a clinical waste bag amongst other clinical waste/ healthcare risk waste items generated in the ward/unit/patient room/ examination area etc. The overall clinical waste disposal cost will include this.

See below from Jan –July all quantities are in tonnes.

	<b>2019 Clinical Waste (Healthcare risk waste excluding waste from Biosystem reusable Sharps Bins)</b>	<b>2020 Clinical Waste (Healthcare risk waste excluding waste from Biosystem reusable Sharps Bins)</b>	<b>2020 Cost of increase of Clinical Waste (where applicable)</b>
Jan	29.44	28.32	N/A
Feb	25.88	25.90	N/A
Mar	26.43	31.18	€4,683.50
April	29.67	31.02	€1,331.11
May	28.86	30.67	€1,784.66
June	25.56	34.60	€8,913.44
July	31.80	33.78	€1,952.28

#### **Portiuncula University Hospital**

From Jan to August 2019 to the same period waste disposal costs have increased by approximately 11%.

#### **Roscommon University Hospital**

In the period March to August 2020 the hospital disposed of 15,129kg of clinical waste compared to 10,534kgs in the equivalent months in 2019. The quantities of clinical waste increased in the period from May to June 2020, but have reduced in July and August to equivalent levels disposed of in 2019.

In the period March to August 2020 the hospital spent €14,917 on clinical waste disposal costs, compared to €10,109 in the equivalent period in 2019.

#### **Mayo University Hospital**

Collections of the waste from the hospital increased from 2 weekly collections to 3 weekly collections when it was required. The additional costs of this due to COVID-19 are approximately €27,000 as at 31<sup>st</sup> August 2019.

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

##### **CHO2 Response**

HSE Community Healthcare West is guided by the Health Protection Surveillance Centre's Infection Prevention and Control Guidelines (Version 6.0 issued on 28<sup>th</sup> July 2020) regarding its disposal of bio-waste materials, including COVID-19 PPE waste.

Disposal of all such waste in all Community Healthcare West's Residential Care Facilities with confirmed or suspected cases of COVID-19 is treated as clinical/bio-waste and disposed of accordingly per the Health Protection Surveillance Centre's Guidelines.

In relation to the additional expenditure incurred in clinical/bio-waste disposal when the period March to July 2020 versus March to July 2019 there is an increase in expenditure of 30% Year-on-Year in the area covered by Community Healthcare West amounting to €42,000. The cost includes the disposal of all clinical waste across the CHO and not just in Residential Care facilities.

Disposal of all such waste in all Community Healthcare West's Residential Care Facilities with confirmed or suspected

cases of COVID-19 is treated as clinical/bio-waste and disposed of accordingly per the Health Protection Surveillance Centre's Guidelines.

In relation to the additional expenditure incurred in clinical/bio-waste disposal when the period March to July 2020 versus March to July 2019 there is an increase in expenditure of 30% Year-on-Year in the area covered by Community Healthcare West amounting to €42,000. The cost includes the disposal of all clinical waste across the CHO and not just in Residential Care facilities.

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

<b>W90Q2786</b>	Can the HSE inform the members of this Forum if a Design team has been put in place for the new 50 bedded CNU at the Sacred Heart Hospital Roscommon?	<b>Cllr T Ward</b>
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Unfortunately, a design team is not yet in place for the intended new 50 bed unit at the Sacred Heart Hospital in Roscommon. The procurement of this design team is currently a work in progress and it is a priority to get it completed and have the design team formally appointed this year.

**J. Hoare, Asst National Director Estates (West)**

<b>W90Q2787</b>	Can the HSE inform the members of this Forum if the HSE has any plans to open the St. Bridget's Ward at Roscommon County Hospital on a seven day week basis?	<b>Cllr T Ward</b>
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Part of Saolta University Hospital Group Winter Plan includes weekend opening of 5 day beds on St. Bridget's ward to support Model 3 & Model 4 hospital discharges from Dec 2020- March 2021. This will be dependent on allocation of funding under the Winter Planning Process and the ability to recruit staff.

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

<b>W90Q2788</b>	Can the HSE inform the members of this Forum the amount of funding made available to the Mental Health Services in County Roscommon for 2019 and 2020?	<b>Cllr T Ward</b>
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The Community Healthcare West Budget for Mental Health services in County Roscommon is as follows.

<b>14.50m</b>	<b>2019 Budget</b>
<b>14.73m</b>	<b>2020 Budget</b>

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

<b>W90Q2789</b>	Can the HSE inform the members of this Forum and give an update on the provision of extra car parking spaces at Roscommon County Hospital?	<b>Cllr T Ward</b>
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In October 2019, detailed traffic studies were undertaken in parallel with an evaluation of the hospital activity, given the rapid increase in outpatient and day services over the recent years. The results of this study were to form basis of a traffic management plan which was to be completed in early 2020. Like many other projects, this has had some delays due to COVID 19. It is hoped that this will now be completed in Q4, 2020, and will form the basis of application for funding for additional car parking for hospital services. Like many other projects, this has had some delays due to COVID 19.

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

<b>W90Q2790</b>	Can the Forum receive an update on the status of the plans to develop a new ED at UHG and the status of plans to develop new oncology facilities at UHG?	<b>Cllr J Connolly</b>
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**ED Project**

The project design team for the ED project at UHG were requested to assess the feasibility of including the development of the Women and Children's element of the new block, at the same time as the development of the lower ED floors. This feasibility report has been completed and is being considered by the HSE nationally. We will progress to the planning permission stage once the project has been approved nationally.

In parallel, the design of the enabling works for the site is progressing and are proceeding with the both Winter ED works to create a green stream ED as part of our COVID planning preparations and also the commencement of construction of the Temporary ED as one of the enabling projects.

**NPRO Project**

**The Radiation Oncology Facility**

This project has been included in the HSE 2020 Capital Programme and has been granted Capital Allocation in 2020. The tender for the building contractor has been awarded and site works commenced on 7<sup>th</sup> September. The construction is to be completed by 2022 and a further period of time is required for the commissioning of the equipment.

***J. Hoare, Asst National Director Estates (West)***

<b>W90Q2791</b>	How many children currently have live applications under the assessment of need process in Co Galway? Can the forum receive data on the range of waiting times experienced by the applicants?	<b>Cllr J Connolly</b>
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There are currently 69 live applications under assessment of need for Galway. In the case of 39 of these, the assessments are already underway and some are nearing completion. In the case of the remaining 30, assessments have not yet commenced. Many of these assessments have been delayed because of the impact of Covid 19 and accompanying restrictions including redeployment of clinicians to Covid 19 related duties.

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

<b>W90Q2792</b>	Can the forum be advised of the capacity of the CAMHS facility in Merlin Park for In-Patient treatment? How many patients were admitted for in-patient treatment in the CAMHS facility in Merlin Park during 2019? Can the forum receive data on bed occupancy at the facility throughout 2019?	<b>Cllr J Connolly</b>
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The CAMHS Inpatient Unit in Merlin Park is a 20 bedded unit. The CAMHS Unit had 69 admissions during 2019. The occupancy rate is with an average monthly rate of 72%.

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

<b>W90Q2793</b>	Can the Forum be provided with the data on the number of postponed procedures at Galway University Hospitals to date in 2020?	<b>Cllr J Connolly</b>
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As we are unable to provide Postponed Procedures as a category of data the numbers of GUH cancellations to date both Hospital Initiated and Patient Initiated are being provided in response to this question.

Hospital Initiated Cancellations		Patient Initiated Cancellations	
Month	Total	Month	Total
Jan-20	640	Jan-20	738
Feb-20	455	Feb-20	690
Mar-20	1064	Mar-20	575
Apr-20	688	Apr-20	122
May-20	459	May-20	276
Jun-20	395	Jun-20	437
Jul-20	372	Jul-20	558
Aug-20	368	Aug-20	524
Sep-20	141	Sep-20	237
<b>Total</b>	<b>4582</b>	<b>Total</b>	<b>4157</b>

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

<b>W90Q2794</b>	Can we have a report on the audiology services provided in Donegal and confirmation if we have the adequate resources to deal with the needs of our clients and if or any what impact Covid has had on the service?	<b>Cllr C Brogan</b>
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The Community Audiology Services in Donegal provides the following services across all ages:

- hearing assessment including neonatal diagnostic assessment,
- hearing aid fitting and follow up care (medical card only eligibility for adults, all children up to 18 years for assessment/hearing aid fitting and including those with hearing loss in 3rd level education with eligibility for HSE Community Audiology service)
- referrals to medical, allied medical, education and support agencies including GPs, Paediatrician, Ear, Nose and Throat Services, Speech and Language Therapy, Early Intervention Services and specialist Dept. of Education Service and CHIME

The Donegal Paediatric Service has 1 wte Audiologist who returned from statutory leave in May 2020. The Sligo/Leitrim Paediatric Audiology service provided some cover for children with permanent hearing loss/hearing aids in Donegal during this period of leave.

The Donegal Adult Service has 2 wte Audiologists and 1 wte Assistant Audiologist however currently one of these Audiologists is re-deployed to the Letterkenny Covid-19 Testing Centre for 1 day per week. The Assistant Audiologist is also providing repair services for all hearing aids dropped, or posted, into PCC Stranorlar.

The hearing aid repair service and ear mould services have been uninterrupted throughout Covid restrictions in 2020.

Similar to other therapy services in County Donegal, the Audiology Service has been and continues to provide virtual appointments through the “Attend Anywhere” IT platform where it is deemed appropriate for our clients.

**John Hayes, Chief Officer, CHO1**

<b>W90Q2795</b>	Can we have an updated report The outstanding vacant positions in LUH and how are we still using agency staff?	<b>Cllr C Brogan</b>
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LUH vacancies at 12.9.2020							
Site	Medical /Dental	Nursing & Midwifery	Health & Social Care	Management /Admin	General Support	Patient & Client Care	Total
LUH	4	20	12.7	14	8.79	8	<b>67.49</b>
LUH Agency at 12.9.2020							
Site	Medical /Dental	Nursing & Midwifery	Health & Social Care	Management /Admin	General Support	Patient & Client Care	Total
LUH	20	4	2	1		27 (HCA)	<b>54</b>

**T. Canavan, CEO, Saolta University Healthcare Group**

## Appendix 1 – Q2759

Family Name	First name	Address 1	Address 2	HSE Health Centre /Primary Care Centre	HSE Staff Base / Visiting Clinic	Licence Agreement /FOC (Free Of Charge)
Fitzsimons	Helen	Health Centre	Gurteen	Gurteen HC	Yes	FOC
<b>Ballymote Family Practice</b>						
Roe	William	Primary Care Centre	Ballymote	Ballymote PCC	Yes	Licence Agreement commencing 01/11/2008. Initial fee free period with first payment due 01/11/20. Licence fee charge of €16,000 per annum.
Conheady	Patrick	Primary Care Centre	Ballymote			
McGowan	Valerie	Health Centre	Ballymote & Geevagh			
Coleman	Michael	Coen's House, Teeling Street	Aclare HC	HSE Rental	Yes	FOC
O'Baoighill	Seamus	Health Centre	Tubbercurry	Tubbercurry HC	Yes	FOC
Fox	Michael	Health Centre	Banada	Banada HC	Yes	FOC
McElgunn	Bríd	Health Centre	Coolaney	Coolaney HC	Yes	FOC
<b>Collooney Practice</b>						
Daly	John	Health Centre	Collooney	Collooney HC	Yes	FOC
Smyth	Donal	Health Centre	Collooney			
<b>The Medicentre Practice Sligo</b>						
Tiernan	Damian	Primary Care Centre, Barrack Street	Sligo	PCC Barrack St	Yes	This practice moved into Barrack Street in 2002. The understood basis was an



Russell	Keith					agreement for 20 yrs at fee of €8,570.00 per annum. The Practice has disputed this with no resolution reached to date.
Barrett	Catherine					
<b>The Health Centre Practice, Sligo</b>						
Gallagher	Lisa	Primary Care Centre, Barrack Street	Sligo	PCC Barrack St	Yes	This practice moved into Barrack Street in 2002. The understood basis was an agreement for 20 yrs at fee of €11,427 per annum. The Practice has disputed this with no resolution reached to date.
Casey	Des					
<b>The Mall Family Practice, Sligo</b>						
Quinn	Roddy	Primary Care Centre, Barrack Street	Sligo	PCC Barrack St	Yes	This practice moved into Barrack Street in 2002 on understood basis of 20 yr agreement. The Practice disputed this. In 2017 a licence agreement was signed for period 2002-2022. As of 16/04/2020 the practice had paid a total of €77,764.00 for period from 2002 to date with drugs savings monies additionally used to offset some cost.
O'Shaughnessy	Peter					
O'Connor	David					
<b>West Sligo</b>						

<b>Skreen Family Practice</b>						
Dunne	Sorcha	Health Centre	Skreen	Skreen HC	Yes	FOC
Duffy	Carol					
<b>Easkey Practice</b>						
Canning	Siobhan	Health Centre	Easkey	Easkey HC	Yes	FOC
<b>Enniscrone Practice</b>						
McSharry	Patrick	Health Centre	Enniscrone	Enniscrone HC	Yes	FOC
Syron	Elaine					
Higgins	Seamus					
<b>Other GPs</b>						
Visiting GP - Dr. Hever Practice		Health Centre		Carrigans HC	Yes	FOC
Visiting GP - Dr. Hever Practice		Health Centre		Cliffoney HC		
Visiting GP - Dr. Hever Practice		Health Centre		Dromore West HC		
Visiting GP - Dr. Hever Practice		Health Centre		Geevagh HC		
Rivertown Medical Practice		Health Centre		Riverstown HC		

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