



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

REGIONAL HEALTH FORUM, SOUTH

ANNUAL REPORT 2022

FOREWORD

The Regional Health Fora were established in January, 2006, as an integral part of the reform of the Health Services.

The Forum's function is:

"To make such representations to the Executive as the Forum considers appropriate on the range and operation of the health and personal social services provided within its functional area".

I wish to acknowledge the commitment of the Members and the support of the Executive since I took up my position as Chairperson and I will endeavour to honour my commitment for the upcoming year.

I attach the Annual Report for 2022 which outlines the activities of the Forum to 31st December 2022.

On approval by members, the Report will be forwarded to your respective County or City Councils Managers for circulation for the information of all members who may be interested in the work undertaken by the Forum in 2022.

**Cllr Mikey Sheehy
Chairperson**

REGIONAL HEALTH FORUM – SOUTH

Chairperson: Cllr Mikey Sheehy
Vice-Chairperson: Cllr John Coonan

SOUTH EAST COMMITTEE:

Chairperson: Cllr John Coonan
Vice-Chairperson: Cllr John McDonald

SOUTH WEST COMMITTEE:

Chairperson: Cllr Pat Hayes
Vice-Chairperson: Cllr Niall Kelleher

MEMBERS REPRESENTING CARLOW COUNTY COUNCIL

Cllr Arthur McDonald
Cllr John McDonald
Cllr Michael Doran

MEMBERS REPRESENTING CORK CITY COUNCIL

Cllr Joe Kavanagh
Cllr Ken O’Flynn
Cllr John Sheehan
Cllr Ted Tynan

MEMBERS REPRESENTING CORK COUNTY COUNCIL

Cllr Ann Marie Ahern
Cllr Audrey Buckley
Cllr Danny Collins
Cllr Caroline Cronin
Cllr Pat Hayes
Cllr Mary Lenihan Foley
Cllr Eileen Lynch
Cllr Susan McCarthy
Cllr Sean O’Donovan

MEMBERS REPRESENTING KERRY COUNTY COUNCIL

Cllr Michael Foley
Cllr Niall Kelleher
Cllr Norma Moriarty
Cllr John O’Donoghue
Cllr Mikey Sheehy

MEMBERS REPRESENTING KILKENNY COUNTY COUNCIL

Cllr Peter Cleere
Cllr John Coonan
Cllr Pat Dunphy
Cllr Michael McCarthy

MEMBERS REPRESENTING SOUTH TIPPERARY COUNTY COUNCIL

Cllr Declan Burgess
Cllr Mark Fitzgerald
Cllr Roger Kennedy
Cllr Richie Molloy

MEMBERS REPRESENTING WATERFORD CITY & COUNTY COUNCIL

Cllr Declan Clune
Cllr Pat Fitzgerald
Cllr Damien Geoghegan
Cllr Conor McGuinness
Cllr Jody Power

MEMBERS REPRESENTING WEXFORD COUNTY COUNCIL

Cllr Cathal Byrne
Cllr Pat Barden
Cllr Cllr Donal Kenny
Cllr Garry Laffan

CONTENTS

Background Regional Health Forum, South

Notice of Motions and Question Responses, Forum Meeting 24th February 2022

Notice of Motions and Question Responses, Forum Meeting 19th May 2022

Notice of Motions and Question Responses, Forum Meeting 2nd June 2022

Notice of Motions and Question Responses, Forum Meeting 23rd June 2022

Notice of Motions and Question Responses, Forum Meeting 22nd of September 2022

Notice of Motions and Question Responses, Forum Meeting 23rd of November 20

Minutes of Forum Meetings – February to November, 2022

Regional Health Forum South

Background

The Health Act 2004 provided a legal framework for the establishment of the Health Service Executive (HSE) on a statutory basis. With effect from 1 January 2005, the HSE took over responsibility for the management and delivery of health services from the Eastern Regional Health Authority, the health boards and a number of other agencies.

Part 8 of the Act – “Public Representation and User Participation” – sets out at Section 42, the establishment of four Regional Health Forums (RHF).

The function of the RHF is “to make such representations to the Executive [of the HSE] as the forum considers appropriate on the range and provision of health and personal social services provided in its functional area...” The RHF’s comprise of representatives from the City and County Councils within the functional area of each Forum.

The establishment day for the Regional Health Forum, South was January 1st 2006. Its functional area is the administrative area of Carlow County Council, Cork City Council, Cork County Council, Kerry County Council, Kilkenny County Council, South Tipperary County Council, Waterford County Council and Wexford County Council. These Councils between them have appointed the 39 members of the Regional Health Forum, South.

The other 3 Regional Health Forums are:-

- Regional Health Forum, Dublin-Mid Leinster (40 members)
- Regional Health Forum, Dublin and North East (29 members)
- Regional Health Forum, West (40 members)

In line with Section 42(7) of the Health Act 2004 the Health Service Executive provides administrative support to the Regional Health Forums. This is provided through the Regional Health Office.

Regional Health Forum Meetings

The Forum meets 6 times in a full year. Meetings in 2022 were held on:

- Thursday 24th February 2022
- Thursday 19th May 2022
- Thursday 2nd June 2022
- Thursday 23rd June 2022
- Thursday 22nd of September 2022
- Thursday 23rd November 2022

The HSE is represented at the meetings by the following Management:

- Chief Executive Officer of the South/South West Hospitals Group
- Chief Operations Officer of the South/South West Hospitals Group
- Chief Officer of the Cork Kerry Community Healthcare
- Chief Officer of the South East Community Healthcare
- Chief Operations Officer of the Ireland East Hospital Group

Committee meetings

The Regional Health Forum, South has established 2 Committees:-

(a) South East Committee **(b)** South West Committee

These Committees meet rotating between locations and furnishing reports and recommendations to the Forum. The Committee meetings for 2022 were held on:

Tuesday 1 st March	South East
Thursday 3 rd March	South West

Tuesday 5 th April	South East
Thursday 21 st April	South West

Tuesday 22 nd July	South East
Thursday 20 th October	South West

Tuesday 13 th December	South East
Thursday 15 th December	South West

Standing Orders

Standing Orders which regulate the proceedings and business of meetings were agreed and adopted by the Forum members on the 4th May, 2006. At the September meeting 2011 a Report on Proposed Revision of Standing Orders and Other Arrangements to Improve the Operation of the Regional Health Forum and its Committees was approved by members and agreed changes were implemented.

Notices of Motions

As per Standing Orders each Member can submit one Notice of Motion 10 clear days prior to a meeting. Motions are circulated with the agenda to each Member and debated at the meeting. In 2022 29 Motions were adopted by Members and forwarded to the Office of the Chief Executive Officer, HSE.

Questions

As per the Standing Orders, one written Question per Member can be submitted to the Regional Health Office ten clear days before a Forum meeting. Written answers prepared by the appropriate service are circulated at the meeting. In 2022 Regional Health Forum South Members submitted 18 Questions.

Presentations

The following presentations were delivered to the Forum Members:-

- Connecting for Life, Ireland's National Strategy to Reduce Suicide 2015-2024 Ms Tracy Nugent, HSE Resource Officer for Suicide Prevention, South East Community Healthcare and Mr Martin Ryan, HSE Resource Officer for Suicide Prevention, Cork/Kerry Community Healthcare
- Presentation on the PCRS - Primary Care Reimbursement Services (Medical Card Services) to be given by Mr Shaun Flanagan, Assistant National Director and Kate Halliwell, General Manager, National Medical Card Unit.
- Update on Long Covid to be given by Dr Arthur Jackson, Consultant Physician, Cork University Hospital.

MOTION AND QUESTION RESPONSES

FORUM MEETING
24th February 2022

MOTIONS

Motion 5(a) on Agenda refers:

“In light of the unacceptable substandard and a serious deficit of CAMS services in South Kerry, that an urgent report on the delivery of CAMHS in HSE South, county by county be outlined to the meeting.”

Cllr John Coonan

Child and Adolescent Mental Health Services (CAMHS) provide specialist mental health treatment and care to young people up to 18 years of age, who have moderate to severe mental health disorders that require the input of a specialist multi-disciplinary mental health team.

All referrals received to CAMHS services are triaged in a timely manner and the referral is either accepted or rejected at that point. Referrals accepted are waitlisted in order of clinical priority and wait lists vary across each sector based community team. Urgent referrals to all teams are prioritised. The teams can also offer signposting depending on the nature of each referral

CAMHS Structures

There are a total of eight sector based community mental health teams in Cork and two sector based teams in Kerry. The CAMHS community based teams are supported by Eist Linn, Child and Adolescent Inpatient Unit.

The Child and Adolescent Mental Health Services (CAMHS) in the South East have nine community-based teams all of whom are led by a CAMHS Consultant Psychiatrist. There are 8 x CAMHS Consultant Psychiatrists working on a full-time basis and 1 CAMHS Consultant Psychiatrist working in a half-time capacity. All of the CAMHS Consultant Psychiatrists are HSE employees with the exception of 1 x Consultant who is working in a locum capacity pending permanent filling of the post.

In addition to a CAMHS Consultant Psychiatrist all CAMHS teams are staffed by a team of clinical healthcare professionals including nursing, occupational therapy, psychology, social work etc.

CAMHS Staffing

South East Community Healthcare:

CHO	Service Provider	Population 0 - 18	Actual Clinical WTE
CHO 5	Carlow / Kilkenny 1	17,607	8.3
CHO 5	Carlow / Kilkenny 2	17,606	7.9
CHO 5	South Tipperary	11,209	6.6
CHO 5	South Tipperary Team 2	12,495	5.6
CHO 5	Waterford	33,439	11.0
CHO 5	Wexford North	19,909	6.6

CHO 5	Wexford South	19,257	7.4
CHO 5	Total	131,522	53.4

Area	% as per Staffing Numbers recommended by Vision for Change
Wexford	42.7%
Waterford	41.4%
Carlow/Kilkenny	53.9%
South Tipperary	54.5%

Cork Kerry Community Healthcare:

Service Provider	Population 0 – 18	Actual Clinical December 2021 WTE	Recommended Staffing Level in Line with VfC
Cork North Central	15,529	6.6	48.3%
Kerry Team 1 KN	15,752	8.6	62%
Kerry Team 2	18,775	8.9	53.9%
North Cork	24,363	10	46.6%
North Lee East	16,937	11.4	76.51%
North Lee West	16,572	9	61.75%
South Lee / West Cork	19,171	8.9	52.76%
South Lee 1	15,350	7.9	58.5%
South Lee 2	9,101	11.2	(12%)
South Lee 3	16,992	10.5	76.3%
Total	168,542	93 WTE	51.96%

As the members will be aware, there are long-standing workforce challenges and although additional investment has been approved for some community services, the ability to recruit and retain the community workforce is an on-going significant issue. These workforce challenges have grown over the last two years as a result of competing priorities to deliver essential programmes of work including vaccination services, test and trace services, the implementation of key policies as well as on-going operational challenges of winter, the COVID response and the cyber-attack. It is acknowledged that the number of people on CAMHS waiting lists for treatment or assessment exceeds Sláintecare waiting time targets.

The commitment to Sláintecare has been reconfirmed in the Programme for Government and the overall budget 2021 has invested in staffing and infrastructure so as to enhance the permanent capacity of our health services and expand the scale and range of services to be provided in the community. A budget of €250 million has been allocated nationally to address waiting lists and to deliver on waiting list initiatives across the health service. A project team has been established in Community Operations with senior national representation from all Care Groups to oversee the further development and implementation of waiting list initiatives. The project team will collaborate with CHO colleagues and partners in acute services, procurement, NTPF and the Department of Health with a key goal to address waiting list issues.

In 2022, 7 additional clinical posts will be provided for CAMHS Teams across the South East. Cork Kerry Community Healthcare have confirmation of funding for a

new initiative which will commence in 2022, a CAMHS Hub Pilot. Provision for this new referral option is outlined in Sharing the Vision, A Mental Health Policy for Everyone, 2020. Also, recruitment is underway for two additional posts within our sector teams, a Senior Speech and Language Therapist in North Lee North and a CAMHS Social Worker will be spread across South Lee B and C teams. It is also important to note that both SECH and CKCH Mental Health Services are proactively seeking to increase the number of HST posts as a way to 'grow your own' medical specialists, HST is a pathway for NCHDs (Non Commissioned Hospital Doctors) to pursue a CAMHS specialty.

Management in Mental Health Services in both SECH and CKCH have been taking every measure to acquire the necessary resources, clinical and otherwise, to ensure a quality service for children going forward. We will continue our efforts to recruit appropriately trained medical personnel and explore all possible alternative arrangements to meet the needs of those in need of Child and Adolescent Mental Health Services.

Sean Maskey Look Back Review Report

An audit of 50 case files at South Kerry CAMHS which began in October 2020 following concerns that were raised by a Locum Consultant in September 2020 about the clinical practice of a Non-Consultant Hospital Doctor (NCHD1) in prescribing, care planning and diagnostics was concluded February 2021.

The Chief Officer formally commissioned a full Look-Back Review (LBR) in April 2021 which was led by a CAMHS Consultant Dr Seán Maskey from the Maudsley Hospital in London. The purpose of the LBR was to consider the potential clinical issues relating to the clinical practice of NCHD1 in prescribing, care planning, diagnostics and clinical supervision in South Kerry CAMHS between July 2016 and June 2020.

The process involved the review of the files of close to 1,500 children and young people who had attended the service during that period. As a result of the review of the files, review meetings were offered to 240 young people and their families to advise them of the findings relating to concerns about the care they had received.

These meetings followed the Open Disclosure process and were undertaken by clinicians and senior managers who advised on any necessary follow-up services for the young people concerned and provided an apology, on behalf of the HSE, to each individual for the failings in their care.

The 35 recommendations that stem from the analysis and findings detailed in the Maskey report and cover areas such as re-establishing trust in the CAMHS service, governance, of the service, delivery of clinical services, improved clinical practice, shared care, quality, patient safety and Risk Management, training, and the use of information and communication technology to support the delivery of services.

These recommendations have been used to consider local and national implications and actions underway, both locally and nationally that will see these further developed. The HSE is now standing up an oversight structure to ensure delivery of a comprehensive plan for all 35 recommendations contained in the Look-Back Review Report.

National CAMHS Audit

Both Cork Kerry Community Healthcare (CHO 4) and South East Community Healthcare (CHO5) fully support and will comply with the recently announced national audit of Child and Adolescent Mental Health Services and operational guidelines.

Kate Killeen White
Chief Officer
South East Community Healthcare

Jackie Daly
Acting Chief Officer
Cork Kerry Community Healthcare

Notice of Motion 5(b) on Agenda refers:

“Regarding the ongoing issues of recruiting and retaining home care workers in the Non-Government Organisation sector (NGO) in the South East, will the HSE consider giving money towards mileage for section 39 Home Care Workers.”

Cllr Richie Molloy

Under the Health Act 2004 the HSE provides funding to Section 39 Agencies in delivering services that are similar or ancillary to what the HSE provides. It should be noted that the HSE is a part funder of many Section 39 organisations and engages with those organisations in relation to HSE funding only.

The Service Arrangement which the HSE and the Section 39 agency enter into sets out the detail of what the funding is to be utilised for. The Section 39 agency cannot pay or subsidise salaries, expenses or any other perquisites which exceed those normally paid within the public sector. The HSE does not have the autonomy to prescribe to Section 39 agencies in relation to the terms and conditions of their employees.

It is acknowledged that at present there are significant recruitment challenges for Home Support Workers for HSE, Private Providers and Section 39 Agencies.

It is understood that any increase in payments by Section 39 agencies to their staff members will impact on the overall budget availability and with an associated impact on service delivery.

The two main agencies currently involved in the provision of home support/respite and funded under Section 39 grant funding (Family Carers Ireland and The Alzheimer Society of Ireland). The HSE/South East Community Healthcare Services for Older

People continues to be available and willing to liaise with any individual agency in relation to specific concerns on this matter.

Kate Killeen White
Chief Officer
South East Community Healthcare

Notice of Motion 5(c) on Agenda refers:

“That this Forum will progress policy regarding our retained fire service members, that they be able to assist the National Ambulance Services as first responders and to be deployed in cardiac arrest calls to help alleviate the pressures on the NAS. That sufficient adequate training be provided to firefighters so as they can safely provide this service. And that permission be sought from the HSE National Ambulance service to be able to assist them and provide this service, and that immediate engagement commence to allow this service to be up and running as soon as possible.”

Cllr Mary Lenihan Foley

The National Ambulance Service supports many groups in setting up Community First Responder programmes. It’s not a case of permission, we would ensure all groups meet a certain training and operational criteria so they can be effectively dispatch by our National Emergency Operations Centre to cardiac arrest emergency’s. The National Ambulance Service would welcome assistance in that regard.

Nicky Glynn
Chief Ambulance Officer
National Ambulance Service

Motion 5(d) on Agenda refers:

“That the HSE would ensure the drug Cariban for the treatment of Hyperemesis Gravidarum and pregnancy sickness would be available as required by pregnant women attending both in-patient and out-patient maternity services. At present only a number of hospitals offer this medication to pregnant women attending in-patient

services. Those not able to avail of these services must purchase the medication themselves are significant cost. Pregnancy Sickness is a very serious condition and should be considered as such”.

Cllr Conor McGuinness

The four (4) maternity units within the South/ South West Hospital Group offer the drug Cariban for the treatment of Hyperemesis Gravidarum and pregnancy sickness to both inpatients and outpatients as required.

**Tess O’Donovan
A/Chief Operations Officer
South West Hospital Group**

IEHG can confirm that their maternity units offer the drug Caratan for the treatment of pregnancy sickness as required.

**Ken Fitzgibbon
A/Chief Operations Officer
Ireland East Hospital Group**

Notice of Motion 5(e) on Agenda refers:

“That this Forum is provided with an update on the recruitment process for extra nurses at West Kerry Community Hospital so that the closed ward can be opened for West Kerry patients.”

Cllr Mikey Sheehy

West Kerry Community Hospital (WKCH) provides important services for the people in this region. As well as long-stay residential care, WKCH also provides short-stay beds which are used for respite and rehabilitation.

We plan to increase capacity at West Kerry Community Hospital once additional staff have been recruited. In the meantime, we can only operate our services safely by adapting their provision to the resources we currently have. As additional staff are recruited, further beds will be made available.

Extensive and prolonged efforts are ongoing, both locally and nationally, to recruit staff. There have been enormous demands on the health service since the beginning of the pandemic in 2019 with nursing staff in particular being in demand to match all service requirements. Unfortunately, staff recruitment to West Kerry Community

Hospital and many other community hospitals in rural locations can be extremely challenging.

4.5 WTE vacant nursing posts, along with a number of Health Care Assistants posts, need to be filled to open the remaining beds. Every effort is being made to reach as many prospective candidates as possible in order to ensure that West Kerry Community Hospital can provide optimum services to the local community.

A Staff Nurse campaign for Older Persons Services was initiated by Cork Kerry Community Healthcare in January 2022. The closing date was 2nd February and shortlisting/interview scheduling is underway. We are hopeful for interested candidates for WKCH once a panel has been formed. In addition to this campaign, an advert was placed locally in West Kerry Live last week to specifically reach out to prospective nursing candidates in the Dingle area. The closing date for this local campaign is the 28th February.

Interviews for Health Care Assistant (HCA) posts were held locally before Christmas and three candidates were panelled. Two accepted posts - one commenced this month and the other candidate is due to start next month. The third candidate declined a job offer. 1.67 WTE HCA posts remain vacant and we have requested that the remaining WKCH vacancies be expressed out to the existing Cork Kerry Community Healthcare HCA panel.

Jackie Daly
Acting Chief Officer
Cork Kerry Community Healthcare

Notice of Motion 5(f) on Agenda refers:

“Can the HSE please outline whether there are any plans to develop the old Health Centre building which forms part of the Macroom Community Hospital grounds and had previously been ear-marked as a potential Day Care Centre for the elderly.”

Cllr Eileen Lynch

Community Hospitals such as Macroom are an essential part of our national health infrastructure, but many public units are housed in buildings that are less than ideal in the modern context. Macroom Community Hospital is currently undergoing significant extension and refurbishment works in order to comply with HIQA regulations and facilitate a move away from the ‘open ward’ model to more private rooms. These essential works will ultimately result in an enhanced facility for the local community.

The old Health Centre building is located on the grounds of Macroom Community Hospital. There are plans to revamp the centre to include provision of an older

persons day centre and in this regard, a Design Team has been appointed and agreement on the design proposal for the Day Care Centre has been completed. The procurement request for this development has been finalised and is awaiting sign-off after which it will proceed to tender. As an interim arrangement, the ambulance service is currently operating from this building while building works on the main hospital are being completed.

Jackie Daly
Acting Chief Officer
Cork Kerry Community Healthcare

Motion 5(g) on Agenda refers:

“I wish to propose that the HSE put a formalised overflow system in place to deal with urgent Mental Health cases to ensure no one is turned away without a place to go for help or support. When the mental health services in the hospital in Tralee reaches bed capacity another service needs to be put in place to support /admit people who present with high levels of need, and given the geographic distance from Tralee and the consequent additional risks attached for a person in such a state of distress, we request that this support be put in place in South Kerry itself.”

Cllr Norma Moriarty

Not every person who presents in distress to an Emergency Department is admitted as admission is not recommended in a range of conditions. As outlined in Vision for Change and all papers since, outpatient treatment is the best and most desirable treatment for service users with a mental health difficulty.

A Specialist Mental Health Assessment Unit (SMHAU) was created as a single point of rapid access to acute mental health triage for adults in crisis living in the community across Kerry. Working out of a small mental health centre in Tralee town centre, with its own parking and entrance, the unit sees people in crisis who, before this initiative would have attended a hospital emergency department to receive acute mental health support. The unit was established in April, 2020. It was a direct response to the emergency of the pandemic and has provided a streamlined and equitable service for patients to receive compassionate, quality and safe care during times of crisis. The SMHAU multidisciplinary team is made up of a consultant psychiatrist, a senior occupational therapist, a senior social worker, a clinical nurse specialist, a clinical nurse manager 2, 0.5 WTE senior psychologist and a clerical officer.

The service is available Monday to Friday, 9am - 5pm. The team at SMHAU place the immediate needs of the person at the centre of everything that they do. Our staff collaborate with GPs, psychiatry liaison and emergency department staff at University Hospital Kerry, the Sliabh Mis acute mental health care inpatient unit at

UHK, the mental health community teams in Kerry and the voluntary and community sector.

Since the introduction of the SMHAU, Sliabh Mis Unit has seen no shortage of beds. Additionally, a new inpatient consultant system has been introduced which provides one inpatient consultant providing care for the patients during their stay. The inpatient team is in ongoing contact with community services.

Children with urgent mental health needs who require admission are admitted to the Child and Adolescent Inpatient unit in Cork known as Eist Linn. Children do present to the Emergency Department in University Hospital Kerry with urgent mental health needs where they receive a psychiatric assessment.

We are always hoping to provide more and better care and will strive to provide care to local areas as much as possible.

Jackie Daly
Acting Chief Officer
Cork Kerry Community Healthcare

QUESTIONS

Question 6(a) on Agenda refers:

"That an update be provided of the structures of the HSE's Communications Services in this area to the Forum."

Cllr John Coonan

Communications in the HSE

The HSE Communications Division works with health service teams all over the country to create communications programmes that support a healthier Ireland and build health services that are valued by everyone.

Across the HSE, this work includes co-operation on Communications strategy and planning, Social marketing and behaviour change campaigns, Press and media relations, Media analysis and training, Public information programmes, Public relations advisory, HSE brand development, market research and insight development, Website development for HSE.ie, HSEnet and a range of other websites, Social media strategy and management, Video and audio content development, the HSE Information Line (tel. 1800 700 700) and "HSE Live", Internal and staff communications, Publications, reports and health literacy, Crisis communications and emergency planning, Training and development in communications, Professional management of contracts for advertising, media buying and digital development and Irish language services.

The News and Media teams of the HSE (including at Communications Support level for nine Community Health Organisations and six Hospital Groups) deal with news events happening daily in the health service, provides frontline media relations for the health service and responds to queries (from media). These teams offer proactive and reactive media advice to management and staff in the HSE from events and launches to crisis management.

HSE Communications structures in the South East

At local and regional level, Communications needs for various HSE services are delivered on the following basis:

- For the South/South West Hospital Group (includes **University Hospital Waterford, Tipperary University Hospital** and **Kilcreene Hospital**) public relations and communications are facilitated by contract.
- For the Ireland East Hospital Group (includes **Wexford General Hospital** and **St. Luke's General Hospital Carlow/Kilkenny**) are managed by its Communications Dept.
- For **South East Community Healthcare** services (i.e. delivery of Primary/Community Care Mental Health, Older Persons and Disability services and Health and Wellbeing services in counties Carlow, Kilkenny, South Tipperary, Waterford and Wexford are managed by its Communications Dept.
- For the HSE's **Public Health Dept./South East** are managed by its Communications Dept.
- For **National Ambulance Service** and in relation to **Major Emergency Management** are managed by the National Press Office of the HSE.

Functions of the HSE Communications Departments in the South East

Taking South East Community Healthcare (CHO 5) as an example, the main five areas of function are:

1. **Press and Media:** Strategic planning and management of communications, PR advice, Public information and awareness messaging, Issues management, Support and Media Training, Media Relations and proactive engagement and Media analysis.
2. **Programmes and Campaigns:** Research and insights, Marketing and behaviour change campaigns, Patient, public and staff engagement and the localising of national HSE campaigns
3. **Digital Communications:** Social Media management and Content Design; Digital Development and User Experience, Digital Marketing and Editorial and Quality Assurance.
4. **Strategic Services:** Strategic communications advice, Project management and co-ordination, Creation of communications plans in partnership with the service team an assisting with business cases and issues management consultancy.
5. **Internal Communications:** Creating and implementing the internal communications strategy for the HSE, Managing the staff website, broadcasts (to All User) e-mails, newsletters and Developing internal communications channels.

In addition to co-operation with the HSE's National Communications Division, other functions include participation in senior management, crisis management and serious incident management teams, implementation of strategies (e.g. Sláintecare, Children First, Flu vaccination, Progress in Disability Services etc.), project work (e.g. winter planning and inter-agency emergency management), event management, brand management and support to administration of matters regarding and areas of interaction with public representatives.

Kate Killeen White
Chief Officer
South East Community Healthcare

Question 6(b) on Agenda refers:

"What is the current status in the South East of providing Home Care for those who have been approved for it."

Cllr Pat Dunphy

The Home Support Service is funded by Government to deliver a volume of service each year as approved in the HSE National Service Plan. It is a non-statutory service

and access to the current service is based on assessment of the person's needs by the HSE and having regard to the available resources and the competing demands for the services from those people with assessed needs. Home Support services in the SE Area are provided in line with HSE national guidelines. Services are provided in the first instance directly by the HSE or by private providers that have service arrangement with the HSE.

Despite the significant level of service provision, the demand for Home Support continues to grow as the population aged over 65 years' increases. Those people who are on the waiting list have been assessed and are reviewed, as funding becomes available, to ensure that individual cases continue to be dealt with on a priority basis within the available resources, having regard to the client's assessed needs and current Public Health advice. Individuals are removed from the waiting list in chronological order with priority given to those being discharged from acute hospitals, who are in a position to return home with supports.

Table 1: Home Support Services, South East Community Healthcare Dec. 2021

Home Support Service Location	Hours delivered Dec. 2021	No. of people on the last day of December in receipt of services
Wexford	28,691.35	1777
Waterford	32,460	1480
South Tipp	19,208.6	1384
Carlow / Kilkenny	33,609.43	1581
TOTAL	113,969.21	6,222

Also, as of this date, there were 1,005 people waiting for staff for a new service and 607 waiting for staff for additional home support.

Support Staffing Challenges

The Home Support Service operates within the constraints of available staffing resources which impacts directly on the ability for a service to be delivered either partially or in its entirety. There are significant challenges (HSE and Private Providers) in sourcing home support staff at present.

Recruitment Campaign - Health Care Support Assistants (HCSA) Update

The HSE operated a number of recruitment campaigns in 2021 and plan to have a rolling recruitment campaign going forward in 2022.

Table 2: Proposed timelines for SECH Recruitment campaign:

Advertise December, Remove 31 st January	Shortlist early February, Interview February
Advertise 1 st March, Remove 31 st March	Shortlist early April, Interview April
Advertise 1 st May, Remove 31 st May	Shortlist early June, Interview June
Advertise 1 st July, Remove 31 st July	Shortlist early August, Interview August
Advertise 1 st September, Remove 30 th	Shortlist early October, Interview

September	October
Advertise 1 st November, Remove 30 th November	Shortlist early December, Interview December

At a national level it is understood that the Department is currently engaged in a detailed process to develop a new stand-alone, statutory scheme for the financing and regulation of home support services. Developing a new statutory scheme will be an important step in ensuring that the system operates in a consistent and fair manner for all those who need home support services.

Kate Killeen White
Chief Officer
South East Community Healthcare

Question 6(c) on Agenda refers:

“That this Forum like others throughout the Country would back the proposed NAS/Fire Service Co-Responder Scheme roll out across the County to assist the ambulance service to respond to 999 emergency calls as quickly as possible.”

Cllr Mary Lenihan Foley

The National Ambulance Service would welcome and support engagement from any group including our colleagues in the Fire Service, who may be able to participate in our Cardiac First Responder schemes. Contact Details for National Ambulance Service Community Engagement Team are available from the office of the Chief Ambulance Officer, the National Ambulance Services website or through the Regional Health Forum Office South.

Nicky Glynn
Chief Ambulance Officer
National Ambulance Service

Question 6(d) on Agenda refers:

“The Tullow primary care centre was to have started in 2020. Nothing has happened regarding this build. Where are we on the plans for Tullow Primary Centre. Is it on the agenda of the HSE for construction. Has there been contact with Carlow County Council regarding pre planning for the building.”

Cllr John McDonald

Primary Care Centres are modern, purpose designed buildings providing a single point of access to health services in the community.

Tullow Co. Carlow has been identified as one of the areas for the development of a new Primary Care Centre (PCC) which will also serve the local communities in Hacketstown and Rathvilly.

It is planned that the new Primary Care Centre will provide a broad range of services including General Practitioner services, Public Health Nursing, Physiotherapy, Dental, Speech and Language Therapy, Occupational Therapy, and Dietetics. There will also be capacity for visiting clinicians to hold sessional services i.e. Psychology, Chiropody, Counselling, Area Medical Officer, Chronic Disease, etc.

In relation to this planned Primary Care Centre, following an expression of interest, the HSE Estates Division has identified a number of interested developers. A meeting to review and assess the submissions was held in September 2021. The developers indicated their ability to provide the accommodation required by HSE and adequate car parking facilities. A preferred developer has been identified. The preferred location is within the town boundaries of Tullow. Estates Personnel are working on progress for the appointment of the preferred developer. It is my understanding that a letter of Intent will issue as a matter of priority. Thereafter it will be up to selected Developer/provider to finalise site purchase, building design, planning permission and satisfy a number of legal /contractual requirements, before Agreement For Lease/Contract is issued by HSE. On completion of the building construction, HSE will enter a 25 year Lease with the Developer.

It is expected that the developer could be ready to begin construction by Quarter 4 2022 with building complete by end 2023 / early 2024.

Liaison with the Planning Authority is a matter for the Developer.

Kate Killeen White
Chief Officer
South East Community Healthcare

Question 6(e) on Agenda refers:

“To ask the total quantum of additional ICU capacity added to the South/South West Hospital Group/Ireland East Hospital Group from March 2020 to present”

Cllr Conor McGuinness

The expansion of Critical Care capacity, in line with the Critical care Programme Model of Care is a priority objective for the South/South West Hospital Group. A total of 11 additional ICU Beds have been opened across SSWHG since March 2020 with plans to increase this number incrementally over 2022 and onwards.

This objective is aligned to national strategies in areas such as Trauma, Emergency Medicine Programme and others.

Tess O’Donovan
A/Chief Operations Officer
South West Hospital Group

Critical Care funding secured in 2021, (*via the National Service Plan, ‘Living with Covid’ and ‘Infection Prevention and Control Improvements’ national funding proposals*) is being used for capital infrastructural changes and renovations, equipment and staffing. St Vincent’s has a ten bedded Critical Care Unit at planning stage. In Wexford, pod development works began in mid-November 2021, delivering five cubicles. The HSE Estates planned programme of work, for this year includes Mullingar’s critical care unit and the MMUH Emergency Wing Build.

The IEHG funded critical beds capacity from March 2020 to the present is 71 beds. In addition, surge bed capacity is eleven which gives a total number of 82 critical care beds.

Ken Fitzgibbon
A/Chief Operations Officer
Ireland East Hospital Group

Question 6(f) on Agenda refers:

“Can the SSWHG confirm which of the following elective work is restored fully in UHK - ENT, Gynaecology, Orthopaedics and Surgery and what are the plans to expand theatre space in the immediate future / short term in order to ensure all consultants are appropriately resourced to alleviate waiting lists and avoid undue usage of NTPF.”

Cllr Mikey Sheehy

University Hospital Kerry (UHK) can confirm that all elective surgery (day case and in-patient) has recommenced as of 21st January 2022. The hospital also wishes to confirm that plans are at an advanced stage regarding the construction of an additional new 'clean-air' theatre dedicated to Orthopaedic work. Tenders for this multi-million-euro development will be called for in March 2022, and it is anticipated that work will commence on this project in Q4 2022. In the interim UHK continues to utilize theatre space in the Bon Secours Hospital Tralee by way of national agreements.

UHK carefully manages the use of private hospital capacity and the National Treatment Purchase Fund (NTPF) pathway to ensure that waiting lists are managed as efficiently as possible to ensure timely access to services for our patients. Accordingly, the hospital will continue to address waiting lists through the utilization of both in-sourcing and out-sourcing initiatives.

Fearghal Grimes
General Manager
University Hospital Kerry

Question 6(g) on Agenda refers:

"In relation to the recent restructure of community based drug and alcohol services in Cork and Kerry, can the HSE please outline the number of staff allocated to the new "Hub and Spoke" model in comparison with the previous community model, including their locations, and the extent of services to be provided to communities outside of the six core hubs."

Cllr Eileen Lynch

In 2017/18, the Southern Regional Drug & Alcohol Task Force (SRDATF) and the Cork Local Drug & Alcohol Task Force (CLDATF) commissioned a review of current service delivery of community-based drug and alcohol services against the background of policy developments described in the National Drug & Alcohol Strategy 2017-25, *Reducing Harm, Supporting Recovery*, developments within social inclusion and health service delivery and the changing socio-demographic of the region.

A key recommendation of the review was to align all community drug and alcohol services in a decentralised hub structure with one single employer. Following an Expression of Interest and interview process, Coolmine was appointed as the service provider. A partnership comprising Coolmine, HSE Addiction Services, SRDATF and CLDATF was set up to collaboratively set up, manage, support, provide, and monitor quality drug and alcohol services across the region to meet presenting needs. The 'Hubs' will be located in Tralee (Kerry), Mallow (North Cork), Midleton (East Cork), Cork City North, Cork City South and Ahiohill (West Cork). While these are the central locations, satellite locations will provide for outreach and 'closer-to-home' services.

Hubs are community-based services where Service Users can avail of seamless, high-quality, multi-agency, multidisciplinary professional addiction treatment services. All professional experience and expertise is collectively recognised, valued, and respected. The Hubs are a welcoming, safe place for all Service Users.

The team on the Northside includes a Team Leader, 6 Project Workers, Addiction Counsellor and Admin and the team for the Southside includes a Team Leader, 5 Project Workers, Addiction Counsellor and Admin. The teams in West Cork, North Cork, East Cork and Kerry include a Team Leader, 3 Project Workers, 2 Addiction Counsellors and Admin in each of these areas.

This has been a significant investment in Community Based Drug and Alcohol Services in Cork City, County Cork and Kerry.

The comparison for the Drug and Alcohol Task Force Community Based Projects for Cork and Kerry is as follows

- Cork City - 17 full time staff compared with 9 full time staff covering Cork City previously.
- County Cork – 21 full time staff compared with 11 full time staff covering the County previously.
- Kerry – 7 full time staff compared with 3 full time staff covering the County previously.

Appendix 1 (below) sets out the timetable of where services are currently delivered (February 2022) but we expect this to expand in the coming months.

Jackie Daly
Acting Chief Officer
Cork Kerry Community Healthcare

Question 6(h) on Agenda refers:

“Will the HSE support in all ways possible a call for increased Social Inclusion and Community Activation Programme (SICAP) funding to Kerry to assist with the provision of therapeutic care to our young people and families impacted with Mental Health concerns.”

Cllr Norma Moriarty

SICAP Funding is administered by the Local Community Development Committees (LCDC) which come within the remit of the Local Authorities rather than the HSE.

Our understanding is that the SICAP funding is subject to an annual workplan which is determined and agreed by the LCDC and the local Programme Implementer. The HSE is a member of the LCDC in the Kerry County Council area. The HSE would be happy to participate in any discussions in relation to requesting additional SICAP funding for Kerry.

Jackie Daly
Acting Chief Officer
Cork Kerry Community Healthcare

MOTION AND QUESTION RESPONSES

FORUM MEETING
19th of May 2022

MOTIONS

Motion 5(a) on Agenda refers:

“That the HSE outlines the progress, if any, on the proposed new residential unit at Saint Patrick’s Hospital, Cashel and the planning of this development.”

Cllr Declan Burgess

Cashel Residential Services and its associated facility at St. Anthony’s Unit in Clonmel is a South East Community Healthcare residential centre for older people and provides long stay, respite, palliative and rehabilitation services for the South Tipperary area.

At the Regional Health Forum of the 18th November 2021, the South East Community Healthcare Area (SECH) advised of the requirements, following the unannounced HIQA visit in December 2018, to develop a new Community Nursing Unit to replace the then St. Patrick’s Hospital in order to meet HIQA environmental standards. A Design Team was contracted to commence the development of a new build and the process had reached planning application stage by March 2020.

In the context of the ongoing Covid-19 pandemic and also having regard for infection prevention and control guidance, health services in acute and community settings were required to assess accommodation and physical environments across services to determine what actions were required, if any, to enable the safe provision of services.

To ensure the safety of the older people of South Tipperary living in St Patrick’s Hospital, in consultation with the independent regulatory body the Health Information and Quality Authority (HIQA), to maximise infection control measures, arrangements were made for residents and staff of St. Patrick’s Hospital to transfer to accommodation and ancillary facilities established at the nearby former Our Lady’s Hospital building in Cashel.

There was a subsequent and successful transition of residents from St. Patrick’s Hospital to the main build at Our Lady’s Campus, now referred to as ‘Cashel Residential Older Persons Services’. This transition could only have occurred in close consultation with HIQA, with adherence, in as much as possible to their environmental standards. A final inspection of the building was completed by HIQA in the first week of June 2020 which enabled Cashel Residential Older Persons Services to be registered with HIQA as a long-stay facility. All residents subsequently transferred from St. Patrick’s to Cashel Residential Older Persons services on Monday 8th June 2020.

The (21 bed) Rehabilitation Unit on site at Cashel Residential Services and, the Day Hospital and St. Claire’s Ward located on the grounds of Our Lady’s Hospital were not affected by the transfer. In turn, available space at the former St. Patrick’s Hospital would be utilised for some services that were based in the main Our Lady’s building in Cashel.

Older Persons Services now deliver a total of 99 HSE public long-stay beds (including rehabilitation beds) across the South Tipperary Area of Cashel / Clonmel area.

Furthermore, SECH are satisfied that the social and care requirements of residents in Cashel are being addressed within Cashel Residential Older Persons Services.

Whilst the development of the new build of St. Patrick's Hospital remains on the capital plan, new builds must now be reviewed in the context of HIQA's current and future regulatory requirements as of 1st January 2022 and any future HIQA regulations which may arise.

As part of above-mentioned health service response in relation to physical environments in which services operate vis a vis Covid-19 and infection prevention and control guidance, there was a need to consider alternative provision for Disability Services. With the transition of residents from St Patricks Hospital to Cashel Residential Older Persons Services there have been significant developments at St Patrick's Campus for Children's Disability Services and some Primary Care Services. These works were successfully completed and the refurbished area occupied since July 2021. It is understood that additional areas have been identified in St. Patricks, for further refurbishment.

Ms Kate Killeen White
Chief Officer
South East Community Healthcare

Motion 5(b) on Agenda refers:

"That this Forum supports the Bandon Family Resource Centre (BFRC) in their request for being accommodated in the recently vacated Watergate centre (mental health resource centre) as their current accommodation is not fit for purpose and no suitable premises has been identified after a 12-month search."

Cllr Sean O'Donovan

While the mental health staff who had been using the Watergate Centre have now fully transitioned to the new Primary Care Centre in Bandon, Mental Health Services management have confirmed that they will have an on-going requirement for the use of the Watergate Centre for the foreseeable future. There a number of developments in specialist areas within mental health which are set to take place over the coming months and there is a significant shortfall of team based mental health accommodation in the greater Cork city area and its environs, including Bandon.

The Bandon Primary Care Centre is a hugely welcome development which has provided must needed coterminous accommodation for Primary Care and other HSE services and staff and there are also developments coming down the tracks that will fill that premises.

I have very recently written to the Board of Management of the Bandon Family Resource Centre to inform them that unfortunately Cork Kerry Community Healthcare will not be in a position to provide them with the accommodation they seek in the Watergate Centre. We regret that we could not accommodate their request as we fully recognise the importance of the services which they provide and the alliance of service provision between the HSE, Túsla and Bandon Family Resource Centre at local level.

I have undertaken to keep the accommodation situation in Bandon under review and should the situation change from that as outlined above I will certainly revert to Board of Management of Bandon FRC.

Michael Fitzgerald
Chief Officer
Cork Kerry Community Healthcare

Motion 5(c) on Agenda refers:

“That the HSE provide respite beds for the catchment area of North Kerry.”

Cllr Michael Foley

DISABILITY SERVICES

Children’s Respite Services

In Kerry, overnight respite services for children under 18 years of age with an intellectual disability are delivered by St. John of God Services (SJOG) at two children’s respite houses - namely, The Arches in Killorglin and Abhaile Respite in Listowel. Once deemed appropriate, it is provided until they reach 18 years. When the young adult turns 18 years, they then access HSE Adult Disability Services and can make an application for overnight respite and/or outreach supports to the Adult Respite Forum.

Abhaile Respite Services have four respite beds and has capacity for 25 children and 5 adults (there is a historic arrangement whereby 5 Adults have availed of overnight respite every second weekend for many years). This residential respite service operates 7 days a week Monday to Sunday. Monthly Key Performance Indicators are set at 83.3 bed nights per month to be delivered by SJOG. There are planned closures throughout the year and the maximum number of residents, male and female, availing of the service is 4.

COVID had a significant impact as capacity reduced to 2 beds with periods of closure due to redeployment of staff to St Mary’s of the Angels (SMA) Campus and Tralee Community Residential and being an isolation house. However, I am pleased to advise the members that Abhaile is back to full resumption of the four respite beds since March 2022.

The Arches Respite Services have four respite beds and has capacity for 30 children. This residential respite service operates 7 days a week Monday to Sunday. Monthly Key Performance Indicators are set at 95.8 bed nights per month to be delivered by SJOG. There are planned closures throughout the year.

Arches, South Kerry is also back to full resumption of 4 beds.

Adult Respite Services

Respite services in Kerry for adults (18 years +) with an intellectual disability are provided in two ways, i.e. overnight respite and/or outreach supports. An application form is completed and processed via the HSE Kerry Adult Respite Forum. This forum was established in Kerry in 2020 and manages the delivery of both residential respite and outreach services to adults with a disability that meet the criteria of the Standard Operating Procedure of Cork Kerry Disability Services. This allows Kerry Disability Services to provide a coordinated approach to service delivery in collaboration with service providers in Kerry. Membership of the forum includes HSE Disability Services and representatives from relevant disability agencies. Overnight respite services for adults with an intellectual disability are provided at Cois na Feile Respite House in Kilmorna, Listowel. This service is managed by Kerry Parents & Friends. Monthly Key Performance Indicators are set at 103 bed nights per month to be delivered by KPFA.

Kerry Parents & Friends Association have four adult respite beds in Cois Na Feile, Listowel which is a Regional Respite House for Adults with an ID in Kerry. Kerry Parents & Friends also have adult respite beds in a number of locations within their services i.e. at Brooke Lodge, Listowel, Tearmann Lodge, Rathmore and in Glebe Lodge in Castleisland.

Covid had a huge impact on the provision of respite over the last 2 years at Cois na Feile, Listowel and continues to have some impact. Respite services were not in place for 2020 and some of 2021. Cois Na Feile is also the isolation unit and this has been used up to now and when it is used, respite is impacted.

The last number of years has seen an investment in respites services within Cork Kerry Community Services which was very welcome and provided beneficial supports for families within CKCH. An additional 5,000 outreach support hours was allocated in 2020 to families that benefit from the support in Kerry. The Outreach Model initially allocated 50 individuals with 3 x 8 week blocks of 4 hrs per week each year. Further funding was provided to increase the number to 75 individuals in 2021. The hours are either delivered by the lead agency attached to the person or alternatively an appropriate provider sourced by CKCH. Outreach respite for adults with an ID is provided by various agencies funded by the HSE and each client receives approximately 96 hours per year. This is delivered in blocks of 4 hours per week x 8 weeks, three times per year to provide social support to the individual to access the community.

OLDER PERSONS SERVICES

Older Persons services is committed to providing all available supports, including respite services, to Older People in the region. Community Nursing Units/Hospitals are an essential part of our national infrastructure of nursing homes, providing long stay residential care beds and short-stay public beds, including respite beds. Community Nursing Units/Hospitals assess referrals on an individual basis in relation to the provision of respite services.

With regard to the catchment area of North Kerry, there is a dedicated allocation of respite beds in Listowel Community Hospital and emergency respite is also available. Respite care is generally a planned short admission (usually of one or two weeks duration). Access to same is dependent on bed availability and can be arranged by an individual's primary care team/public health nursing service.

Michael Fitzgerald
Chief Officer
Cork Kerry Community Healthcare

Motion 5(d) on Agenda refers:

"That this Forum supports my call to support those persons and their families who are struggling with eating disorders in every way possible including the expansion of services to allow for clearer pathways to enter the HSE service and to access services once under the care of the HSE on an ongoing basis."

Cllr Mikey Sheehy

Eating Disorders are a group of clinical mental health conditions that involve very serious disturbance in eating behaviours and in how people control their weight as a result of core negative thoughts and feelings around eating and body image. Anyone can develop an eating disorder. They occur in all ages, genders and ethnic groups. For many people an eating disorder starts in their childhood or adolescence.

If an individual is concerned about themselves or someone known to them, they should be directed to their GP in the first instance for primary care screening assessment and examination. Their GP may then make recommendations which may include, if clinically indicated, referral to the secondary care mental health services for full eating disorder assessment.

CORK KERRY COMMUNITY HEALTHCARE

Child and Adolescent Services

CAREDS is the Child and Adolescent Regional Eating Disorder Service for Cork and Kerry. They provide specialist eating disorder care for young people under the age of 18 years who have an eating disorder. They are part of the HSE National Clinical programme for Eating Disorders (NCPED) and CAMHS in Cork and Kerry and work closely with mental health, medical teams, liaison psychiatry and general practitioners to provide specialist eating disorder care across the region. This service accepts referrals from CAMHS, medical consultants and General Practitioners.

CAREDS is based in Fastnet House, Model Farm Road, Cork. The service is led by Dr. Sara McDevitt, Consultant Psychiatrist, and it offers both a day programme and outpatient services.

I outline below a breakdown of the team by staffing category;

Staffing category	Number
Nursing	3.0
Administration	2.0
Senior Social Worker	1.5
Senior Psychologist	1.0
Speech & Language Therapist	0.5
Senior Registrar	1.0
Registrar	0.5
Clinical Co-ordinator	0.5
Paediatrician	0.3
Senior Dietician	1.0
Hospital Dietician	1.0
Total	12.3

Children and adolescents with an eating disorder diagnosis who require inpatient treatment can be referred to one of the CAMHS inpatient approved centres. Referrals are reviewed individually to determine the likely clinical benefits of admission as well as possible other treatment alternatives. There are 4 CAMHS In-patient Units across the HSE: Eist Linn in Cork, Linn Dara in Dublin, St Josephs in Dublin, and Merlin Park in Galway.

The HSE also funds patients in private facilities. Decisions are made based on individual clinical need (as assessed by the local mental health team) and the prioritisation of available funding.

Adult Services

In addition to the above, funding was made available in 2021 to progress the recruitment of an Adult Eating Disorder team in Cork and Kerry. When in place, the full staffing of the team will comprise of:

Staffing Category	Number
Consultant General Adult Psychiatrist	1.2
Senior Registrar	1.0
Registrar	0.5
Clinical Nurse Specialist (Mental Health)	3.0
Senior Social Worker	1.0
Psychologist, Senior Clinical	2.0
Occupational Therapist, Senior	1.0
Occupational Therapist, Senior	0.1
Occupational Therapist, Senior	0.5
Senior Dietician	1.0
Clinical Specialist Dietician	0.1
Admin	2.0
Total	13.4

The recruitment process for these posts is progressing and a number of campaigns are underway at this point to recruit the staffing required for this specialist team. It had been hoped that the Adult Eating Disorder Team in Cork and Kerry would commence in the second quarter of this year. However, the availability of suitably qualified specialist staff, and in particular medical staff, is a significant issue for mental health services where demand outstrips supply in both the national and international contexts. As this will be a new team, there will be a short period of time required for this team to prepare Standardised Operational Procedures etc. and for the new team to operate safely.

In the meantime, Adults with eating disorders can still access treatment from local community mental health teams.

Adults who have an eating disorder diagnosis and require inpatient care can be referred to any of the HSE's acute inpatient mental health-approved centres around the country. Adults presenting with an eating disorder can also be treated in an acute hospital if their physical health needs require this.

SOUTH EAST COMMUNITY HEALTHCARE

In January 2018, the HSE published a National Model of Care for Eating Disorders in partnership with College of Psychiatrists' of Ireland and Bodywhys. In the absence of a pre-existing dedicated eating disorder infrastructure or strategy, this Model of Care document has been developed in order to guide the provision of high quality, accessible eating disorder services in Ireland. Key recommendations include the development of a national network of dedicated eating disorder teams embedded within the mental health service, a stepped model of outpatient, day patient and inpatient care provision based on clinical need, and the development of a skilled, trained workforce. In the context of the significant physical morbidity associated with eating disorders, this Model of Care also recommends a strong integration between primary care, mental health services and medical teams, including the bridging of the acute hospital and mental health service divide through mutual clinical commitments and shared pathways.

Most people can and do get better from eating disorders. While a small number of people benefit from more intensive treatment through day programmes or inpatient care, the most effective treatment setting is in the community. Dedicated community based eating disorder services, where multidisciplinary teams have specialist training can provide evidence based care and treatment.

The Model of Care has a core focus on developing regional community based specialist eating disorder services provided by skilled multidisciplinary teams. These multidisciplinary teams provide specialist eating disorder assessment and treatment in the community and are the foundations of delivering quality eating disorder care across the stepped model of care.

Funding is available in 2022 to progress the recruitment of clinicians to Eating Disorder teams. An implementation plan has been approved to allow for phased recruitment and training however, the availability of skilled staff is a significant issue in mental health services where demand outstrips supply in both national and international contexts.

Adult Services

South East Community Healthcare Mental Health Services are currently recruiting for an Adult Eating Disorder Programme as part of the 2022 Programme for Government Funding.

This Adult Eating Disorder Team will be a full multidisciplinary team and when in place, the full staffing of the team will comprise of the following:

Staffing Category	WTE
Consultant	1.2
Occupational Therapist Senior	1.5
Clinical Nurse Specialist	2
Senior Registrar	1
Grade IV Admin	1
Psychologist, Senior Clinical	1
Dietitian Senior	1
Social Worker Senior	1
Total	9.7

In the meantime, adults with eating disorders can still access services/treatment from local community mental health teams.

Whilst SECH Mental Health Services do not provide inpatient care specific to eating disorders, however they endeavour to facilitate admission to external inpatient specialist eating disorder providers where clinically appropriate and as prescribed by a Consultant Psychiatrist. Adults who have an eating disorder diagnosis and require inpatient care can be referred to any of the HSE's acute inpatient mental health-approved centres around the country. Adults presenting with an eating disorder can also be treated in an acute hospital if their physical health needs require this.

Children and Adolescents

Children and adolescents with eating disorders can access services through South East CAMHS community teams. Every effort is made to prioritise referrals for people with eating disorders.

SECH Mental Health Services are currently recruiting for 3 WTE Dietitians (Carlow/Kilkenny/South Tipperary General Adult, Carlow/Kilkenny/South Tipperary CAMHS and Waterford Wexford CAMHS).

Children and adolescents with an eating disorder diagnosis who require inpatient treatment can be referred to one of the HSE CAMHS inpatient approved centres (Eist Linn in Cork, Linn Dara in Dublin, St Josephs in Dublin, and Merlin Park in Galway). Referrals are reviewed individually to determine the likely clinical benefits of admission as well as possible other treatment alternatives. The HSE also funds patients in private facilities. Decisions are made based on individual clinical need (as assessed by the local mental health team) and the prioritisation of available funding.

ADDITIONAL SUPPORTS

In March 2020 the HSE launched the first Self Care App which provides valuable information for those with or people caring for someone with an eating disorder. The app provides accurate information and advice for anyone worried about developing an eating disorder or for those who have been diagnosed or are recovering from an eating disorder. It also contains helpful information for family and friends including;

- Advice about what to say and do
- Guidance to get help at the right time and place
- Help on the road to recovery

The app is available for download at [https:// ncped.selfcareapp.mobi](https://ncped.selfcareapp.mobi)

The HSE provides funding annually to Bodywhys to run the helpline which is delivered by a team of trained volunteers. They also provide a range of services (support groups, online groups, email and family programmes) for adults and young people with eating disorders, and their families.

Helpline 01-2107906 Monday, Wednesday and Sunday from 7.30pm to 9.30pm and Saturday from 10.30am to 12.30pm. Contact alex@bodywhys.ie for support anytime. Visit www.bodywhys.ie

The HSE also supports Bodywhys to run the [PiLaR](#) (Peer Led Resilience) Programme, a 4-week online modular based programme for parents, friends and carers of a person with an eating disorder to build resilience and gain support in their role as a supporter/friend. Contact pilar@bodywhys.ie for information on PiLaR

Anyone who is concerned about an eating disorder should discuss it with their GP in the first instance. They can offer medical assessment, support and information on treatment options including referral to community mental health team.

Michael Fitzgerald
Chief Officer
Cork Kerry Community Healthcare

Kate Killeen White
Chief Officer
South East Community Healthcare

Motion 5(e) on Agenda refers:

"To ask the HSE how many GP positions are currently vacant in Co. Wexford and for how long they have been vacant."

Cllr Cathal Byrne

And

Question 6(d) on Agenda refers:

"To ask the HSE what percentage of GP positions in Co. Wexford are filled by people not on the specialist GP register." Cllr Cathal Byrne

Cllr Cathal Byrne

There are currently two permanent GP vacancies in Co. Wexford namely Taghmon and Carrick on Bannow. The GP in Taghmon resigned in 4th September 2021 and the GP in Carrick on Bannow retired on 3rd March 2022.

There is one applicant for the post in Taghmon and it is hoped to hold interviews prior to the end of May 2022. Unfortunately there has been no applicants for the post in Carrick on Bannow. The post was advertised nationally and an Expression of Interest was circulated to all GP practices in the South East. We will re-advertise again in the coming months.

It is well recognised that there is currently an undersupply of GPs in Ireland. In order to combat the shortage of GP's there is a further increase in numbers of training places this year. In July 2022 it is hoped that there will be 21 GP training places in the South East Scheme which is an increase of 3 places. However it will be a number of years before these additional training places take effect.

In order to hold a permanent GMS contract all GP's must be on the specialist registrar and there are no permanent GP's in Co. Wexford who are not on the specialist registrar. Occasionally, there may be locums working in the area not on the specialist registrar but these do not hold a contract with the HSE.

Ms Kate Killeen White
Chief Officer
South East Community Healthcare

QUESTIONS

Question 6(a) on Agenda refers:

"Can HSE management brief the meeting on the replacement process of a Doctor at the Minor Injuries Unit at Our Lady's Hospital Cashel. Please advise on the situation that left this service fall short with the necessary staffing levels that led to the closure and how long this service will be closed."

Cllr Declan Burgess

The MIU (Minor Injuries Unit) was established in January 2007 and is located on the grounds of Our Lady's Hospital Campus, Cashel and is approximately 15 miles from the nearest Emergency Department in Tipperary University Hospital.

The Locum Doctor in place in the MIU finished on Friday 8th April 2022 which, regrettably, led to a temporary disruption in services. However, the HSE secured locum medical cover commencing on Tuesday 19th April 2022. The HSE remain committed to securing a full-time replacement for the MIU in Cashel.

Approximately 80% of the clients self-refer to the Minor Injuries Unit the remainder being referrals by GP's. The Service is free to those attending and, as such, the MIU does not generate any income for the HSE. Clients who currently use the service of the MIU can either be referred by their GP or attend the Unit directly.

On average 83 clients use this service each week Monday to Friday. The service also provides an INR (International Normalised Ratio) blood scan service for patients once per week. The service is free of charge. There is access to diagnostics adjacent to the unit, with x-ray facilities on site.

Age profile of patients who attend the MIU:

- 28% were under 18 years
- 72% were aged between 18 and 65yrs.

Analysis of the referrals and interventions over a 6 month period, *July 2021 - December 2021* were as follows:

- 82% were walk-in with 18% GP referrals.
- 46% of the injuries treated were sprains & strains.

Numbers attending the Minor Injury Unit 2016-2020

Year	No's attending the MIU
2016	4,166
2017	4,205
2018	4,181
2019	3,946
2020	3,042
2021	3,570

It is the intention of the HSE to develop the role of the Minor Injury Unit, however in the interim, there may be challenges in securing full-time medical cover. If this situation does arise every effort will be made to recruit and reinstate medical cover as a matter of priority.

Ms Kate Killeen White
Chief Officer
South East Community Healthcare

Question 6(b) on Agenda refers:

“What is the process followed by the HSE to hire overseas consultant doctors as consultants in Ireland considering their previous experience and with consideration to licensing requirements from the Irish Medical Council. This being at a time when there is a severe shortage of this highly qualified cohort of medical professionals in Ireland.”

Cllr Mikey Sheehy

Response from HSE, Parliamentary Affairs Department:

Dear Councilor Sheehy

RE: REPDR/22/02782 - What is the process followed by the HSE to hire overseas consultant doctors as consultants in Ireland considering their previous experience and with consideration to licensing requirements from the Irish Medical Council. This being at a time when there is a severe shortage of this highly qualified cohort of medical professionals in Ireland.

Many thanks for your query in regard to the above.

The HSE is investing heavily in improving the overall recruitment capacity for permanent consultants, streamlining the candidate journey and is working to expand significantly our international reach through a robust marketing strategy anchored in a one stop shop microsite which is due to be launched in the coming months. The PAS (Public Appointment Service) is supporting the HSE in delivering on these objectives.

The PAS recruits approved permanent consultant posts on behalf of the HSE for some of the statutory hospitals and community settings. These particular vacancies are advertised on both the HSE (hse.ie) and PAS (publicjobs.ie) websites and further afield in international Medical Journals as requested by the hiring service. Many of the larger hospitals recruit consultants directly through their local HR departments.

In regards to licensing requirements, all Consultants recruited by the HSE require Irish Medical Council registration in the particular specialty they are employed in.



The HSE is confident that the improvements made to the recruitment process together with the additional capacity being built within the PAS, the HSE will have a more responsive recruitment service to meet the needs of the services and an expanded candidate pool from which to fill posts.

If you require any further information please do not hesitate to contact me.

Yours sincerely

Eithne Fox
Assistant National Director of HR

Question 6(c) on Agenda refers:

“What is the up to date position of HSE regarding the provision of public information for early detection, diagnosis and treatment of Lyme Disease?”

Lyme disease (also known as Lyme borreliosis) is an infection caused by a spiral-shaped bacterium called *Borrelia burgdorferi* that is transmitted to humans by bites from ticks infected with the bacteria.

In the Republic of Ireland, only neuroborreliosis, a severe form of Lyme disease which affects the nervous system, is notifiable to Public Health under Infectious Diseases Regulations.

The HSE provides the below information for the public regarding detection, diagnosis and treatment of Lyme disease:

1. The **HSE** has information for the public on Lyme disease available in the Health A-Z section of the HSE website, available at: <https://www2.hse.ie/conditions/lyme-disease/>

This webpage contains information on:

- Symptoms of Lyme disease
- How to remove ticks

- Diagnosing Lyme disease
- Treatment of Lyme disease
- How to prevent tick bites
- Ongoing symptoms

2. The **Health Protection Surveillance Centre (HPSC)** has also produced publicly available factsheets on Lyme disease. These factsheets contain information for the general public regarding the symptoms, diagnosis and treatment of Lyme disease, as well as other useful information. These factsheets are available on the HPSC website here:

<https://www.hpsc.ie/a-z/vectorborne/lymedisease/informationforthepublic/factsheetsforthegeneralpublic/>

**Dr Anne Sheehan,
Director of Public Health,
HSE South**

Question 6(d) on Agenda responded to with Motion 5(e) above.

MOTION AND QUESTION RESPONSES

FORUM MEETING
2nd June 2022

MOTIONS

Motion 4(a) on Agenda refers:

"That all possible be done to work with the National Ambulance Service, KCC and the Kerry Fire Service to site Ambulance Deployment vehicles in Killorglin and Sneem. This would ensure a much better coverage of our geographically challenging territory and result in far better response times."

Cllr Norma Moriarty

The National Ambulance Service is awaiting the results of an updated Spatial Analysis Study, which will inform the optional NAS resource placement, based on geographical terrain and population. This will ensure the best possible response times can be achieved, with due consideration to geographical challenges. Key deployment points such as Killorglin and Sneem, will be considered in this context.

Nicky Glynn
Chief Ambulance Officer

Motion 4(b) on Agenda refers:

"That the HSE would replace the bus/mini van which recently fell into such a state of disrepair that it had to be disposed of, for Teach an Churaim Community Residence in Rathmore, County Kerry"

Cllr John O'Donoghue

Management in Kerry Mental Health Services is currently reviewing its fleet of vehicles and identifying those that require replacement. Vehicles for replacement will be prioritised based on age and roadworthiness and purchased from identified available funding.

The vehicle attached to Teach An Churaim will be prioritised for replacement as it is no longer road worthy. The ordering process has commenced and it is anticipated that replacement could take up to 6 months. This estimate is based on the current market situation and issues around supply and delivery.

In the interim Management is covering the costs of essential transport and the people carrier attached to Teach Mhuire Day Centre in Rathmore is also available to the staff and residents of Teach An Churaim High Support Hostel on a shared basis.

Michael Fitzgerald
Chief Officer
Cork Kerry Community Healthcare

Motion 4(c) on Agenda refers:

“Can this group confirm that all disciplines have now returned to a face to face pre Covid consultations at UHK and if not then which disciplines continue to provide virtual consultations?”

Cllr Mikey Sheehy

The majority of clinics in University Hospital Kerry are now face to face however two medical clinics remain virtual, Endocrinology and General Medicine.

**Fearghal Grimes,
General Manager,
University Hospital Kerry**

Motion 4(d) on Agenda refers:

“Can the HSE please provide an update on post—Covid visiting policy for relatives of patients in Cork hospitals and whether there will be any local or national changes to this in the short term.”

Cllr Eileen Lynch

Cork University Hospital

Visiting is permitted in Cork University Hospital from Monday – Friday.

All visits need to be pre-arranged with the Nurse Manager on each ward, other situations are dealt with on a case by case basis.

Visitors must wear surgical facemasks while in CUH

Additional arrangements available on compassionate grounds

Mallow General Hospital

One visitor per patient daily

Visitors log and questionnaire to be completed

Visitors must wear surgical facemasks while in MGH

Additional arrangements available on compassionate grounds

Bantry General Hospital

Visiting where permissible is Monday to Friday from 3-4pm

We have open visiting for end of life care patients or on compassionate grounds

Visitors must wear surgical facemasks while in CUH

Additional arrangements available on compassionate grounds

South Infirmary Victoria University Hospital

Visitors have the opportunity to book a visit via a micro site hosted by Yellow Schedule on the SIVUH internet page across the 7 days of the week. There is an opportunity to schedule a one hour visit twice daily within a restricted capacity determined locally by case numbers. In addition to elective planned visits priority visiting is determined by individual patient needs throughout their episode of care. Visitors must wear surgical facemasks while in SIVUH. Additional arrangements available on compassionate grounds.

Mercy University Hospital

MUH has an Inpatient Visitor policy which has been revised in line with national infection protocols for the peri and post Covid environment.

- Visiting in MUH on inpatient wards facilitated between 6 and 8 pm
- Only one visitor per bedspace in multi occupancy rooms
- Visitors must wear surgical facemasks while in MUH
- Security staff will walk through all ward areas during visiting hours and particularly at end of visiting to ensure all visitors have left the ward
- Outside of these visiting hours all requests are made through CNM2 or designate with a focus on meeting patient specific needs.
- Night time visiting is agreed through the Night ADON
- ICU/Paediatrics and those patients at end of life will continue to have a compassionate flexible approach applied regarding visiting

Cork University Maternity Hospital

Inpatient visiting –

- unrestricted visiting for partner/nominated support person from 7am to 11pm every day
- Neonatal unit – parents can both attend separately, unrestricted visiting times
- High dependency unit – unrestricted visiting
- Any other situation where there is reason to anticipate that the visit is likely to be associated with particular stress or to involve communication of particular emotional significance
- Visitors must wear surgical facemasks while in CUMH
- Additional arrangements available on compassionate grounds

Mr Gerry O’Dwyer
Chief Executive Officer
South/South West Hospital Group

Motion 4(e) on Agenda refers:

“That the full medical treatment, supports required and costs involved to those suffering from Sleep Apnea be covered by Medical Care holders.”

Cllr Arthur McDonald

This motion was referred to the South East Committee for discussion.

QUESTIONS

Question 5(a) on Agenda refers:

“Can we please have an update on the primary care centre for Cahersiveen and some details on the range of services that will operate from that centre”

Cllr Norma Moriarty

The HSE remains committed to establishing a Primary Care Centre (PCC) for the Cahersiveen area providing quality services from a purpose built building to meet the needs of people living in the area. Unfortunately, despite best efforts to progress the current proposal, we appear to be at an impasse with the developer we are engaging with due to rising costs associated with the development. The rates requested are significantly higher than other similar PCC developments in the region and across the country and therefore cannot be agreed by the HSE.

The HSE wishes to proceed with the development of PCC for the Cahersiveen area however, given the impasse and the widening gap in proposed costs that now appears to be in place, it is increasingly likely that the HSE will be left in a position whereby engagement with this developer to deliver this PCC will need to cease.

This is an unfortunate situation that we find ourselves in considering the engagement that has taken place regarding this property development. The HSE will review the situation in the location and scope out alternative options should they be available.

Primary Care services continue to be developed in the Community Healthcare Network 3 South Kerry in several locations including, Killorglin, Killarney and Kenmare.

Michael Fitzgerald
Chief Officer
Cork Kerry Community Healthcare

Question 5(b) on Agenda refers:

“In the aftermath of the HSE cyber attack that this Forum calls for a full review of the HSE IT system, including virtual patient data storage, in an effort to provide an IT system that is fit for a modern healthcare service.”

Cllr Mikey Sheehy

In the early hours of Friday 14th May 2021, the HSE became aware of a major cyber-attack against the HSE’s IT systems through the criminal infiltration of these systems using Conti Ransomware. As a result, all HSE IT systems were shut down.

This event is thought to be the most serious cyber-attack on the country's critical infrastructure and is considered by the HSE to be a Major Incident.

Given the seriousness of this attack and the impact this has had on those people who are dependent on health services, the Board of the HSE in conjunction with the CEO and Executive Management Team decided to commission an Independent Review into the circumstances surrounding this infiltration of the HSE's IT systems.

The purpose of the Review was to:

- I. Establish the facts in relation to the preparedness of the HSE in terms of both its technical preparedness [ICT systems and cyber protections] and its operational preparedness [including Business Continuity Management planning] for a strategic risk of this nature.
- II. Identify the learning from this major incident to bring about improvements to the HSE's preparedness for and response to other major risks and incidents that cause major business disruption.
- III. Share those learnings within the HSE and externally with State and non-State organisations to inform their future preparedness.

The report which was accepted in full by the HSE made a series of recommendation, the key recommendations are listed below. The HSE are preparing an investment case to fully support the implementation of all the recommendations which will further enhance our cyber security capability and support clinical and services continuity.

Key Recommendations

ICT / Cyber governance

- Board and Executive level working groups to drive continuous assessment of cybersecurity

Technology and Transformation

- Appoint a Chief Technology and Transformation Officer
- Enhance our ICT Strategy and multi-year technology plan in line with Cyber recommendations
- Develop a significant investment plan
- Transformation of a legacy IT estate
- Build cybersecurity and resilience into IT architecture

Cyber-security

- Appoint a Chief Information Security Officer and resource a skilled cyber function
- Develop and implement a cyber-security transformation programme

Clinical and services continuity

- Establish clinical and services transformation programme
- Build on HSE risk, incident, crisis and business continuity processes
- Establish Operational Policy + Resilience Steering Committee

- Enhance crisis management capabilities

Today our health service continues to be held back with inefficient, and often paper based patient interactions, with patient presence required due to the lack of tools rather than the patient need. While patient presence is critical in a health setting in some cases, it is not required in all settings. We need eHealth platforms that allow information to be shared across care teams with patient and service user consent, regardless of location. This will optimise the efficiency of our health care staff whilst also improving the experience for the patient by delivering safe, integrated, and high-quality care. Leveraging appropriate innovative and emerging technologies will enable a greater proportion of care to be delivered within community settings and allow patients to access care closer to home.

The Department of Health informed the HSE that they want to refresh the 2013 eHealth Strategy which will be anchored in in key themes such as Digitally Empowered & Engaged Patients, Digitally Secure Foundations, Digital Enablement of Workforce & Workplace and Connected Data-Driven Services and Insights. The HSE will be a key stakeholder during the development of the document. This will enable the HSE to update its strategy in line with Government’s strategy.

**Fran Thompson,
Chief Information Officer, eHealth, HSE.**

Question 5(c) on Agenda refers:

“Can the HSE please provide an update on the current waiting list in Cork County for those approved for home help and either not receiving same or not receiving their full allocated hours and advise on the ongoing recruitment campaign in this area.”

Cllr Eileen Lynch

Cork Kerry Community Healthcare is acutely aware that there are current capacity issues across both direct and indirect provision of Home Support and it continues to advertise on an ongoing basis for Healthcare Support Assistants in order to recruit as many suitable candidates as possible. This recruitment takes place via a variety of channels – local, regional and national. Due to the nature of Healthcare Support Assistant posts, this recruitment is normally conducted at a very local level and is on-going continually across the HSE. Approved private Home Support Providers also continue to recruit home support workers.

A time lag can exist between funding approval and the actual delivery of home support hours, and certain regions are experiencing increased pressures due to a lack of staff availability. In every instance we seek to provide home care services directly via the HSE and, where that is not possible due to a lack of staff resources, we endeavour to engage an approved private provider on our behalf to deliver the service.

The Cork Home Support waiting list currently stands at 638 people. 276 of the people on this list are existing service users who require additional supports and the remaining 362 people are new applicants for Home Support.

The demand for Home Support is ongoing and Cork Kerry Community Healthcare continuously strives to meet the home care needs of people within our community. Over the past year, the Cork Home Support department has experienced a high number of retirements and leavers, with the unintended consequence of this resulting in extended waiting lists due to staff shortages.

In order to address our ongoing staff requirements, we have appointed two specialist recruiters to fast track the hiring of additional staff. These staff recruiters are addressing each local Home Support office's needs and are focusing their efforts in a localised manner.

In addition, Cork Kerry Community Healthcare recently ran a regional recruitment campaign and has successfully secured an additional 96 Home Support staff. We will continue to recruit in order to further increase our staff resources and to maintain alignment with Government's commitment to develop improved community-based services and offer greater choice for older people.

Michael Fitzgerald
Chief Officer
Cork Kerry Community Healthcare

Question 5(d) on Agenda refers:

"To ask the HSE management how many GP positions are vacant in County Tipperary and please give a detailed breakdown of which areas are experiencing these vacancies."

Cllr Declan Burgess

There are two vacant General Practitioner (GP) GMS panels in South Tipperary namely Cahir and Cashel.

The GMS panel in Cahir has been vacant for 4 years with no applicants despite numerous attempts at recruiting a permanent GP. However the HSE have been successful in securing a long-term locum GP in place. In the interim the HSE will continue to advertise the GMS post.

The GMS panel in Cashel has been vacant since January 2022 and has been advertised on two occasions with no applicants. There are locum GP services in place to support the delivery of GP services pending the permanent recruitment of a GP. The HSE remain committed to the recruitment of a GP for this area and plans to re-advertise the vacancy over the coming weeks. In the interim a long-term locum GP is in place.

It is well recognised that there is currently an undersupply of GPs in Ireland. In order to combat the shortage of GP's there is a further increase in numbers of training places this year. In July 2022 it is hoped that there will be 21 GP training places in the South East Scheme which is an increase of 3 places. However it will be a number of years before these additional training places take effect as it is a four year training programme.

Kate Killeen White
Chief Officer
South East Community Healthcare

MOTION AND QUESTION RESPONSES

FORUM MEETING
23rd June 2022

MOTIONS

Motion 5(a) on Agenda refers:

“That the South/South West Hospital Group publish forthwith the findings of the UHW Archus Report that was completed last November 2021 and promised to public representatives of the South East Region within weeks by the Minister but still not available.”

Cllr Jody Power

The South South West Hospital Group (SSWHG) and Management at University Hospital Waterford (UHW) in conjunction with HSE Estates have commissioned a health planning process to strategically examine current and future capacity requirements having regard to demographic and other demand factors over the next 15 years. This process is being overseen by a Steering Group which has appropriate representation from key stakeholder groups. The value of this exercise is to align future investment decisions with objective planning and empirical data on demand factors. This Group Reports to the CEO of the SSWHG and its output will inform prioritisation and sequencing of future capital developments.

The Archus Heath Planners have been on site in UHW and have engaged with both clinical and non-clinical hospital staff to establish the requirements for the continued development of the hospital.

The Archus Report is currently being finalised. On finalisation of the report, UHW will work with SSWHG and HSE Estates to make the relevant Capital Submissions for new developments that are required.

Gerry O’Dwyer
Chief Executive Officer
South/South West Hospital Group

Motion 4(b) on Agenda refers:

“Asking the HSE for an update on the Primary Care Unit in Youghal”

Cllr Mary Lenihan Foley

Plans are in place for the development by the HSE of a Primary Care Centre in Youghal as part of the overall re-development of St Raphael’s Health Campus on the site of St Raphael’s Hospital at Old Golf Links Road, Youghal. It is envisaged that the Primary Care Centre (PCC) will provide accommodation for GPs, HSE services including public health and community nursing, the community medical service, physiotherapy, occupational therapy, speech & language therapy, podiatry, dietetics, counselling services and Mental Health. This will allow existing services to relocate from outdated and dispersed facilities in Youghal to be co-located in one building

thereby facilitate multi-disciplinary patient care and other service developments in the future.

The overall redevelopment of this historic site in Youghal will also include the construction of a new community nursing unit, a residential facility for older people, updated facilities for the disability sector and an updated ambulance base.

HSE Estates has led out on the feasibility study for St Raphael's campus which is now complete including the option of converting a large part of St Raphael's main building to being a Primary Care centre. The next step in this process is for a Capital Submission, to be made for its funding through the National Capital Plan.

Michael Fitzgerald
Chief Officer
Cork Kerry Community Healthcare

Motion 4(c) on Agenda refers:

“That the HSE would have regard to the specific medical needs, geographic location, and possible mobility issues of individual patients when assigning them to a new GP; and that where it proves impossible to assign patients to a GP practice in their own district, that the HSE would directly hire a GP to provide the requisite service.”

Cllr Conor McGuinness

Where the HSE is notified by a GMS GP of their intention to resign/retire their GMS contract, the HSE will advertise the GMS vacancy.

In such instances where the HSE is unsuccessful in filling the vacancy, the HSE can engage with GPs in the local area to ascertain capacity to best facilitate the needs of GMS patients.

Where there are transport issues or difficulties for patients, the HSE will facilitate, where possible, a transfer to an alternative GP. The Primary Care Unit will assess all options for individuals once they are advised of their details. When patients are re-assigned to another GMS GP, there is a requirement to remain with this GP for a period of three months. Once this three month period has lapsed, patients are free to exercise choice of Doctor from participating GPs in the GMS (Medical Card) Scheme.

The HSE do not employ GMS GP's directly.

Kate Killeen White
Chief Officer
South East Community Healthcare

Motion 5(d) on Agenda refers:

“That this Forum writes to the Minister for Public Expenditure to seek clarification that ring fenced finance for capital projects in the South/South West Hospital Group are sufficient to deliver those projects in light of construction inflation and supply chain issues.”

Cllr Mikey Sheehy

HSE capital funding is allocated to an individual project on an annual basis for capital projects in the South/South West Hospital Group. In terms of funding allocations, each project is subject to a review at various stages from project inception to completion. At each of these stages there is a review of the projects anticipated costs and it is at these periodic reviews where cost increases such as construction inflation, etc. are reviewed and accounted for.

**Alan O'Connell,
Assistant National Director,
Estates South**

Motion 4(e) on Agenda refers:

“That Kerry be included in the forthcoming pilot scheme for Crisis Cafés as a means of supporting mental health provision?”

Cllr Norma Moriarty

Under the new HSE Corporate Plan 2020-2023, the National Service Plan 2021, and in line with Recommendations 24 and 40 of “*Sharing the Vision: A Mental Health Policy for Everyone*”, HSE Mental Health propose to resource 19 home-based crisis resolution teams in tandem with 19 ‘Crisis Cafes’ to offer an alternative response to inpatient admission, when appropriate.

The vision is to provide out of hours Crisis Resolution Services (CRS) through the development of a Community based Crisis Resolution Team and a Community Style Crisis Café support service. The Crisis Resolution Team will undertake a health assessment and develop a crisis intervention care plan for people presenting in crisis associated with a known or suspected mental health problem.

The project’s objective is to provide an alternative pathway to acute hospital admission. Where a hospital admission does occur, the intervention of the CRS team will ensure a quicker and more effective response and can potentially help facilitate early discharge and support back to the community.

The National Crisis Resolution Services Steering Group was formed in December 2021, to oversee the design and development of a Pilot Model of Care for Crisis Resolution Services to include Crisis Teams and Crisis Cafes. Terms of reference were drawn up for the group and as part of its role they sought to support the development of a pilot site implementation plan to guide service delivery.

National funding has been approved to run a pilot Crisis café in Cork with a funding for 3.25 WTE staff in total, including Peer Support workers, and the Crisis Café will also be supported with volunteers. This service is currently in the planning process.

Our Mental Health Services are preparing to submit a business proposal for a Crisis Cafe in Kerry as part of or submission under the service planning process for 2023 funding. Kerry Mental Health Services have already reached out to the Iveragh Task Force, who have expressed an interest in working with the HSE on this pilot initiative, to scope this initiative and we will continue to work closely with the Task Force to this end.

Michael Fitzgerald
Chief Officer
Cork Kerry Community Healthcar

Motion 4(f) on Agenda refers:

“This Forum calls on the HSE to provide a sub specialty breakdown of the 600 additional Consultant posts referenced in the Slaintecare Implementation Strategy & Action Plan 2021-2022.”

Cllr Cathal Byrne

Please see response below from National HR Office, HSE.



National Doctors Training and Planning

Health Service Executive
Sancton Wood Building, Heuston South Quarter
St John's Road West, Dublin 8
E-mail: doctors@hse.ie www.hse.ie/doctors

NDTP Ref: 062/22

National Doctors Training and Planning (NDTP) Response

The data contained in this response is extracted from DIME (Doctors Integrated Management E-system) as at 13 June 2022. DIME is dependent on clinical sites inputting details on their consultant workforce and therefore there may be variances and gaps in the data supplied to that held within clinical sites. As DIME is a live system it must be noted that there can be variances in the figures published dependent on the run date of the report as entries can be made with a retrospective date.

The following information includes all tenures (permanent and non-permanent) and is based on a consultant **whose assignment in their current post has a start in 2020 and 2021.**

Table 1: Number of Consultant Applications Advisory Committee (CAAC) approved Consultant Posts filled in 2020 and 2021 as at 13 June 2022

Medical Discipline	Specialty	2020	2021	Total
Anaesthesiology	Anaesthesiology	37	38	75
Emergency Medicine	Emergency Medicine	8	29	37
Intensive Care Medicine	Intensive Care Medicine	3	9	12
Medicine	Cardiology	6	6	12
	Clinical Genetics	2		2
	Clinical Pharmacology	1		1
	Dermatology	6	9	15

	General Medicine	35	55	90
	Genito-Urinary Medicine	1	2	3
	Geriatric Medicine	8	22	30
	Infectious Diseases	2	5	7
	Medical Oncology	7	5	12
	Medical Ophthalmology	2	2	4
	Metabolic Diseases		1	1
	Neurology	3	4	7
	Neurophysiology	1	1	2
	Palliative Medicine	2	9	11
	Rehabilitation Medicine	1	6	7
	Rheumatology		1	1
Obstetrics & Gynaecology	Obstetrics & Gynaecology	20	13	33
Paediatrics	Paediatrics	23	24	47
Pathology	Chemical Pathology		1	1
	Haematology	9	10	19
	Histopathology	11	15	26
	Microbiology	7	12	19
Psychiatry	Child & Adolescent Psychiatry	13	8	21
	Psychiatry	30	36	66
	Psychiatry of Learning Disability	3		3
	Psychiatry of Old Age	5	3	8
Radiology	Radiation Oncology	3	2	5
	Radiology	23	26	49
Surgery	Cardiothoracic Surgery	2	2	4

	General Surgery	9	11	20
	Neurosurgery	3	1	4
	Ophthalmic Surgery	4	4	8
	Oral & Maxillofacial Surgery	1	2	3
	Orthopaedic Surgery	10	14	24
	Otolaryngology	6	5	11
	Paediatric Surgery		1	1
	Plastic Surgery	2	4	6
	Urology	4	9	13
Total		313	407	720

Table 2: Definitions

Approved: The post has been approved through the Consultant Applications Advisory Committee (CAAC) process.

Filled: The clinical site has verified that a Consultant currently occupies this post.

Table 3: Consultant Posts Approved by CAAC as of December 2020

	Replacement & Restructure				Change of Contract	Total
	New Post	Post	Post	Post		
Anaesthesiology	14	8	4		1	27
Emergency Medicine		2			2	4
Intensive Care Medicine	7	1		1	1	10
Medicine	61	13	10	4	7	95

Obstetrics & Gynaecology	7	7	1	1	2	18
Paediatrics	8	6	2	2	1	19
Pathology	17	6	7		3	33
Psychiatry	8	15	2	3	1	29
Radiology	10	7	2	4		23
Surgery	23	4	7	4	2	40
Total number of approvals	155	69	35	19	20	298
*Breakdown of specialty in T below						

Table 4: Consultant Posts CAAC Approved 2020 per Specialty		
Medical Discipline	Sub-Specialty	Number Approved
Anaesthesiology	Anaesthesiology	22
	Paediatric Anaesthesiology	5
Anaesthesiology Total		27
Emergency Medicine	Emergency Medicine	4
Emergency Medicine Total		4
Intensive Care Medicine	Intensivist	9
	Paediatric Intensive Care	1
Intensive Care Medicine Total		10

Medicine	Cardiology	8
	Dermatology	2
	Endocrinology & Diabetes Mellitus	4
	Gastroenterology	7
	General	5
	Genito-Urinary	2
	Geriatrics	10
	Infectious Diseases	7
	Medicine s.i. metabolic diseases	1
	Nephrology	4
	Neurology	5
	Neurophysiologist	1
	Oncology	7
	Ophthalmology	5
	Palliative Medicine	4

Table 4: Consultant Posts CAAC Approved 2020 per Specialty

	Rehabilitation Medicine	7
	Respiratory	11
	Rheumatology	5
Medicine Total		95
Obstetrics & Gynaecology	Obstetrics & Gynaecology	12

	Obstetrics & Gynaecology	1
	Obstetrics & Gynaecology s.i. maternal-fetal medicine	3
	Obstetrics & Gynaecology s.i. reproductive medicine	1
	Obstetrics & Gynaecology s.i. uro-gynaecology	1
Obstetrics & Gynaecology Total		18
Paediatrics	General Paediatrics	4
	Neonatology	2
	Paediatric Cardiology	3
	Paediatric Emergency Medicine	1
	Paediatric Endocrinology	2
	Paediatrics s.i. community child health	1
	Paediatrics s.i. infectious diseases	2
	Paediatrics s.i. metabolic diseases	1
	Paediatrics s.i. paediatric neurodisability	3
Paediatrics Total		19
Pathology	Clinical Biochemistry	2
	Haematology (Clinical & Laboratory)	7
	Histology s.i. cytology	1
	Histopathology	6
	Histopathology s.i. perinatal pathology	1

Table 4: Consultant Posts CAAC Approved 2020 per Specialty

	Microbiology	16
Pathology Total		33
Psychiatry	Child & Adolescent Psychiatry	7
	Child & Adolescent Psychiatry	1
	Child & Adolescent Psychiatry s.i. Psychiatry of Learning Disability	1
	General Adult Psychiatry	17
	General Adult Psychiatry s.i. substance misuse	1
	Psychiatrist in the Psychiatry	1
	Psychiatry of Old Age	1
Psychiatry Total		29
Radiology	Neuro-Radiology	1
	Paediatric Radiology	1
	Radation Oncologist	1
	Radiology	13
	Radiology s.i. breast radiology	3
	Radiology s.i. interventional radiology	2
	Radiology s.i. musculo-skeletal radiology	2
Radiology Total		23
Surgery	Cardiothoracic Surgery	1
	General Surgery	2

	Neurosurgery	4
	Ophthalmic Surgery s.i. paediatric ophthalmic surgery	1
	Otolaryngology	7
	Plastics, Reconstructive & Aesthetic Surgery	3
	Plastics, Reconstructive & Aesthetic Surgery s.i. cleft lip & palate surgery	2
	Surgery s.i. colorectal surgery	2
	Surgery s.i. gastrointestinal surgery	5
	Trauma & Orthopaedic Surgery	6
	Trauma & Orthopaedic Surgery s.i. spinal surgery	1
	Urology	5
	Urology s.i. paediatric urology	1
Surgery Total		40
Consultant Posts CAAC Approved 2020 per Specialty		298

Table 5: Consultant Posts Approved by CAAC as of December 2021

	Replacement & Restructure				Total
	New Post	Restructure Post	Replacement Post	Restructure Post	
Anaesthesiology	36	5	11	1	53
Emergency Medicine	24		5		29
Intensive Care Medicine	7				7
Medicine	189	7	16	11	223
Obstetrics & Gynaecology	10	2	3		15

Paediatrics	11		2	3	16
Pathology	42	2	8	2	54
Psychiatry	23	6	20	2	51
Radiology	32	1	3	3	39
Surgery	35	6	14	5	60
Total number of approvals	409	29	82	27	547
*Breakdown by specialty below in Table 6					

Table 6: Consultant Posts CAAC Approved 2021 per Specialty		
Medical Discipline	Sub-Specialty	Number Approved
Anaesthesiology	Anaesthesiology	31
	Anaesthesiology s.i. intensive care medicine	12
	Anaesthesiology s.i. pain medicine	4
	Paediatric Anaesthesiology	3
Anaesthesiology Total		50
Emergency Medicine	Emergency Medicine	21
	Paediatric Emergency Medicine	8
Emergency Medicine Total		29
Intensive Care Medicine	Intensivist	9

	Paediatric Intensive Care Medicine	1
Intensive Care Medicine Total		10
Medicine	Cardiology	20
	Clinical Genetics	1
	Clinical Neurophysiologist	2
	Dermatology	10
	Endocrinology & Diabetes Mellitus	13
	Gastroenterology	16
	General	12
	Genito-Urinary	2
	Geriatrics	45
	Infectious Diseases	12
	Nephrology	12
	Neurology	14
	Oncology	13

Table 6: Consultant Posts CAAC Approved 2021 per Specialty

	Ophthalmology	6
	Palliative Medicine	2
	Rehabilitation Medicine	1
	Respiratory	24
	Rheumatology	18

Medicine Total		223
Obstetrics & Gynaecology	Obstetrics & Gynaecology s.i. maternal-fetal medicine	2
	Obstetrics & Gynaecology s.i. reproductive medicine	1
	Obstetrics & Gynaecology	9
	Obstetrics & Gynaecology s.i. gynaecological oncology	1
	Obstetrics & Gynaecology s.i. uro-gynaecology	2
Obstetrics & Gynaecology Total		15
Paediatrics	General Paediatrics	7
	Neonatology	2
	Paediatric Cardiology	1
	Paediatric Gastroenterology	1
	Paediatric Neurodisability	2
	Paediatrics s.i. community child health	1
	Paediatrics s.i. infectious diseases	1
	Respiratory	1
Paediatrics Total		16
Pathology	Breast Pathology	1
	Haematology (Clinical & Laboratory)	12
	Histopathology	11
	Histopathology s.i. cytology	2

	Histopathology s.i. perinatal pathology	2
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Table 6: Consultant Posts CAAC Approved 2021 per Specialty

	Immunology (Clinical & Laboratory)	2
	Microbiology	18
	Neuropathology	2
	Paediatric Chemical Pathology	2
	Paediatric Histopathology	1
	Paediatric Immunology	1
Pathology Total		54
Psychiatry	Adult Psychiatry s.i. liaison psychiatry	2
	Adult Psychiatry s.i. substance misuse	1
	Child & Adolescent Psychiatry	7
	Child & Adolescent Psychiatry s.i. psychiatry of learning disability	2
	Forensic Psychiatry	1
	General Adult Psychiatry	24
	General Adult Psychiatry s.i. forensic psychiatry	1
	General Adult Psychiatry s.i. liaison psychiatry	1
	General Adult Psychiatry s.i. rehabilitation	3
	Psychiatry of Learning Disability (Adult)	6
	Psychiatry of Old Age	3
Psychiatry Total		51

Radiology	Paediatric Radiology	6
	Radiation Oncology	4
	Radiology	17
	Radiology s.i. breast radiology	6
	Radiology s.i. interventional radiology	6
Radiology Total		39
Surgery	Cardiothoracic Surgery	2
	General Surgery	1
	Neurosurgery	1
	Neurosurgery s.i. paediatric neurosurgery	1
	Ophthalmic Surgery	3
	Ophthalmic Surgery s.i. vitreo-retinal surgery	1
	Oral & Maxillofacial Surgery	2
	Otolaryngology	5
	Otolaryngology s.i. paediatric otolaryngology	1
	Plastics, Reconstructive & Aesthetic Surgery	2
	Plastics, Reconstructive and Aesthetic Surgery	1
	Plastics, Reconstructive and Aesthetic Surgery s.i. cleft lip and palate	1
	Surgery s.i. colo-rectal surgery	5
	Surgery s.i. upper gastrointestinal	4
	Surgery s.i. vascular surgery	1

	Trauma & Orthopaedics	19
	Urology	9
	Trauma & Orthopaedic Surgeon s.i. spinal surgery	1
Surgery Total		60
Total number of CAAC approvals in 2022		547

QUESTIONS

Question 6(a) on Agenda refers:

“To ask the HSE how many GP positions are currently vacant in Co. Waterford; where these vacancies occur; how many patients are currently without access to a GP; what measures the HSE puts in place to ensure patients can access GP services in a timely manner; and what steps are being taken to address the shortage of GPs in Waterford and the wider South-East?”

Cllr Conor McGuinness

The HSE currently has no GMS GP vacancies in Co. Waterford but there is a GMS GP retiring from GMS on 31st August 2022 and this vacancy will be advertised shortly.

In all cases a GMS patient will be assigned to a GMS GP who they can access in respect of their medical care.

It is well recognised that there is currently an undersupply of GPs in Ireland. In order to combat the shortage of GPs there is a further increase in numbers of training places this year. In July 2022 it is hoped that there will be 21 GP training places in the South East Scheme which is an increase of 3 places. However it will be a number of years before these additional training places take effect as it is a four year training programme.

Should you have any further queries in relation to same please do not hesitate to contact me.

Kate Killeen White
Chief Officer
South East Community Healthcare

Question 6(b) on Agenda refers:

“How many Dentists are actively available to medical card holders in Kerry currently and how many of those are accepting new medical card patients for care.”

Cllr Mikey Sheehy

The Primary Care Dental Service provides dental treatment to eligible children, medical card holders, adults and children with special needs and others in the care of the HSE at various locations throughout Cork and Kerry. Children under 16 years of age are treated in HSE dental clinics and adults are treated by private dental

practitioners contracted to the Health Service under the Dental Treatment Services Scheme (DTSS).

There are particular issues with the HSE dental service for adults i.e. DTSS. This is a nationwide problem and is not unique to Kerry. A number of private general dental practitioners (GDP's) have resigned from the scheme and many of the general dental practitioners still operating the scheme have restricted access and are only seeing existing patients.

At this time there, are 20 dental practices operating the DTSS in Kerry with just one accepting new patients.

Cork Kerry CHO understands that the matter is currently being raised and considered by the Department of Health and the HSE at National Level.

Michael Fitzgerald
Chief Officer
Cork Kerry Community Healthcare

Question 6(c) on Agenda refers:

"This Forum calls on HSE to provide the number of persons by age on waiting lists for speech and language therapy within Primary Care in County Wexford."

Cllr Cathal Byrne

The Speech and Language Therapy Service in Wexford Primary Care provide services to children who present with speech, language, voice, fluency and social communication difficulties.

Input may be provided either directly with the child or with their parent/guardian, depending on the age and specific individual needs of the child.

Input may be given one-on-one or in a group-based setting. Appointments are usually clinic-based however in some cases school-based appointments may be offered.

Children who are not for primary care speech & language therapy may be referred to specialist service.

The Primary Care Speech and Language Therapy Service currently receive on average 90 new referrals per month. Given increased demand for services, there are waiting lists in operation as per table below.

Table: Number of persons on waiting lists for Speech & Language Therapy (SLT) in the Wexford area.

Ages	0 - 4.11yrs	5.00 - 17.11yrs
Waiting SLT Assessment	602	282
Waiting SLT Initial Therapy	265	332

However as with other areas, staffing challenges (including maternity leaves) are continuing to impact on the overall throughput of cases. In addition there are 3 vacancies which HSE/South East Community Healthcare are unable to fill due to panels being depleted.

In the meantime services are being provided on a priority basis.

SLT Wexford are currently actively progressing new panels for current and future vacancies in the SECH. In addition a national campaign is being run at present to recruit staff grade Speech & Language Therapists (SLTs).

There are also plans to run a South East Community Healthcare panel to recruit Senior SLTs in the Autumn of 2022.

The HSE acknowledges the challenges in meeting the demand for Speech & Language Therapy services and how this impacts on children and their families.

Kate Killeen White
Chief Officer
South East Community Healthcare

MOTION AND QUESTION RESPONSES

FORUM MEETING
22nd September 2022

MOTIONS

Motion 5(a) on Agenda refers:

“That the South/South West Hospital Group publish forthwith the findings of the UHW Archus Report that was completed last November 2021 and promised to public representatives of the South East Region within weeks by the Minister but still not available.”

Cllr Jody Power

The South / South West Hospital Group (SSWHG) and Management at University Hospital Waterford (UHW) in conjunction with HSE Estates have commissioned a health planning process to strategically examine current and future capacity requirements having regard to demographic and other demand factors over the next 15 years. This process is being overseen by a Steering Group which has appropriate representation from key stakeholder groups. The value of this exercise is to align future investment decisions with objective planning and empirical data on demand factors. This Group Reports to the CEO of the SSWHG and its output will inform prioritisation and sequencing of future capital developments.

The Archus Heath Planners have been on site in UHW and have engaged with both clinical and non-clinical hospital staff to establish the requirements for the continued development of the hospital.

The Archus Report is presently being finalised. On finalisation of the report, UHW will work with SSWHG and HSE Estates to make the relevant Capital Submissions for new developments that are required. I understand that the report is expected to contain a number recommendations including the requirement for; additional inpatient beds, a purpose-built critical care unit with 100% single rooms, additional theatre capacity to meet the future trauma surgery demand and the increased capacity and demand requirements across several specialties and also increased capacity for outpatient services.

Gerry O’Dwyer
Chief Executive Officer
South/South West Hospital Group

Motion 4(b) on Agenda refers:

“That the HSE outlines the progress, if any, on the proposed new residential unit at Saint Patrick’s Hospital, Cashel and the planning of this development.”

Cllr Declan Burgess

Cashel Residential Services and its associated facility at St. Anthony’s Unit in Clonmel is a South East Community Healthcare residential centre for older people and

provides long stay, respite, palliative and rehabilitation services for the South Tipperary area.

At the recent Regional Health Forum South meeting held on 19th May 2022, South East Community Healthcare advised on the background and rationale for the transfer of Residents from St. Patrick's Hospital Cashel to Our Lady's Hospital Cashel (now known as Cashel Residential Older Persons Services). This transition took place in consultation with the independent regulatory body the Health Information and Quality Authority (HIQA) in order to ensure the safety of the residents living in St Patrick's Hospital and address infection prevention and control concerns that existed within St. Patrick's Hospital Cashel.

In May 2022, South East Community Healthcare also confirmed that there were a total of 99 HSE public long-stay beds (including rehabilitation beds) across the South Tipperary Area and that South East Community Healthcare were satisfied that the social and care requirements of residents in Cashel are being addressed within Cashel Residential Older Persons Services.

The (21 bed) Rehabilitation Unit on site at Cashel Residential Services and, the Day Hospital and St. Claire's Ward located on the grounds of Our Lady's Hospital were not affected by the transfer. In turn, available space at the former St. Patrick's Hospital would be utilised for some services that were based in the main Our Lady's building in Cashel.

In addition as part of the health service response in relation to physical environments in which services operate vis-a-vis Covid-19 and infection prevention and control guidance, there was a need to consider alternative provision for Disability Services. With the transition of residents from St. Patrick's Hospital to Cashel Residential Older Persons Services there have been significant developments at St. Patrick's Campus for Children's Disability Services and some Primary Care Services. These works were successfully completed and the refurbished area occupied since July 2021. It is understood that additional areas have been identified in St. Patrick's, for further refurbishment.

The development of the new Community Nursing Unit build of St. Patrick's Hospital remains on the capital plan. However at present, services/sites with greater environmental, safety and infection control issues are being prioritised.

Ms Kate Killeen White
Chief Officer
South East Hospital Group

Motion 4(c) on Agenda refers:

"As discussed at the Regional Health Forum Meeting held on the 23rd June 2022, I am requesting that the members can discuss changing the start time at our Regional Health Forum Meetings which are currently held at 2pm to the new time of 11am."

Cllr Audrey Buckley

Discussion was held in Chambers.

Motion 4(d) on Agenda refers:

What actions is the HSE taking to resolve the issue of the current shortages of staff for Home Support."

Cllr Michael Foley

Cork Kerry Community Healthcare

Background:

The HSE is committed to the development of improved community-based services, shifting care to the home and offering greater choice for older people. The Home Support service is a core service for older people and Cork Kerry Community Healthcare continues to work towards increasing Home Support provision in Cork and Kerry; however, difficulties have been experienced in relation to recruitment and retention of staff with certain areas in both counties experiencing increased pressures. Approved private providers, who work with the HSE in fulfilling Home Support service requests, are experiencing similar staff resource issues.

Consequently, there can be delays between the approval of funding and the delivery of home support hours, and the numbers of people in this category have increased. The HSE is endeavouring to prioritise service for clients with the highest care needs to ensure that the service can commence for those who require it most urgently.

Number of Home Support clients in receipt of a Home Support service on last day of month since January 2022:

LHO	July 2022	+/- June 2022
North Lee	2046	3
South Lee	2065	5
North Cork	1574	10
West Cork	905	-13
Kerry	2554	2
TOTAL	9144	+7

There was a net gain of 68 new clients on the last day of July compared to January 2022.

Total Home Support Hours Delivered Year to Date July 2022:

Grand Total Home Support Hours - in the month (July 2022)	284013.24
Grand Total Home Support Hours -YTD totals	1657103.2

Current recruitment schemes under way/measures implemented to address the challenges in fulfilling home care packages:

In order to bolster staff resources and reduce waiting times for allocation of service, Cork Kerry Community Healthcare advertises on an ongoing basis for Health Care Support Assistants (HCSAs) throughout the region in an effort to recruit as many suitable candidates as possible. Due to the nature of the role of HCSAs, this recruitment is normally conducted at a very local level and is on-going across the two counties.

Two specialist recruiters have been appointed to the Home Support service to fast track the hiring of additional staff. These staff recruiters are addressing each local Home Support office's needs and are focusing their efforts in a localised manner.

In addition, a regional HSE HCSA recruitment campaign was undertaken in early 2022 which has resulted in the panelling of 96 successful candidates across Cork and Kerry. 54 of these candidates have completed the recruitment clearance process and have either commenced employment with the Home Support service or are scheduled to commence in the coming weeks. Given the vulnerable population that HCSA staff provide service to, the recruitment clearance process is a rigorous process with a number of different elements to it which must be satisfactorily completed in advance of commencing their roles as HCSAs. A small number of candidates are still undergoing recruitment clearance while 17 successful candidates either withdrew from the process or declined/did not respond to Expressions of Interest for HCSA posts.

A further supplementary Cork & Kerry HCSA recruitment campaign was undertaken in May 2022 and 66 successful candidates were subsequently panelled across the region. The recruitment clearance process is on-going for these candidates and upon completion, allocation of these additional staff resources will commence.

An additional Supplementary Campaign to recruit HCSA staff in Cork and Kerry was launched on 21st September on [HSE.ie/jobs](https://www.hse.ie/jobs) - closing date 11th October 2022. This campaign has been advertised on both the Corkman and Kerryman newspapers, CKCH social media, local radio stations and [jobsireland.ie](https://www.jobsireland.ie).

Certain regions are experiencing increased pressures due to staff availability and we are working to boost staff resources in these areas as a priority. Following on from the recruitment campaigns outlined above as well as ongoing local recruitment efforts, the placement of additional staff is being prioritised for the following areas in Cork and Kerry:

- Farranree
- Ballyphehane
- Ballincollig
- Carrigaline
- Douglas
- Blackrock
- Bantry
- Skibbereen
- Dunmanway
- Macroom
- Cahirciveen

- Listowel
- Tralee
- Killorglin
- Dingle
- Kenmare
- Waterville

The number of home support hours sought in communities is increasing in line with enhanced investment. Efforts are ongoing to meet the continued increase in demand for the service. Cork Kerry Community Healthcare is committed to ensuring that older people with care needs are enabled to continue living independently at home for as long as possible. In this regard we are making every effort to address recruitment needs and ensure that waitlisted Home Support hours are delivered to clients throughout the region.

South East Community Healthcare

Home Support services in the SECH are provided in line with HSE national guidelines. Services are provided in the first instance directly by the HSE or by private providers that have service arrangement with the HSE. Despite the significant level of service provision, the demand for Home Support continues to grow as the population aged over 65 years' increases. Those people who are on the waiting list have been assessed and are reviewed, as staffing resources become available, to ensure that individual cases continue to be dealt with on a priority basis within the available staffing, having regard to the client's assessed needs and current Public Health advice. Individuals are removed from the waiting list in chronological order with priority given to those being discharged from acute hospitals, who are in a position to return home with supports.

Total Home Support Hours Direct and Indirect for Year to Date July 2022 South East Community Healthcare

Home Support Office	Total YTD 2022	Total HSE Direct YTD	Total YTD Indirect YTD	Total July 2022	HSE Direct July 2022	Indirect July 2022
Carlow / KK	326,865	258,065	68,800	47,413	37,413	10,000
South Tipp	237,483	217,107	20,376	34,471	31,066	3,405
Waterford	237,381	165,937	51,444	34,191	23,375	10,456
Wexford	384,382	221,559	162,823	54,967	32,397	22,570
Total	1,186,111	862,668	303,443	171,042	124,251	46,431
%		72.7%	27.3%		72.6%	27.4%

Number of Home Support clients in receipt of a Home Support service on last day of month since January 2022.

HSO	July 2022	+/- from June 2022
Carlow/ KK	1656	7
South	1538	7

Tipperary		
Waterford	1581	18
Wexford	1880	23
Total	6655	55

There is a net gain of 615 new clients since January 2022.

Complexity of Need and Changing Workforce Requirements

In addition to increased demand, there is also greater complexity of need presenting amongst clients i.e. requiring 2 staff to attend to one person and also greater hours to be allocated to meet presenting need.

Staffing Challenges

The Home Support Service operates within the constraints of available staffing resources which impacts directly on the ability for a service to be delivered either partially or in its entirety.

As presented to the Regional Health Forum South East Committee meeting in July, all areas are experiencing increasing demand due to recruitment challenges which impacts on waiting lists. There are significant challenges (HSE and Private Providers) in sourcing home support staff at present. It is acknowledged that competition across other employment markets is impacting on the number of applicants.

Recruitment Schemes / Campaign - Health Care Support Assistants (HCSA) Update

The HSE South East Community Healthcare continues to operate rolling regional recruitment campaigns across 2022.

These recruitment campaigns are advertised widely on local radio and in local newspapers, via a promotional video and in third level institutions.

In the South East there has been six recruitment campaigns run to date (includes one by external agency) and the following is the current update:

- 67 candidates appointed
- 12 candidates are currently going through pre-clearances with start dates requested for 11 of these.

In addition there are 30 candidates (35 were invited for interview) scheduled for further round of interviews commencing on Thursday 22nd September 2022.

Other measures are ongoing to meet to address the challenges in home support staffing – South East Community Healthcare continue to engage and work with relevant stakeholders at local and national level (including National Home Support Programme office) to explore various ways of responding to this need.

In addition, South East Community Healthcare has reviewed and amended the essential HCSA job criteria requirements i.e. from 8 to 5 modules, with requirement of the remaining 3 modules required to be completed within the probation timeframe.

South East Community Healthcare is committed to ensuring that older people with care needs are enabled to continue living independently at home for as long as possible. In this regard we are making every effort to address recruitment needs and ensure that waitlisted Home Support hours are delivered to clients.

Mr Michael Fitzgerald
Chief Officer
Cork Kerry Community Healthcare

Ms Kate Killeen White
Chief Officer
South East Community Healthcare

Motion 4(e) on Agenda refers:

"That all relevant agencies join together to form a Taskforce akin to the Road Safety Authority with a view to combating the misuse of drugs and the very worrying normalization of their use throughout society."

Cllr Norma Moriarty

Discussion was held in Chambers.

Motion 4(f) on Agenda refers:

"Can the HSE please outlines the new District Health nurse (DHN) area in Cork County and confirm that service users have been notified of same."

Cllr Eileen Lynch

The Sláintecare reform programme comprehends the restructuring of community healthcare organisations to form Enhanced Community Care and Community Healthcare Networks (CHNs). The restructuring of services provides for a population needs based model. There are a total of 96 CHNs across Ireland, 14 of which are based in the Cork and Kerry region. Each CHN will deliver primary healthcare services across a population of average 50,000. CHNs typically consist of between 4-6 primary care teams, with GPs involved in delivering services. Working together in multi-disciplinary teams will deliver the Sláintecare vision to provide the right care, in the right place at the right time.

As part of this strategic national reform, in May 2021 Cork Kerry Community Healthcare implemented the first CHN in the Bandon, Kinsale and Carrigaline area

(CHN 13). This was the initial learning site for the Cork and Kerry region and since then all 14 CHNs within Cork and Kerry have been established.

The establishment of CHN 12 involved the inclusion of Macroom and parts of Rylane in a network with Ballincolig. This change has not involved any diminution in staffing levels and, with the exception of any normally arising movement in staff, there has not been a change in personnel or services to the area. Continuity of care has been preserved throughout. The process has involved planning and due diligence over the 12 month plus period to implementation in September 2022.

The PHN team are informing patients as they meet them of this change. While there is a change to the Director of Public Health Nursing (DPHN), the Assistant DPHN and PHN/RGN staff remain as before and patients have access to the same services. The contact numbers for the PHN service in the area remain unchanged. Families with complex care needs have been informed directly in relation to the changes.

Michael Fitzgerald
Chief Officer
Cork Kerry Community Healthcare

QUESTIONS

Question 6(a) on Agenda refers:

“What are the HCA (Health Care Assistant) levels in UHK in comparison to all other hospitals in the South, South West Area and are there measures in place to ensure that this essential role is in place to the level required?”

Cllr Norma Moriarty

I wish to confirm that there are currently '94' Healthcare Assistants employed in University Hospital Kerry which corresponds to a total of '81' Whole Time Equivalents (WTE). This level of HCAs is comparable to the other Model 3 Acute Hospitals across the South/South West Hospital Group region.

Similar to other staff grades vacancies, the filling of HCA vacancies within the South/South West Hospital Group (S/SWHG) is a dynamic situation which is managed by hospitals in conjunction with the Group HR function and the HSE National Recruitment Service (NRS).

There is currently a Healthcare Assistant panel in place which has been in place since 2021. In addition, a recruitment campaign has just closed with interviews expected to take place on the first week of October 2022.

Vacancies may arise due to retirements or resignations, and when the service is notified of these situations the recruitment process is initiated. To ensure the on-going safe delivery of clinical services the duties may be covered through

redeployment, restructuring or reallocation, agency or overtime while the recruitment of the post is progressed.

The presence of safe staffing levels is essential to the delivery of high standards of quality patient care. Healthcare Assistants provide an important support role to registered nurses in order to maintain a safe and quality service delivery to our patients. Decisions in relation to skillmix (ratio of nurses and healthcare assistants) are based on the Framework for Safe Nurse Staffing and Skill mix along with national and local staffing guidelines.

Mr Gerry O'Dwyer
Chief Executive Officer
South/South West Hospital Group

Question 5(b) on Agenda refers:

"Can the HSE please outline the number of occupational therapist and Speech and Language therapist positions in Cork County in CDNT4 and CDNT5 and the number of these positions that have been filled."

Cllr Eileen Lynch

Children's Disability Network Teams (CDNTs) have been established to provide services and supports for all children with complex needs within a defined geographic area.

The model of CDNT intervention is based on a tiered model of intervention, all families, children and young people are offered and strongly encouraged to access preventative universal approaches which build skills and support families understand their child, the child's development and how to positively support their child's development. They are proactive approaches focusing on prevention and forming the basis for further intervention. In their absence other interventions may be less effective.

Universal Interventions

Information sessions/ talks/programmes for families on particular topics related to the needs of the children within the CDNT.

Targeted Interventions

These are individual and group interventions for children who have identified similar needs e.g. PECS Training, Lámh Training, Hanen, Incredible Years.

Intense Interventions

These are individual interventions to enable a child and family to receive one to one intervention to address a significant identified need that cannot be met by a Universal or Targeted Intervention.

It is the objective of the CDNTs to ensure that all children will have timely access to the appropriate services; however the CDNTs have experienced significant challenges. Challenges include higher than predicted caseloads on each CDNT which is based on 3.5% of the population presenting with complex needs within a network population of 50,000 as well as finite and limited publicly funded resources assigned to each network. Challenges also include the ongoing impact of the COVID 19 pandemic, lack of suitable accommodation for the teams as well as very limited administrative support. Furthermore there is no integrated information management system for the team's leading to inefficient operational management systems. The teams are currently responding to high numbers of complaints and feedback due to lack of resources from key stakeholders including service users, the education sector other health services.

There are a number of vacancies due to new posts in recruitment and statutory leave entitlements. Backfilling of posts is challenging in the current environment due to lack of availability of appropriately qualified staff and demand for same across the health service. However the Lead Agencies responsible for the management of the teams are prioritising the recruitment of such posts. The teams operate according to a suite of national and regional standard operating policies, procedures and guidelines.

Please see hereunder as requested Occupational Therapy and Speech and Language Therapy positions in Cork County in CDNT4 and CDNT5 and the number of these positions that have been filled.

CDNT 4	Funded Positions	Current Status	Vacancies
Senior SLT	2.8wte	Filled	None
Basic SLT	2.75wte	2wte filled	0.75wte
Senior OT	1.9wte	Filled	None
Basic OT	2.5wte	1wte	1.5wte

CDNT 5	Funded Positions	Current Status	Vacancies
Senior SLT	1wte	Filled	None
Basic SLT	1wte	Recently Filled July 22-6mths vacant prior to this	None
Senior OT	1wte	Filled	None
Basic OT	1wte	Recently Filled September 22- 11mths vacant prior to this	None

There are prioritisation systems and caseload management systems including assessment and intervention pathways in place. The demand for assessment and intervention outweighs the resource capacity of the teams, this means that in practice children with the highest priority of need can access services and other children with a lower priority of need are placed on the appropriate waitlists. The caseload management systems are reviewed and updated regularly by the team managers. CKCH Disability Services have put in place additional waitlist initiatives with external agencies to support caseload management, using time related savings, including preliminary team assessments under the AON process and ASD assessments.

Mr Michael Fitzgerald
Chief Officer
Cork Kerry Community Healthcare

MOTION AND QUESTION RESPONSES

FORUM MEETING
24th November 2022

MOTIONS

Motion 6(a) on Agenda refers:

“That the HSE outline the up to date position regarding the implementation / delivery of its proposed service plans for the continuous assessment / diagnosis / treatment / rehabilitation and management of Long Covid.”

Cllr John Coonan

Item Number 5 on the Agenda covers this response.

5. Update to be given on Long Covid by Dr Arthur Jackson.

Motion 4(b) on Agenda refers:

“That we thoroughly examine the potential for and means to introducing Ultra Sound services at Cahersiveen Community Hospital with a view to serving the West Iveragh population.”

Cllr Norma Moriarty

GP direct access to diagnostics is an integral component of the HSE’s [Enhanced Community Care](#) programme. Direct access to X-ray, CT, MRI, DEXA and Ultrasound is available nationally for all GPs. As part of this initiative, there is a Radiology Service provided from at Cahersiveen Community Hospital two days a week. This services comes under the clinical governance of University Hospital Kerry.

GP direct access to Ultrasound is provided through a combination of national and local initiatives and is available to adult patients (16 years of age and over) with a medical card, GP visit card or Health Amendment Act (HAA) card.

As the rollout of diagnostics in the community develops, the provision of ultrasound on a sustainable basis will be an important development. To successfully develop such a service key components including geographic location and likely demand, accommodation and environment, availability of resources and clinical personnel, would all need to be considered. While the HSE cannot commit to the development of ultrasound services in Cahersiveen at this time it is mindful of the needs of the community who are at a distance from such services and it will remain on the agenda for consideration.

Michael Fitzgerald
Chief Officer
Cork Kerry Community Healthcare

Motion 6(c) on Agenda refers:

"That the HSE would outline the amount and breakdown of funding awarded to adult disability day service providers in Cork, from the HSE, towards transport funding and outline what circumstances or criteria is taken into account by service providers in the discretionary allocation of same."

Cllr Eileen Lynch

With regard to transport to Adult Disability Day Services, HSE Disability Services in Cork Kerry Community Healthcare is provided with funding for the provision of Rehabilitative Training Programmes and Day services to young adults leaving school who require an appropriate HSE funded service. This funding is allocated via the National School Leaver/RT Exit process. This funding is used for the placement cost and is fully expended in the provision of staff, materials and all overheads and where necessary the rental of suitable premises. In 2022 CKCH received a total of €3,613,538 School Leaver/RT Exit funding to provide HSE funded services to a total of 332 young persons. Funding via the School Leaver/RT Exit process is also provided by the National Office for Rent/Lease and Refurbishment costs. The total funding received by CKCH in 2022 was €332,610 for Refurbishment & €222,000 for Rent/Lease.

This funding is ongoing funding for the Actual Placement Cost for each school leaver that has been profiled identifying their support needs. The funding is used by agencies to provide additional support staff e.g. if a service user requires 1:1 support / 2:1 support. It can be used by agencies to include the provision of transport as part of the placement cost. It should be noted that the HSE National Disability Services Office is very clear in articulating that School Leaver /Rehabilitative Training Exit funding does not include transport costs and that the provision of transport is a matter for the Department of Transport. However, in exceptional circumstances in order to support a young person to attend their service, the cost of transport can be included in the placement cost agreed for some individual SL/RT Exit, requiring transport to access their service.

Michael Fitzgerald
Chief Officer
Cork Kerry Community Healthcare

Motion 6(d) on Agenda refers:

"Medical Card Holders in Kerry are finding it difficult to get dental treatment under the scheme. Can the HSE provide a list of Dental Practitioners in Kerry who provide dental service to medical card holders and what measures have been carried out to rectify the issue."

Cllr Michael Foley

The Primary Care Dental service provides dental treatment to eligible children, medical card holders, adults and children with special needs and others in the care of the HSE at various locations throughout Cork and Kerry. Children under 16 years of age are treated in HSE dental clinics and adults are treated by private dental practitioners contracted to the Health Service under the Dental Treatment Services Scheme (DTSS).

There are particular issues with the HSE dental service for adults i.e. DTSS. This is a nationwide problem and is not unique to Kerry. A number of private general dental practitioners (GDP`s) have resigned from the scheme and many of the general dental practitioners still operating the scheme have restricted access and are only seeing existing patients.

Earlier this year the Minister of Health notified the HSE of an increase in fees and expansion of treatments under the DTSS. These new measures were designed to address access problems for patients, and address dentist's concerns about the viability of the DTSS, while aligning the DTSS more closely with the Dental Treatment Benefits Scheme, which is widely operated by private dentists for PRSI patients. For example, the fee for an Oral Examination increased from €33 to €40; Prophylaxis treatment fees were increased from €31 to €42 and the need for prior approval was removed; the fee for extractions was increased from €39.50 to €60. The fees for restorations, endontic treatment, dentures and denture repair were also increased and the reintroduction of Scale and Polish for medical card patients was approved. All of these changes came into effect on 1st May 2022.

Reimbursement for services provided by DTSS contractors is administered by the Primary Care Reimbursement Service (PCRS) and the PRCS has introduced a dedicated online facility for all Dental Contractors to submit their claims online for expeditious processing and reimbursement.

There are a total of 20 dental practices operating the DTSS at this time. Please see below the full list as requested.

Michael Fitzgerald
Chief Officer
Cork Kerry Community Healthcare

Forename	Surname	Address 1	Address 2	Address 3	Tel. No.	Panel No.	Routine	Dentures
Caitriona	Ahern	5 Mill Road	Killorglin	Co. Kerry	066 9790400	97347	Yes	Yes
Colette	Brassil	25 Pembroke St.,	Tralee	Co. Kerry	066 71 27200	97090	Yes	Yes
David	Clancy	Torc View Dental Practice	Park Rd, Killarney	Co. Kerry	064 6626999	97590	Yes	Yes
Linda	Corkery-Johnson	Upper Main St.,	Dingle	Co. Kerry	066 9152333	97217	Yes	No
Claire	Foley	5 Mill Road	Killorglin	Co. Kerry	669790400	97348	Yes	Yes
Declan	Fuller	Silverton, St Anne's Road	Killarney	Co. Kerry	064 6632995	97247	Yes	Yes
Katie	Gleeson	4 St Anthonys Place	Killarney	Co. Kerry	064 6632016	97560	Yes	Yes
Susan	Gleeson	4 St Anthonys Place	Killarney	Co. Kerry	064 6632016	97574	Yes	Yes
Gerard	Hill	Ashe St.,, Clinic	Ashe St. Tralee	Co. Kerry	066 7125611	97209	Yes	Yes
Anne	Kelly	Park Road	Killarney	Co. Kerry	064 6631350	97642	Yes	Yes
Bryan	Long	Upper Main St.,	Dingle	Co. Kerry	066 9151527	97210	Yes	No
Timothy	Lynch	Langford St.,	Killorglin	Co. Kerry	066 9761831	97266	Yes	Yes
Maurice	Lyons	Bridge St.,	Abbeyfeale	Co. Limerick	068 31293	93259	Yes	Yes
Alanna	Maharaj	Ardfert Medical Centre	Ardfert	Co. Kerry	066 7115820	97494	Yes	Yes
Richard	O'Brien	Bridge St.,	Abbeyfeale	Co. Limerick	068 31293	93307	Yes	Yes
Catherine	O'Connor	Langford St.,	Killorglin	Co. Kerry	066 9761831	97706	Yes	Yes
Juliet	O'Connor	Bridge St.,	Abbeyfeale	Co. Limerick	068 31293	93267	Yes	Yes
John	O'Flynn	Main St.,	Abbeyfeale	Co. Limerick	068 32077	97049	Yes	No
Aisling	O'Sullivan	5 Mill Road	Killorglin	Co. Kerry	669790400	97346	Yes	Yes
Thomas	Twomey	34 Ashe St.,	Tralee	Co. Kerry	066 7120229	97263	Yes	Yes

Motion 6(e) on Agenda refers:

“Asking the HSE to reconsider plans to restrict access to the Home Birth Service to people living within 30 minutes of the nearest Maternity Hospital. This would mean most rural families in West Cork and Kerry would be disqualified from having home births.”

Cllr Caroline Cronin

The HSE Homebirth Service is delivered by Self Employed Community Midwives (SECMs) in accordance with a range of clinical guidelines and within scope of practice and compliance requirements as provided by the HSE. One of the criteria which has long been identified by the HSE as requiring consideration as part of assessing a woman’s suitability for the HSE Homebirth Service is the distance of the woman from the nearest maternity unit.

The HSE Home Birth Service is now being integrated into maternity services in Ireland in line with the objectives of the National Maternity Strategy. As part of this process, a requirement for more specific guidance at national level regarding the appropriate distance a woman should live from the relevant maternity hospital was identified.

In undertaking this exercise, a range of issues and factors were taken into account by the HSE including:

- Transfers rates into maternity units of mothers who commenced labouring at home in the National Homebirth Service 22% of women are transferred to hospital during labour, with such transfers predominantly being required for first time mothers (NPEC – ‘Planned Homebirths in Ireland triennial report 2018-2020’).
- the primary reasons why women were transferred including those cases where the need for transfer related to the immediate and urgent care needs of the baby as distinct from the woman;
- the method of transfer,
- the need to factor in ambulance response times i.e. the time taken by an ambulance to reach the home of a woman further to a call for assistance being made by the relevant SECM,
- the need to factor in time needed by ambulance personnel to assess the woman and transfer the woman into the ambulance and
- response times by maternity services further to arrival of the woman in the ambulance at the relevant maternity service, particularly in cases where emergency theatre access may be identified as required and such has to be secured in busy theatre complexes.

Further to this consideration, it has been identified that all women accessing the National HSE Homebirth Service would reside 30 minutes or less blue light distance from their nearest maternity service. It is important to note that this time relates to the time taken for the ambulance to reach the nearest maternity unit with its siren on.

In identifying this distance, the HSE is aware that there is a balance of risk to be considered. If a woman has an emergency in a maternity hospital, and an emergency caesarean section is called for, the woman must get to theatre within 30 minutes.

Other solutions are being considered to facilitate homebirths for women who are currently beyond the 30 minute time frame.

In the event of a serious risk to a mother or a baby either prior to birth or after birth in the HSE's Home Birth Service being identified by the relevant SECM, this recommendation is designed both to a) ensure the best possible chance of getting to a maternity hospital in a timely manner so as to support the best outcome for the mother and/or baby and b) to ensure that the clinical determination of the SECM to escalate and request clinical assistance is acted upon in a safe and timely manner by the wider HSE services including ambulance and local maternity services.

Whilst the Home Birth Service is small relative to the overall birthing numbers in Ireland the HSE and its National Women and Infants Health Programme recognise that it is an important pathway for women. The objectives of the HSE regarding the HSE Homebirth Service is both to enable women a choice of care pathway whilst at all times providing a service that is safe for both mothers and their babies in line with the objectives of the National Maternity Strategy.

Kilian McGrane
National Women & Infants Health Programme
Health Service Executive

Motion 6(f) on Agenda refers:

"That HSE give a report as to the winter plan is progressing in the South East and how many extra home help hours will be introduced and what plans are being introduced as regards hiring more care workers"

Cllr Richie Molloy

The HSE has developed a comprehensive integrated Winter Plan 2022/2023 to support acute and community services this winter to respond to anticipated high levels of emergency attendances and admissions across the acute sector, long waiting times in Emergency Departments (EDs) and high occupancy rates across acute hospital settings.

Four key priorities have been identified to address the aims of the Winter Plan 2022/2023 with initiatives accordingly at national and local level in line with the following priorities:

- Deliver additional capacity in acute & community services
- Improve pathways of care for patients: implement alternative patient pathways during the winter period to support admission avoidance, patient flow and discharge, including Enhanced Community Care (ECC) supports;
- Vaccination programme roll out for Flu and COVID-19: deliver an influenza vaccination programme, COVID-19 vaccination programme and increase awareness and uptake for these respective programmes; and

- Implement Pandemic Preparedness Plan: implement the Public Health Plan which includes the development of a surge and emergency response plan, in the event of a significant surge in COVID-19 infections.

A critical component of the Winter Plan is the continued roll-out the Enhanced Community Care (ECC) Programme across the country. The ECC programme centres on enhancing and increasing community health services and reducing pressure on hospital services. This means more services closer to where people live; with a particular focus on older people and people with chronic disease. The implementation of ECC in the South East includes the following:

- Establishment of 11 Community Health Networks (CHN) across the South East
- Development of new Community Specialist teams encapsulating
 - Integrated Care Programme for Older People (4 across the South East) and
 - Chronic Disease Management (4 across the South East)
- Expansion of Community Intervention Teams
- Increased GP access to diagnostics
- Development of Home First Team
- Development of Integrated Care and Pathways - GPs - Community Care - Hospitals
- Healthy Ireland Initiatives

Community Intervention Teams (CIT) are specialist health professional teams that provide rapid and integrated responses that facilitate a patients' care in the community or home setting. The purpose of the service is to prevent unnecessary hospital admission or attendance, and to facilitate/enable early discharge of patients from the acute setting that are appropriate for CIT care. The CIT, through its fast-tracked provision of services enhances the overall primary care system, and may provide access to nursing and home care support.

There are 4 Community Intervention Teams in operation across the South East: Carlow/Kilkenny, Waterford, South Tipperary and Wexford. The CIT Wexford commenced on 17th February 2021 which completed the rollout of CIT services across the South East. The Wexford CIT represents a "blended model" involving Occupational Therapy, Physiotherapy and Nursing inputs. This approach in Wexford is aimed at facilitating a higher volume of patient referral types and numbers for both early supported hospital discharge and hospital avoidance.

The HSE Winter Plan 2022/2023 provides for some additional funding to further develop the work of Community Intervention Teams to promote early discharge from hospital. This is a key element of integrated hospital and community services and supporting patient flow. Additional funding has been received to enhance care provided for service users under 65 years with the focus on Early Discharge and Hospital Avoidance.

In addition the South East Community Healthcare are continuing the provision of community diagnostics services for General Practitioners - this initiative is key to supporting acute hospitals and enhancing community care.

South East Community Healthcare Vaccination Programme is being progressed to eligible cohorts for both Covid-19 Vaccinations and the Flu Vaccine.

Home Support Hours Home Support Hours are important for long term care avoidance, waiting list reduction and re-ablement and supporting older people to remain at home. Whilst Older Persons South East Community Healthcare have not

been identified for a specific allocation regarding the Winter Plan 2022/23, there is continued commitment is to delivering Home Support hours to individuals within CHO5/SECH. As of 30th September 2022, 1.54 million Home Support episodes of care had been delivered across the Counties of Waterford/Wexford/South Tipperary/Carlow/Kilkenny. Older Persons Services continues to support the egress from Acute Hospitals as a priority.

The allocation of hours will continue to be monitored throughout the course of the winter period and will be an important part of the health service response to winter pressures. Services for Older People will continue to support the delivery of home support hours through the recruitment and retention of staff.

A rolling recruitment campaign has been ongoing throughout 2022 with the more recent interviews held on the 16th, 21st and 28th November 2022. A further advertisement is scheduled for December 2022 with interviews planned for early 2023. There is a commitment to continue rolling recruitment across 2023 in conjunction with a media campaign across all social media platforms.

To date in the region of 60 successful candidates are in post with a further commencement of staff in Quarter 1 2023 who interviewed in 2022. The uplift of new recruits always needs to be balanced with a percentage of staff who resign or retire across any 12 month period.

In conjunction with HSE Human Resources Department, Older Persons services have reviewed the eligibility criteria for Health Care Support Workers in order to increase the number of candidates who are eligible for shortlisting. These candidates will be facilitates to complete outstanding modules of the QQI Level 5 during their first year of employment.

The current contract on offer to Health Care Support Assistant staff of 28 hours per week has been increased from 28 to 32 hours with consideration for a further increase to 36 hours.

In addition across the South East, Services for Older People short stay and respite services will continue to be optimised this winter to support acute hospitals in reducing overall length of stay (LoS) for older people. Available capacity will also be utilised to facilitate Integrated Care Programme for Older Persons (ICPOP) teams to deliver admission avoidance initiatives.

Kate Killeen White
Chief Officer
South East Community Healthcare

QUESTIONS

Question 7(a) on Agenda refers:

“How soon can we see the Cahersiveen Day Hospital returning to a minimum five day service from the three day service currently in operation?”

Cllr Norma Moriarty

At present, Cahersiveen Day Hospital is open on Mondays, Wednesdays and Fridays. All clinics are currently operational in the day centre and provide services including Surgical, Dietetics, Retinopathy Screening, Radiology, Physiotherapy, Public Health, Diabetic and Eye clinics. 24 hr blood pressure monitoring and Holter monitor testing are due to resume shortly following software upgrades and compatibility checks.

Additional staff have been recruited and, following successful completion of induction training, it is anticipated that the day hospital will be in a position to extend services to five days, subject to demand, over the coming 6-8 weeks.

Michael Fitzgerald
Chief Officer
Cork Kerry Community Healthcare

Question 7(b) on Agenda refers:

“That the HSE would outline plans to provide upgraded/new inpatient facilities for the Mental Health Services in St Stephen’s Hospital.”

Cllr Eileen Lynch

I have been informed quiet recently that the development of a Continuing Care and Rehabilitation Mental Health Unit on the grounds of the St. Stephen’s Health Campus in Glanmire has been included in the HSE’s 2022 Capital Programme.

A full Capital Submission for this project is in the process of being prepared and will be submitted to the HSE’s National Capital & Property Committee in 2023 and the full capital allocation for this project will be determined upon the receipt of this submission. In the interim, initial funding has been provided to progress topographical and drainage site surveys for the proposed location of the new building. The final capital budget for the project will cover all the capital costs

associated with the project including construction costs, design fees, and other costs associated with the project.

You will be aware that St. Stephens Hospital in its current layout has significant infrastructural deficits and is not fully compliant with Mental Health Centre regulations. Cork Kerry Community Healthcare (CKCH) had also recognised that the majority of current approved mental health centres in Cork city and county are not bespoke buildings designed for the purpose of complying with regulations and struggle with compliance. Many are buildings which underwent refurbishment and reconfiguration to re-purpose them into mental health centres.

While awaiting the construction of the new Continuing Care and Rehabilitation Mental Health Unit, the service continues to address issues with the existing buildings in St Stephens. Over the last number of years, the service has invested in minor works improving the standard of the various units in areas such as ensuite bathrooms, lounges, common areas and flooring. It is the intention of the service to continue to seek funding to progress this work to ensure the comfort and safety of the patients \ residents of St. Stephen's pending the transfer of the service to the new centre which is now approved under the capital plan.

Michael Fitzgerald
Chief Officer
Cork Kerry Community Healthcare

MINUTES OF MEETINGS 2022

MINUTES
MEETING OF REGIONAL HEALTH FORUM SOUTH

Date: Thursday 24th of February 2022. **Time:** 2.00pm
Venue: The Oriel House Hotel, Ballincollig, Co Cork

Present:

Cllr Ann Marie Ahern
Cllr Audrey Buckley
Cllr Cathal Byrne
Cllr Peter Cleere
Cllr John Coonan
Cllr Michael Doran
Cllr Pat Dunphy
Cllr Pat Fitzgerald
Cllr Damien Geoghegan
Cllr Pat Hayes
Cllr Niall Kelleher
Cllr Roger Kennedy

Cllr Donal Kenny
Cllr Garry Laffan
Cllr Mary Lenihan Foley
Cllr Eileen Lynch
Cllr Michael McCarthy
Cllr Arthur McDonald
Cllr Conor McGuinness
Cllr Richie Molloy
Cllr Norma Moriarty
Cllr John O'Donoghue
Cllr Ted Tynan

Apologies:

Cllr Declan Burgess
Cllr Danny Collins
Cllr Davy Daniels
Cllr Susan McCarthy
Cllr John McDonald
Cllr Sean O'Donovan
Cllr John Sheehan
Cllr Mikey Sheehy
Cllr James Tobin

In Attendance:

Mr Gerry O'Dwyer, Chief Executive Officer, South/South West Hospitals Group
Mr Jackie Daly, A/Chief Officer, Cork Kerry Community Healthcare
Ms Kate Killeen White, Chief Officer, South East Community Healthcare
Ms Tracy Nugent, HSE Resource Officer for Suicide Prevention
Mr Martin Ryan, HSE Resource Officer for Suicide Prevention
Mr Nicky Glynn, Chief Ambulance Officer, NAS
Regional Health Forum Office Staff

Cllr Eileen Lynch, Vice Chairperson gave apologies for Cllr Declan Burgress who could not attend the meeting and was chairing the meeting in his absence.

1. Adoption of the Minutes of the previous Meeting held on Thursday 2nd of December 2021.

On the proposal of Cllr Roger Kennedy, seconded by Cllr Arthur McDonald, the minutes of the Forum meeting held on Thursday, 2nd of December 2022 were approved and adopted by the members.

Welcome to new Members - Cllr Michael Doran has replaced Cllr Brian O'Donoghue, Carlow County Council and Cllr Cathal Byrne has replaced Cllr Frank Staples, Wexford County Council.

2. Chairperson's Correspondence

There was no correspondence.

Covid Update

A brief update was provided from HSE Management on COVID-19. Mr Gerry O'Dwyer, Chief Executive Officer, South /South West Hospital Group outlined to Members how the current surge of Covid is continuing to have a significant impact on hospital staffing levels with associated service pressures. Mr O'Dwyer informed Members of how the Hospital Group continues to adapt and how the system responds to cope with the pandemic challenges presenting.

Ms Killeen White, Chief Officer, South East Community Healthcare and Ms Jackie Daly, A/Chief Officer, Cork Kerry Community Healthcare provided Members with updates from their respective Community Service areas. They also outlined the serious impact on staffing levels in community services. Both Managers provided brief updates on Covid outbreaks across community residential services as well as the vaccination/booster programme and future plans for testing.

Whilst *Covid-19* has disrupted and altered the way health care is delivered, Ms Killeen White commended our staff for their resilience, dedication and commitment.

3. Committees

The next Committee meetings will be held on:

- South East Committee Meeting held on 1st of March 2022
- South West Committee Meeting held on 3rd of March 2022

4. Suicide Resource Officers Presentation

Ms Tracy Nugent HSE Resource Officer for Suicide Prevention South East Community Healthcare (CHO5) and her Cork Kerry Healthcare CHO4 counterpart Mr Martin Ryan gave a very informative presentation on their roles and work programmes. HSE

Resource Officers for Suicide Prevention (ROSPs) work across a range of Community Health Services, Community Health Organisations (CHOs) and areas nationwide. The Suicide Resources Officers are the leads for the development and implementation of 'Connecting for Life', Ireland's National Strategy to Reduce Suicide at regional and county levels. They offer a range of training programmes to raise public awareness; to train people to identify those at risk and to connect them to suicide First Aid resources; and to equip participants with skills to intervene and support people at risk. Training is also available in relation to understanding and addressing self-harm and in supporting people who are bereaved through suicide. The presentation outlined the work ongoing in different groups and settings in our communities. There followed a question and answer session along with an invitation and encouragement by Ms Nugent for Members to undertake Suicide Awareness and Prevention training.

5. Notices of Motion

(a) Cllr John Coonan moved the following Motion, standing in his name:

"In light of the unacceptable sub- standard and a serious deficit of CAMHS services in South Kerry, that an urgent report on the delivery of CAMHS, county by county be outlined to the Forum."

A written response from Ms Kate Killeen White, Chief Officer, South East Community Healthcare and Mr Michael Fitzgerald, Chief Officer, South East Community Healthcare was circulated to members and noted.

Cllr Coonan thanked Management for the written response. He stated that there should be a national focus on children and that prevention, early detection and support services for children should be prioritised. Full staffing (and funding) of CAMHS teams should also be prioritised. Service/team deficits give rise to people speaking negatively about CAMHS. Lengthy waiting lists for services are distressing for the children and their families. Cllr Coonan cited concerns in relation to barriers to service provision including inappropriate referrals to CAMHS services by General Practitioners given ongoing issues in accessing primary care psychology services.

In response Kate Killeen White, Chief Officer, acknowledged the importance of an overall national focus on children and outlined the paediatric model of care which seeks to develop a spectrum of integrated services for children. Adequate resourcing and the availability of necessary skills and training, multi-disciplinary teams as appropriate are essential for the development of children's services. Across the country there are significant recruitment and retention challenges throughout Primary Care, Disability Services and CAMHS. The HSE continues efforts to source and recruit suitably qualified medical, nursing and *allied health professional* staff into CAMHS services. Ms Killeen White also outlined that the complex nature of referrals and presentations to CAMHS services. The HSE is committed to ensuring all aspects of CAMHS services are delivered in a consistent, timely and safe manner, including improved access and reducing waiting lists.

With regard to the South Kerry CAMHS review, Ms Jackie Daly, A/Chief Officer, informed Members that the HSE is in communication with the families and young people impacted by the Maskey Review Report and will continue to offer our support. An oversight structure is being established to ensure delivery of a comprehensive

plan for implementing all of the 35 recommendations contained in Maskey Review Report. A helpline has been established and counselling provided for those impacted by the Review.

Ms Daly, in response to queries raised at this Forum, advised that HSE/Cork Kerry Community Healthcare would follow up directly on any related individual communication issues raised.

(b) Cllr Richie Molloy moved the following Motion, standing in his name:

“Regarding the ongoing issues of recruiting and retaining home care workers in the Non-Government Organisation (NGO) sector in the South East, will the HSE consider giving money towards mileage for section 39 Home Care Workers.”

A written response from Ms Kate Killeen White, Chief Officer, South East Community Healthcare was circulated to members and noted.

Cllr Molloy thanked Ms Killeen White for her written response. He highlighted the serious issues in relation to the recruitment and retention of Care staff. The grant funding received does not cover increasing transport mileage costs which is a significant difficulty for carer providers. Many of these care staff work in rural areas. This matter is impacting on the ability to recruit and retain care staff which then creates risks and challenges in delivering care services and supports to support vulnerable people in their own homes. Ms Killeen White acknowledged the hugely important contribution of NGOs/Section 39 agencies in the provision of these services in local communities.

(c) Cllr Mary Lenihan Foley moved the following Motion, standing in her name:

“That this Forum will progress policy regarding our retained fire service members, that they be able to assist the National Ambulance Services as first responders and to be deployed in cardiac arrest calls to help alleviate the pressures on the NAS. That sufficient adequate training be provided to firefighters so as they can safely provide this service. And that permission be sought from the HSE National Ambulance service to be able to assist them and provide this service, and that immediate engagement commence to allow this service to be up and running as soon as possible”.

A written response from Mr Nicky Glynn, Operations Officer Chief Officer, National Ambulance Service was circulated to members and noted.

Cllr. Lenihan Foley thanked the National Ambulance Services for the written reply and stated that she was satisfied with same. Mr Glynn provided some supplementary information from a national perspective to Cllr Lenihan Foley in addition to the written response.

(d) Cllr Conor McGuinness moved the following Motion, standing in his name:

“That the HSE would ensure the drug Cariban for the treatment of Hyperemesis Gravidarum and pregnancy sickness would be available as required by pregnant women attending both in-patient and out-patient maternity services. At present only

a number of hospitals offer this medication to pregnant women attending in-patient services. Those not able to avail of these services must purchase the medication themselves at significant cost. Pregnancy Sickness is a very serious condition and should be considered as such”.

A written response from Ms Tess O’Donovan, Interim Chief Operations Officer, South/South West Hospital Group was circulated to members and noted.

Cllr McGuinness thanked Management for this response. He highlighted Cariban is a pregnancy related medication is currently not reimbursable under GMS and Community Drug Schemes. The cost of this medication (which helps prevent extreme nausea and vomiting during pregnancy) is impacting on the health of pregnant women. Cllr McGuinness wanted to understand the basis for which Cariban is provided to women in certain hospital settings. Mr Gerry O’Dwyer advised Cllr McGuinness that he would review this matter within the South/South West Hospital Group and revert to him directly.

(e) Cllr Norma Moriarty moved the following Motion, standing in Cllr Mikey Sheehy’s name:

“That this Forum is provided with an update on the recruitment process for extra nurses at West Kerry Community Hospital so that the closed ward can be opened for West Kerry patients.”

A written response from Mr Michael Fitzgerald, Chief Officer, Cork Kerry Community Healthcare was circulated to members and noted.

(f) Cllr Eileen Ryan moved the following Motion, standing in her name:

“Can the HSE please outline whether there are any plans to develop the old Health Centre building which forms part of the Macroom Community Hospital grounds and had previously been ear-marked as a potential Day Care Centre for the elderly.”

A written response from Mr Michael Fitzgerald, Chief Officer, Cork Kerry Community Healthcare was circulated to members and noted.

Cllr Lynch welcomed the reply which outlined the major refurbishment works (extension and upgrade) which will bring Macroom Community Hospital into line with HIQA regulations. Ms Jackie Daly, A/Chief Officer, responded to additional queries regarding the tender stage process and the expected timescale for the phased completion of the community hospital refurbishment programme in 2023.

6. Questions

(a) Cllr. John Coonan put forward the following question:

“That a review of the structures and functioning of the Communications Dept. of South East Community Healthcare be presented to our Forum.”

A written response from Ms Kate Killeen White, Chief Officer, South East Community Healthcare was circulated to members and noted.

Cllr Coonan thanked Management for this reply. Cllr Coonan informed the Meeting that whilst he submitted this question, however, his intent was actually more in relation to keeping local elected representatives informed when issues such as the South Kerry CAMHS case arose. Cllr Coonan stated that there was a resulting impact of matters such as this case on other CAMHS Services in different HSE areas. Elected representatives have an important role in informing and reassuring the public and local communities in such times.

Ms Killeen White in response acknowledged this and also the ongoing support from our Regional Health Forum Members and other elected representatives and particularly throughout the Covid-19 Pandemic. Ms Killeen White advised that SECH had provided written updates to Regional Health Forum South East Members on Covid-19 and previously arranged engagements with local elected representatives on particular local health service matters. In addition the HSE/SECH has re-commenced engagements with Oireachtas Members.

Ms Killeen White also advised Members that HSE/SECH continues to respond to political representations directly received from elected representatives and County Councils and also requests received the HSE National Parliamentary Affairs Division.

Ms Killeen White welcomed the inputs from Cllr Coonan and advised the SECH would undertake to consider how best we can *improve communication with our key stakeholders*.

(b) Cllr. Patrick Dunphy put forward the following question:

“What is the current status in the South East of providing Home Care for those who have been approved for it.”

A written response from Ms Kate Killeen White, Chief Officer, South East Community Healthcare was circulated to members and noted.

Cllr Dunphy thanked Ms Killeen White for the written reply. He asked how this issue might be resolved. Ms Killeen White stated that South East Community Healthcare is acutely aware that there are staffing capacity issues across both direct and indirect provision of Home Support. We continue to advertise on an on-going basis for healthcare assistants and to recruit as many suitable candidates as possible. There is a need to look at attracting people into the home support sector and also how we might best manage more complex cases presenting to our services. This issue requires a cross-department integrated approach. Work is ongoing at a national level in relation to Home Support Services which will inform local service areas and improvement plans. Ms Killeen White advised Members that further information would also be presented by the SECH Head of Services for Older People at the upcoming South East Committee meeting.

(c) Cllr. Mary Lenihan Foley put forward the following question:

"That this Forum like others throughout the Country would back the proposed NAS/Fire Service Co-Responder Scheme roll out across the County to assist the ambulance service to respond to 999 emergency calls as quickly as possible."

A written response from Mr Nicky Glynn, Operations Officer Chief Officer, National Ambulance Service was circulated to members and noted. Cllr. Lenihan Foley thanked the National Ambulance Services for the written reply and stated that she was satisfied with same.

(d) Cllr Arthur McDonald put forward the following question standing in the name of Cllr John McDonald:

"The Tullow Primary Care Centre was to have started in 2020. Nothing has happened regarding this build. Where are we on the plans for Tullow Primary Centre. Is it on the agenda of the HSE for construction. Has there been contact with Carlow County Council regarding pre planning for the building."

A written response from Ms Kate Killeen White, Chief Officer, South East Community Healthcare was circulated to members and noted.

(e) Cllr Conor McGuinness put forward the following question:

"To ask the total quantum of additional ICU capacity added to the South/South West Hospital Group/Ireland East Hospital Group from March 2020 to present"

A written response from Ms Tess O'Donovan, Interim Chief Operations Officer, South/South West Hospital Group was circulated to members and noted.

(f) Cllr Norma Moriarty put forward the following question standing in the name of Cllr Mikey Sheehy:

"Can the SSWHG confirm which of the following elective work is restored fully in UHK - ENT, Gynaecology, Orthopaedics and Surgery and what are the plans to expand theatre space in the immediate future/short term in order to ensure all consultants are appropriately resourced to alleviate waiting lists and avoid undue usage of NTPF."

A written response from Ms Tess O'Donovan, Interim Chief Operations Officer, South/South West Hospital Group was circulated to members and noted.

(g) Cllr Eileen Lynch put forward the following question:

"In relation to the recent restructure of community based drug and alcohol services in Cork and Kerry, can the HSE please outline the number of staff allocated to the new "Hub and Spoke" model in comparison with the previous community model, including their locations, and the extent of services to be provided to communities outside of the six core hubs."

A written response from Mr Michael Fitzgerald, Chief Officer, Cork Kerry Community Healthcare was circulated to members and noted. Cllr Lynch thanked Management for the written reply and noted the contents of this response. Cllr Lynch asked whether there was a reduction in relation to the Community Drug Worker service provision in the Macroom area i.e. from 5 day provision to 1 day provision and expressed her concerns on this. Ms Jackie Daly, A/Chief Officer, advised that drug service provision is being developed and provided in accordance with service need and demands. The development of services was informed by the recommendations of the Murtagh Report. Ms Daly stated that she would revert to Cllr Lynch in regard to her queries on the timeline for the expansion of the service and on any plans for a review of the Hub & Spoke approach in 12-18 months.

7. Date and Time of next meeting – 24th of March 2022 at 2pm. Venue: The Oriel House Hotel, Ballincollig, Co Cork.

Members advised that they had a previously scheduled national AIG Conference on 24th March and therefore it was agreed that the Regional Health Forum Office would reschedule the proposed RHF March meeting and that notice would issue to Members in due course.

MINUTES
MEETING OF REGIONAL HEALTH FORUM SOUTH

Thursday, 19th of May 2022 at 2pm
Venue: Council Chambers, County Hall, Victoria Cross, Cork

Present:

Cllr Audrey Buckley*
Cllr Cathal Byrne
Cllr Peter Cleere
Cllr Declan Clune
Cllr John Coonan
Cllr Caroline Cronin*
Cllr Michael Doran*
Cllr Pat Dunphy
Cllr Michael Foley
Cllr Roger Kennedy
Cllr Donal Kenny
Cllr Garry Laffan
Cllr Mary Lenihan Foley

Cllr Eileen Lynch
Cllr Michael McCarthy
Cllr Susan McCarthy*
Cllr Arthur McDonald
Cllr Conor McGuinness
Cllr Norma Moriarty*
Cllr John O'Donoghue*
Cllr Sean O'Donovan
Cllr Jody Power
Cllr John Sheehan*
Cllr Mikey Sheehy*
Cllr James Tobin*

*attended online

Apologies:

Cllr Declan Burgess
Cllr Mark Fitzgerald
Cllr Pat Hayes
Cllr Richie Molloy

In Attendance:

Mr Gerry O'Dwyer, Chief Executive Officer, South/South West Hospitals Group
Mr Michael Fitzgerald, Chief Officer, Cork Kerry Community Healthcare
Ms Kate Killeen White, Chief Officer, South East Community Healthcare
Dr Arthur Jackson, Consultant Physician, Cork University Hospital
Members of the HSE South Forum Office staff

Cllr. Eileen Lynch welcomed everyone to the Regional Health Forum Meeting, and gave apologies on behalf of the Chairperson, Cllr Declan Burgess.

Prior to the start of the meeting, Cllr Lynch welcomed a new member Cllr Caroline Cronin, Cork County Council replacing Cllr Katie Murphy and Cllr Declan Clune,

Waterford County Council replacing Cllr Davy Daniels. In addition there have been a number of new members over recent months already welcomed to the Forum but Cllr Lynch again welcomed Cllr Michael Doran, Carlow County Council, Cllr Cathal Byrne, Wexford County Council and Cllr Michael Foley, Kerry County Council.

Cllr Lynch also advised Members of a new date in the diary at the request of Members:

- The Regional Health Forum Meeting to be held on the 24th March will take place on **2nd June 2022**.

1. Adoption of the Minutes of the previous Meeting held on Thursday 24th of February 2022.

On the proposal of Cllr Roger Kennedy seconded by Cllr Mary Lenihan Foley, the minutes of the Forum meeting held on Thursday, 24th of February 2022 were approved and adopted by the members.

2. Chairperson's Correspondence
3. The next Committee Meetings will take place on:
 - South East Committee Meeting held on 18th of October 2022
 - South West Committee Meeting held on 20th of October 2022
4. Presentation on Long Covid to be given by Dr Arthur Jackson, Consultant Physician, Cork University Hospital.

Following the presentation, there were a number of questions from Members who requested that Dr Jackson return at a later date to provide an update this work.

5. Notices of Motion

(a) Cllr Eileen Lynch moved the following Motion, standing the name of Cllr Declan Burgess:

"That the HSE outlines the progress, if any, on the proposed new residential unit at Saint Patrick's Hospital, Cashel and the planning of this development."

A written response from Ms Kate Killeen White, Chief Officer, South East Community Healthcare was circulated to Members and noted. Ms Killeen White in response to a query from Cllr Kennedy stated that whilst this project remains listed on the capital plan and given the safe relocation of residential services to OLC, the project is not being prioritised for progression presently. Ms. Kate Killeen White outlined that there are competing projects such as Enhanced Community Care and Disability Services which require to be prioritised presently.

(b) Cllr Sean O'Donovan moved the following Motion, standing in his name:

"That this Forum supports the Bandon Family Resource Centre (BFRC) in their request for being accommodated in the recently vacated Watergate centre (mental health resource centre) as their current accommodation is not fit for purpose and no suitable premises has been identified after a 12-month search."

A written response from Mr Michael Fitzgerald, Chief Officer, HSE Cork Kerry Community Healthcare was circulated to members and noted. Cllr. O'Donovan acknowledged the written reply, however, he outlined the critical role of the Family Resource Centre and reiterated the need for new accommodation. Mr. Fitzgerald responded advising that whilst HSE Cork Kerry Healthcare has its own accommodation challenges and therefore in the first instance needs to prioritise our own services. Nonetheless Mr Fitzgerald also stated that Cork Kerry Community Healthcare would remain supportive of Bandon Family Resource Centre and if the position changes, the HSE would assist them if at all possible. Both Cllr Lenihan-Foley and Cllr Susan McCarthy supported this Motion.

(c) Cllr Michael Foley moved the following Motion, standing in his name:

"That the HSE provide more respite beds for the catchment area of North Kerry."

A written response from Mr Michael Fitzgerald, Chief Officer, Cork Kerry Community Healthcare was circulated to members and noted.

Cllr Foley thanked Mr Fitzgerald for the comprehensive reply and clarified that his query related particularly to the availability of respite places for North Kerry patients with Alzheimer's who at times need to travel out of county for centre based respite. Cllr. Foley suggested that the HSE Cork Kerry Healthcare might purchase a former private Nursing Home in the locality for use as a respite facility. Mr. Michael Fitzgerald thanked the Cllr for providing clarification on this query. He advised that understandably demand for centre-based respite services very much reduced during the pandemic, but noted that requests are once again increasing. Mr Fitzgerald stated that ongoing renovation work in Community Hospitals has impacted on overall bed numbers including respite. As these beds come back on-stream, HSE Cork Kerry Healthcare will consider use and demand for same. Mr. Fitzgerald confirmed that there are no plans to purchase the former Nursing Home as referenced by Cllr Foley.

(d) Cllr Mikey Sheehy moved the following Motion, standing in his name:

"That this Forum supports my call to support those persons and their families who are struggling with eating disorders in every way possible including the expansion of services to allow for clearer pathways to enter the HSE service and to access services once under the care of the HSE on an I going basis."

A written response from Mr Michael Fitzgerald, Chief Officer, Cork Kerry Community Healthcare was circulated to members and noted.

Cllr. Sheehy welcomed the written reply which he advised originated following a meeting in Tralee with advocated on Eating Disorders and particularly cited barriers

for families and individuals in accessing services. Mr Fitzgerald stated that he was pleased to advise that there has been an expansion of service provision with increased resources received over the last number of years. He also explained that staffing levels are recommended through the national clinical programme and are also based on population numbers Mr. Fitzgerald did state that not all the approved posts have been filled given the ongoing recruitment challenges which are being experienced in all areas. This is a complex area with increasing demand for services. Inpatient specialist services which are part of the overall patient journey can be accessed in locations across the country and work is ongoing nationally in relation to pathways of care.

(e) Cllr Cathal Byrne moved the following Motion, standing in his name:

“To ask the HSE how many GP positions are currently vacant in Co. Wexford and for how long they have been vacant.”

This was taken with question 6(d) below also submitted by Cllr Byrne.

6. Questions

(a) Cllr. Eileen Lynch put forward the following question in the name of Cllr Declan Burgess:

“Can HSE management brief the meeting on the replacement process of a Doctor at the Minor Injuries Unit at Our Lady’s Hospital Cashel. Please advise on the situation that left this service fall short with the necessary staffing levels that led to the closure and how long this service will be closed.”

A written response from Ms Kate Killeen White, Chief Officer, South East Community Healthcare was circulated to members and noted.

Cllr Roger Kennedy thanked Ms Killeen for work undertaken to prioritise medical replacement cover particularly given the situation which arose with little notice. Ms Killeen White outlined that there are continuing challenges in sourcing medical cover. However the HSE South East Community Healthcare is committed to continuing to actively work to source and provide medical cover to facilitate the ongoing operation of the Cashel Minor Injuries Unit.

(b) Cllr. Mikey Sheehy put forward the following question:

“What is the process followed by the HSE to hire overseas consultant doctors as consultants in Ireland considering their previous experience and with consideration to licensing requirements from the Irish Medical Council. This being at a time when there is a severe shortage of this highly qualified cohort of medical professionals in Ireland.”

A written response from Ms Eithne Fox, Assistant National Director of HR, HR Shared Services, National HR, was circulated to members and noted.

Cllr Sheehy in response to the written reply highlighted his concern for Consultants from overseas who may at times need to take a step back before full Consultant status is awarded to them in Ireland. This is of particular concern giving the challenges in recruitment and retention of medical staff. Mr Gerry O'Dwyer Chief Executive Officer South/South East Hospital Group advised Members that every effort is made locally to ensure that when someone is recommended by the Public Appointment Commission to ensure that the process is fair and transparent for the person taking up an appointment. Mr O'Dwyer also advised that any successful candidates who is recommended through the PAS cannot take up post unless they are fully registered and Garda vetted. Mr O'Dwyer advised Cllr Sheehy if there were any particular individual concerns he wanted to discuss they could do so offline.

(c) Cllr. John Coonan put forward the following question:

"What is the up to date position of HSE regarding the provision of public information for early detection, diagnosis and treatment of Lyme Disease."

A written response from Dr Anne Sheehan, Director of Public Health, HSE South, was circulated to members and noted.

Cllr Coonan thanked Management for this written reply and advised that he put forward this question as he knew a person in Kilkenny who has lived with Lyme Disease for a long time. In addition May is World Lyme Awareness month which reminds us to be vigilant and to spread awareness among the general public to save lives. Cllr Coonan cited the positive campaign undertaken by Kerry County Council regarding signage and Lyme awareness. Cllr Coonan also voiced his strong support for any collaborative work between the Local Authorities and the HSE to raise public awareness.

Ms Kate Killeen White also encouraged Members to access the useful information on the HSE website. She also outlined to Members that there is strong integration and collaborative working ongoing between HSE South East Community Healthcare and the five Local Authorities across the South East. Ms Killeen White also advised Cllr Coonan that she would raise this matter with the Health & Wellbeing Unit within the South East.

(d) Cllr Cathal Byrne put forward the following question it was taken with Motion 4(e):

"To ask the HSE what % of GP positions in Co. Wexford are filled by people not on the specialist GP register."

And

(e) Cllr Cathal Byrne moved the following Motion, standing in his name:

"To ask the HSE how many GP positions are currently vacant in Co. Wexford and for how long they have been vacant."

A written response from Ms Kate Killeen White, Chief Officer, South East Community Healthcare was circulated to members and noted. Cllr Byrne stated he was satisfied with the response.

7. Date and Time of next meeting – 2nd June 2022 at 2pm. Venue: Council Chambers, Cork County Hall, Victoria, Co Cork.

MINUTES

MEETING OF REGIONAL HEALTH FORUM SOUTH

Thursday, 2nd of June 2022 at 2pm
Venue: Council Chambers, Cork County Council, Co Cork

Present:

Cllr Ann Marie Ahern*
Cllr Audrey Buckley*
Cllr Declan Burgess
Cllr Cathal Byrne
Cllr Peter Cleere
Cllr Declan Clune*
Cllr Caroline Cronin
Cllr Michael Doran*
Cllr Pat Dunphy*
Cllr Pat Fitzgerald
Cllr Michael Foley
Cllr Damien Geoghegan
Cllr Roger Kennedy

Cllr Donal Kenny
Cllr Garry Laffan
Cllr Mary Lenihan Foley*
Cllr Eileen Lynch
Cllr Michael McCarthy
Cllr Susan McCarthy*
Cllr Conor McGuinness
Cllr Norma Moriarty
Cllr John O'Donoghue*
Cllr Sean O'Donovan
Cllr Jody Power
Cllr John Sheehan*
Cllr James Tobin*

* attended online

Apologies:

Mr Michael Fitzgerald, Chief Officer, Cork Kerry Community Healthcare

In Attendance:

Mr Gerry O'Dwyer, Chief Executive Officer, South/South West Hospitals Group
Mr Gabrielle O'Keeffe, Head of Health, Wellbeing & Strategy, Cork Kerry Community Healthcare
Ms Kate Killeen White, Chief Officer, South East Community Healthcare
Members of the HSE South Forum Office staff

1. Adoption of the Minutes of the previous Meeting held on Thursday 19th May 2022.

On the proposal of Cllr Roger Kennedy and seconded by Cllr Michael McCarthy, the minutes of the Forum meeting held on Thursday, 19th May 2022 were approved and adopted by the members.

2. Chairperson's Correspondence

3. The next Committee Meetings will take place on:

- South East Committee Meeting held on 22nd July 2022 in Kilkenny
- South West Committee Meeting held on 20th October 2022 in Tralee

4. Notices of Motion

(a) Cllr Norma Moriarty moved the following Motion, standing in her name:

"That all possible be done to work with the National Ambulance Service, KCC and the Kerry Fire Service to site Ambulance Deployment vehicles in Killorglin and Sneem. This would ensure a much better coverage of our geographically challenging territory and result in far better response times."

A written response from Mr Nicky Glynn, Operations Officer Chief Officer, National Ambulance Service was circulated to members and noted. Cllr Moriarty acknowledged this reply. Cllr Moriarty outlined that it is important to take into account both the permanent population of the local area and the tourist population i.e. seasonal influx of people during peak holiday periods.

Mr. Gerry O'Dwyer Chief Executive Officer explained to Members that unfortunately it was not possible for Mr Glynn to attend the Forum Meeting due to prior engagement. Mr. O'Dwyer advised members that extra staff were being recruited across the HSE South region and that an advertisement will be put up on the website shortly to meet the demands of the ambulance service.

Mr. O'Dwyer duly acknowledged the integrated and timely response by relevant agencies including those who attended on the scene at a recent road incident involving a tourist bus in South Kerry.

(b) Cllr John O'Donoghue moved the following Motion, standing in his name:

"That the HSE would replace the bus/mini-van which recently fell into such a state of disrepair that it had to be disposed of, for Teach an Churaim Community Residence in Rathmore, County Kerry"

A written response Mr Michael Fitzgerald, Chief Officer, Cork Kerry Community Healthcare was circulated to members and noted. Cllr O'Donoghue thanked Management for the reply. He stated to Members how important this replacement

vehicle would be the residents and staff of Teach an Churaim. It is really important for people with mental health issues to be able to get out, make connections and be part of their community. In response Ms Gabrielle O’Keeffe fully agreed with Cllr O’Donoghue on the need for transport for that Centre. The replacement vehicle has been ordered – given ongoing international factors impacting supply and logistics, it is not possible at this time to confirm a specific date for delivery. Nonetheless this is a positive development.

(c) Cllr Mikey Sheehy moved the following Motion, standing in his name:

“Can this group confirm that all disciplines have now returned to a face to face pre Covid consultations at UHK and if not then which disciplines continue to provide virtual consultations?”

A written response from Mr Fearghal Grimes, General Manager, University Hospital Kerry was circulated to members and noted.

(d) Cllr Eileen Lynch moved the following Motion, standing in her name:

“Can the HSE please provide an update on post-covid visiting policy for relatives of patients in Cork hospitals and whether there will be any local or national changes to this in the short term.”

A written response from Mr Gerry O’Dwyer, Chief Executive Officer, South/South West Hospital Group was circulated to members and noted.

Cllr Lynch thanked HSE Management for the comprehensive written reply. She followed up with further queries; in relation to Cork University Hospital and whether there was a limit on who can visit and whether family only could visit South Infirmary Hospital. Mr. Gerry O’Dwyer in reply advised that Hospital Management always take a broad view on this issue. Generally speaking visiting is predominantly for close family members although in certain individual instances nominated extended family or friends can visit (particularly where the patient may not have any close family members nearby). Mr. O’Dwyer advised Members to contact him if they have having particular individual queries or concerns in relation to visiting. The Hospital Group is very cognisant of patients’ needs in this regard. As the South Infirmary Hospital is elective procedures, patients nominate their designated visitors beforehand.

(e) Cllr Arthur McDonald moved the following Motion, standing in his name:

“That the full medical treatment, supports required and costs involved to those suffering from Sleep Apnea be covered by Medical Care holders.”

This motion was deferred to the South East Committee Meeting.

5. Questions

(a) Cllr. Norma Moriarty put forward the following question:

"Can we please have an update on the primary care centre for Cahersiveen and some details on the range of services that will operate from that centre"

A written response Mr Michael Fitzgerald, Chief Officer, Cork Kerry Community Healthcare was circulated to members and noted.

Cllr Moriarty thanked Management for this reply. However she voiced her concerns and urged HSE Management to find funding to get this Primary Care Centre Services over the line in Caherciveen. The needs of the local population along with new community Members including a high number of displaced people from Ukraine requires this to be progressed in a timely manner.

Ms Gabrielle O'Keeffe in reply stated that whilst the HSE is committed to the Primary Care Centre in the Caherciveen area, however, the costs need to be commensurate with the cost of a standard Primary Care Centre. It is not possible to sign up to a cost rate outside the parameters of a standard Primary Care Centre. Ms O'Keeffe also stated that the Primary Care Team continues to develop in the area notwithstanding finalisation of the location of the Primary Care Centre.

Cllr. Moriarty concluded the discussion by reiterating that there is a need to secure funding for a Primary Care Centre in Caherciveen.

(b) Cllr. Mikey Sheehy put forward the following question:

"In the aftermath of the HSE cyber-attack that this Forum calls for a full review of the HSE IT system, including virtual patient data storage, in an effort to provide an IT system that is fit for a modern healthcare service."

A written response from Mr Fran Thompson, Chief Information Officer, eHealth HSE was circulated to members and noted.

(c) Cllr. Eileen Lynch put forward the following question:

"Can the HSE please provide an update on the current waiting list in Cork County for those approved for home help and either not receiving same or not receiving their full allocated hours and advise on the ongoing recruitment campaign in this area."

A written response Mr Michael Fitzgerald, Chief Officer, Cork Kerry Community Healthcare was circulated to members and noted.

Councillor Lynch thanked Management for this response and requested further clarification in relation to recruitment measures, breakdown of waiting lists i.e. new applicants approved and awaiting services and applicants in receipt of existing service or partial services approved for and awaiting additional service and the number of clients in receipt of full allocated hours in Cork.

Ms. Gabrielle O'Keeffe advised that she would follow up with relevant Head of Service and arrange for available information to be forwarded to Cllr. Lynch. Ms O'Keeffe also stated to Members that funding is not the main issue rather the availability of

home support staff that is impacting on service levels. There are particular staffing challenges in some areas which can result in gaps in terms of home support hours approved and the provision of services (additional or new) to individuals. Ms O’Keeffe confirmed that recruitment is ongoing for home support staff in the Cork Kerry area. Private Providers are also experiencing significant staffing difficulties.

(d) Cllr Declan Burgess put forward the following question

“To ask the HSE management how many GP positions are vacant in County Tipperary and please give a detailed breakdown of which areas are experiencing these vacancies.”

A written response from Ms Kate Killeen White, Chief Officer, South East Community Healthcare was circulated to members and noted.

Cllr. Burgess thanked Ms Killeen White for her response and outlined his concerns in relation to the level of GP shortages and what measures are being undertaken by the HSE to address this. Ms Killeen White stated that in the South East GP numbers are kept under continuous review. This is a national issue relating to supply and demand and it is acknowledged that there is a shortage of GPs in the speciality. It is particularly challenging in recruiting GPs into existing single-handed practices outside major urban areas. The HSE is working with ICGP to expand GP training places - however, GP training in Ireland is four years in duration - therefore whilst this may not be a ‘quick’ win, it is an essential step in the right direction.

Cllr Burgess also asked in relation to the level of services delivered by the Locum GPs as referenced in the written reply. Ms. Killeen White stated that it was her understanding that the Locum Doctors in Cahir and Cashel were full-time - however she would confirm this with South East Primary Care and arrange for a reply to issue directly to Cllr Burgess. Cllr. Burgess thanked Ms Killeen White for her response.

6. Date and Time of next meeting – 23rd June 2022 at 2pm. Venue: Council Chambers, Cork County Hall, Co Cork.

MINUTES
MEETING OF REGIONAL HEALTH FORUM SOUTH

Thursday, 23rd of June 2022 at 2pm
Venue: Council Chambers, Cork County Council, Co Cork

Present:

Cllr Audrey Buckley
Cllr Declan Burgess
Cllr Cathal Byrne
Cllr Peter Cleere
Cllr Caroline Cronin*
Cllr Michael Doran*
Cllr Pat Dunphy
Cllr Pat Fitzgerald
Cllr Michael Foley
Cllr Damien Geoghan
Cllr Pat Hayes
Cllr Roger Kennedy*
Cllr Donal Kenny

Cllr Garry Laffan
Cllr Mary Lenihan Foley*
Cllr Michael McCarthy
Cllr Susan McCarthy
Cllr Conor McGuinness
Cllr Norma Moriarty*
Cllr John O'Donoghue
Cllr Sean O'Donovan
Cllr John Sheehan*
Cllr James Tobin RIP

Apologies:

Cllr Declan Clune
Cllr Eileen Lynch
Cllr Richie Molloy
Cllr Jody Power

Ms Kate Killeen White, Chief Officer, South East Community Healthcare

In Attendance:

Ms Bridie O'Sullivan, Group Chief Director of Nursing, South/South West Hospitals Group
Mr Michael Fitzgerald, Chief Officer, Cork Kerry Community Healthcare
Ms Kate Cassidy, General Manager Covid Lead, South East Community Healthcare
Members of the HSE South Forum Office staff

1. Adoption of the Minutes of the previous Meeting held on Thursday 2nd of June 2022.

On the proposal of Cllr Pat Hayes, seconded by Cllr Peter Cleere, the minutes of the Forum meeting held on Thursday, 2nd of June 2022 were approved and adopted by the members.

2. Chairperson's Correspondence

Adoption of Annual Reports 2020 and 2021

On the proposal of Cllr Michael McCarthy, seconded by Cllr Pat Dunphy, the Annual Reports of 2020 and 2021 were adopted by the members.

3. Election of Chairperson

The Chairperson addressed the Members and welcomed everyone to the meeting. As outgoing Chairperson, Cllr Burgess thanked Members for their ongoing commitment and dedication in what has been a productive year. Cllr Burgess also acknowledged the significant inputs of HSE Management including Gerry O'Dwyer Chief Executive O S/SWHG, Michael Fitzgerald Chief Officer Cork Kerry Healthcare and Kate Killeen White Chief Officer South East Community Healthcare. Cllr Burgess also thanked Annette O'Connell for her efficiency and guidance. Cllr Burgess also gave his thanks to the Cllr Eileen Lynch Leas Cathaoirleach. Finally Cllr Burgess paid tribute to the frontline health care workers who have throughout the duration of the Covid-19 pandemic shown dedication, compassion and commitment in the face of significant challenges.

The Chairperson Cllr Declan Burgess sought nominations for position of Chairperson of the Regional Health Forum.

Cllr. Mikey Sheehy was proposed by Cllr. Arthur McDonald and seconded by Cllr. James Tobin. As there were no other nominations, Cllr. Mikey Sheehy was elected. Cllr Burgess congratulated Cllr Mikey and Cllr Sheehy took the Chair. A number of members also congratulated Cllr. Sheehy on his new position as Chairperson. On assuming the Chair, Cllr. Sheehy thanked his proposer, seconder and the members for electing him as Chairperson for the coming year. He thanked the former Chairperson for his work during his term.

3. Election of Vice Chairperson

The Cllr Mikey Sheehy looked for nominations for position of Vice Chairperson of the Regional Health Forum.

Cllr. John Coonan was proposed by Cllr. Peter Cleere and seconded by Cllr. Arthur McDonald. As there were no other nominations, Cllr. John Coonan was deemed elected.

4. The next Committee Meetings will take place on:

- South East Committee Meeting to be held on Friday, 22nd of July 2022 in Kilkenny
- South West Committee Meeting to be held on 20th of October 2022 in Tralee

5. Notices of Motion

(a) Cllr Jody Power moved the following Motion, standing in his name:

“That the South/South West Hospital Group publish forthwith the findings of the UHW Archus Report that was completed last November 2021 and promised to public representatives of the South East Region within weeks by the Minister but still not available.”

In the absence of Cllr Power this motion was deferred to the September 2022 meeting at his request.

(b) Cllr Mary Lenihan Foley moved the following Motion, standing in her name:

“Asking the HSE for an update on the Primary Care Unit in Youghal”

A written response from Mr Michael Fitzgerald, Chief Officer, Cork Kerry Community Healthcare was circulated to members and noted.

Cllr Lenihan Foley thanked Mr Fitzgerald for his response and stated she was very pleased to note that that development was on the HSE agenda. Michael Fitzgerald agreed it was positive to note along other ongoing developments across Cork Kerry Healthcare at present including the Community hospital replacement / refurbishment programme’.

(c) Cllr Conor McGuinness moved the following Motion, standing in his name:

“That the HSE would have regard to the specific medical needs, geographic location, and possible mobility issues of individual patients when assigning them to a new GP; and that where it proves impossible to assign patients to a GP practice in their own district, that the HSE would directly hire a GP to provide the requisite service.”

A written response from Ms Kate Killeen White, Chief Officer, South East Community Healthcare was circulated to members and noted.

Cllr McGuinness acknowledged the ongoing challenges with GP shortages - however, he expressed concerns as to whether the HSE takes into account the age, mobility and transport needs of patients when assigning them to a new GP GMS panel. Cllr McGuinness also outlined concerns regarding accessing GP appointments. For clarity it was noted that GPs are not employees of the HSE.

Ms Kate Cassidy in reply reiterated that GP shortages (especially in rural areas) is an ongoing national issue which has been further compounded by the Covid pandemic.

Furthermore a growing and aging population and advances in medical treatment have increased the demand for GP services.

There are ongoing efforts to address this including an increase in the number of GP training places offered.

Ms Cassidy also outlined to Members that the rollout of the national Enhanced Community Care (ECC) Programme will enhance community and primary care services. This significant programme is progressing and includes establishment of specialist teams for older persons and chronic disease management, community intervention teams and GP Diagnostic services. In addition initiatives such as Social Prescribing will further support community services for local populations.

Cllr John Sheehan supported this Motion and stated that at a national level aspects of the GP contract need to be reviewed as well as making it easier for GPs from overseas to come to this country. It was agreed that there needs to be a multi-level approach adopted towards addressing this important issue.

(d) Cllr Mikey Sheehy moved the following Motion, standing in his name:

“That this Forum writes to the Minister for Public Expenditure to seek clarification that ring fenced finance for capital projects in the South/South West Hospital Group are sufficient to deliver those projects in light of construction inflation and supply chain issues.”

A written response from Mr Alan O’Connell, Assistant National Director, Estates Department, HSE South was circulated to members and noted.

Cllr Sheehy whilst acknowledging the written reply and the significant financial investment in the area queried whether letter should issue to Minister McGrath, Minister for Public Expenditure on this matter.

In addition to HSE written reply, Bridie O’Sullivan advised Members that South/South West Hospital Group are continuing to work closely with colleagues in HSE Estates at Hospital Group Level to ensure all projects are progressed through the various stages. The Hospital Group attend regular capital meetings as appropriate and there is ongoing commitment and work to get projects approved and over the line.

(e) Cllr Norma Moriarty moved the following Motion, standing in her name:

“That Kerry be included in the forthcoming pilot scheme for Crisis Cafés as a means of supporting mental health provision?”

A written response from Mr Michael Fitzgerald, Chief Officer, Cork Kerry Community Healthcare was circulated to members and noted.

Cllr Moriarty acknowledged the written reply and reiterated her support for and the importance of working towards a Crisis Café initiative in Kerry.

Mr Michael Fitzgerald further outlined the challenges for Mental Health Services (and other services) in terms of attracting staff to work in remoter areas and also people living in those areas to attend services.

(f) Cllr Cathal Byrne moved the following Motion, standing in his name:

“This Forum calls on the HSE to provide a sub speciality breakdown of the 600 additional Consultant posts referenced in the Slaintecare Implementation Strategy & Action Plan 2021-2022.”

A written response the National HR Office was circulated to members and noted.

5. Questions

(a) Cllr. Conor McGuinness put forward the following question:

“To ask the HSE how many GP positions are currently vacant in Co. Waterford? Where these vacancies occur? How many patients are currently without access to a GP? What measures the HSE puts in place to ensure patients can access GP services in a timely manner; and what steps are being taken to address the shortage of GPs in Waterford and the wider South-East?”

A written response from Ms Kate Killeen White, Chief Officer, South East Community Healthcare was circulated to members and noted. There are currently no vacancies in Co Waterford and an upcoming retirement will be advertised. Cllr McGuinness queried whether there were sufficient GP numbers.

In response Mr Michael Fitzgerald advised that GP challenges are common to all areas across the country. There is also an ageing GP population. With regard to looking at measures to attract new applicants, it may not be everyone’s preference to set up as a self-employed business which may be a barrier and in this regard there may be a need to look at alternative ways of employing GPs and new contract arrangements. Furthermore single handed GP practices may not be an attractive option for new GPs in the future as GPs themselves may want to work with a supporting network of Allied Health Professionals. At a broader environmental level, there is a need for an overall multi agency /department approach to attract GPs and Allied Health Professionals to geographic rural areas.

(b) Cllr. Mikey Sheehy put forward the following question:

“How many Dentists are actively available to medical card holders in Kerry currently and how many of those are accepting new medical card patients for care.”

A written response Mr Michael Fitzgerald, Chief Officer, Cork Kerry Community Healthcare was circulated to members and noted. Cllr Sheehy acknowledged the reply and that this is a national issue impacting all areas. Cllr Arthur McDonald in support highlighted the challenges for patients as most dentists are not accepting new GMS patients. Michael Fitzgerald agreed that this is an issue of concern given the level of resignations from the DTSS Scheme. Mr Fitzgerald explained that the Cork Kerry Healthcare and other areas have raised this matter as there clearly are

issues in relation to this scheme. It is understood that there are ongoing discussions at a national level between the HSE and Department of Health.

(c) Cllr. Cathal Byrne put forward the following question:

“This Forum calls on HSE to provide the number of persons by age on waiting lists for speech and language therapy within Primary Care in County Wexford.”

A written response from Ms Kate Killeen White, Chief Officer, South East Community Healthcare was circulated to members and noted.

6. Date and Time of next meeting – 22nd of September 2022 at 2pm. Venue: Council Chambers, Cork County Hall, Co Cork.

MINUTES
MEETING OF REGIONAL HEALTH FORUM SOUTH

Thursday, 22nd September 2022 at 2pm
Venue: Council Chambers, Cork County Council, Co Cork

Present:

Cllr Ann Marie Ahern*
Cllr Audrey Buckley
Cllr Declan Burgess*
Cllr Cathal Byrne
Cllr Peter Cleere
Cllr John Coonan
Cllr Michael Doran*
Cllr Pat Dunphy
Cllr Pat Fitzgerald*
Cllr Michael Foley*
Cllr Pat Hayes
Cllr Roger Kennedy
Cllr Donal Kenny
Cllr Garry Laffan

Cllr Eileen Lynch
Cllr Susan McCarthy
Cllr Arthur McDonald
Cllr John McDonald
Cllr Conor McGuinness
Cllr Richie Molloy
Cllr Norma Moriarty*
Cllr John O'Donoghue*
Cllr Sean O'Donovan*
Cllr Jody Power
Cllr Mikey Sheehy

Apologies:

Cllr Damien Geoghegan
Cllr Niall Kelleher
Cllr Michael McCarthy
Cllr John Sheehan
Cllr Ted Tynan

Ms Kate Killeen White, Chief Officer, South East Community Healthcare

In Attendance:

Dr Ger O'Callaghan, Chief Operations Officer, South/South West Hospitals Group
Mr Michael Fitzgerald, Chief Officer, Cork Kerry Community Healthcare
Ms Kate Cassidy, General Manager Covid Lead, South East Community Healthcare
Mr Gearóid Rennicks, Senior Press Officer, Ireland East Hospital Group
Members of the HSE South Forum Office staff

Cllr Mikey Sheehy Chairperson, opened the meeting and welcomed Members and Management. At the outset, a vote of sympathy was proposed for Cllr James Tobin (RIP), RHF South Member who sadly passed away on the 4th July 2022. Cllr Tobin was actively involved in the Regional Health Forum, a committed Member of Waterford Council as well as other local organisations. Cllr Tobin was a dedicated member of the GAA. Cllr Tobin was a strong community supporter and advocate for his constituents for many years. A number of Councillors' joined in the vote of sympathy and paid tribute to the former member. A minute's silence was observed and the meeting was adjourned for 5 minutes as a mark of respect for Cllr Tobin.

A vote of sympathy was proposed on the sad passing of Annette Geoghegan, Mother of RHF Member Cllr Damien Geoghegan.

1. Adoption of the Minutes of the previous Meeting held on Thursday 23rd June 2022

On the proposal of Cllr Arthur McDonald seconded by Cllr John McDonald, the minutes of the Forum meeting held on Thursday, 23rd June 2022 were approved and adopted by the members.

2. Chairperson's Correspondence

3. The next Committee Meetings will take place on:

- South East Committee Meeting held on 18th October 2022 in Kilkenny
- South West Committee Meeting held on 20th October 2022 in Tralee

4. Notices of Motion

(a) Cllr Jody Power moved the following Motion, standing in his name:

"That the South/South West Hospital Group publish forthwith the findings of the UHW Archus Report that was completed last November 2021 and promised to public representatives of the South East Region within weeks by the Minister but still not available."

A written response from Mr Gerry O'Dwyer, Chief Executive Officer, South/South West Hospital Group was circulated to members and noted. Cllr Power outlined his concerns in relation to the Archus Report and when it may be available. Cllr Power cited a number of ongoing issues in relation to UHW including staffing, services and also the helipad. There are further pressures on the hospital given the increased population across the South East.

In response Dr Ger O'Callaghan advised that the Archus Report is currently being finalised with Management. It will provide an evidence base for what is needed in Waterford. On finalisation of the report, UHW will work with SSWHG and HSE Estates to make the relevant Capital Submissions for new developments that are required.

Members asked when Public Representatives might have sight of the Report and whether there are any repercussions for not meeting the Report timeframe.

Dr O’Callaghan advised Members that a Prioritisation and Implementation Plan are also included as part of this schedule.

(b) Cllr Declan Burgess moved the following Motion, standing his name:

"To ask HSE Management to outline any progress to the planning application for the proposed residential unit at St Patrick’s Hospital Cashel. I am aware that it remains on HSE Capital Plan."

A written response from Ms Kate Killeen White, Chief Officer, South East Community Healthcare was circulated to members and noted. Cllr Burgess acknowledged the response but is seeking further information and specific updates on this proposed development. Cllr Roger Kennedy in support of this Motion also requested further information. Ms Kate Cassidy advised the Members that she would bring their issues to the attention of the relevant personnel in South East Community Healthcare Services for Older People and HSE Estates.

(c) Cllr Audrey Buckley moved the following Motion, standing in her name:

"As discussed at the Regional Health Forum Meeting held on the 23rd June 2022, I am requesting that the members can discuss changing the start time at our Regional Health Forum Meetings which are currently held at 2pm to the new time of 11am."

A discussion was held in Chambers, followed by a vote taken as follows:

Vote To Change time of Meeting from 2pm to 11am			
Surname	First Name	For	Against
Ahern	Ann Marie	√	
Barden	Pat		
Buckley	Audrey	√	
Burgess	Declan	√	
Byrne	Cathal		√
Cleere	Peter	√	
Clune	Declan		
Collins	Danny		
Coonan	John	√	
Cronin	Caroline		
Doran	Michael	√	

Dunphy	Pat	√	
Fitzgerald	Pat		
Fitzgerald	Mark		
Foley	Michael		√
Geoghegan	Damien		
Hayes	Pat	√	
Kavanagh	Joe		
Kelleher	Niall		
Kennedy	Roger	√	
Kenny	Donal	√	
Laffan	Garry	√	
Linehan Foley	Mary		
Lynch	Eileen		
McCarthy	Michael		
McCarthy	Susan		
McDonald	Arthur	√	
McDonald	John	√	
McGuinness	Conor		
Molloy	Richie	√	
Moriarty	Norma	√	
O'Donoghue	John		
O'Donovan	Sean	√	
O'Flynn	Ken		
Power	Jody		√
Sheehan	John		
Sheehy	Mikey	√	
Tynan	Ted		

The proposal was subsequently carried. HSE Management present accepted this outcome. Dr Ger O'Callaghan advised Members that overnight expenses could not be provided.

(d) Cllr Michael Foley moved the following Motion, standing in his name:

"What actions is the HSE taking to resolve the issue of the current shortages of staff for Home Support."

A written response Mr Michael Fitzgerald, Chief Officer, Cork Kerry Community Healthcare and Ms Kate Killeen White, Chief Officer, South East Community Healthcare was circulated to members and noted.

Cllr Foley thanked HSE Management for the comprehensive reply. He asked whether the HSE were working on rosters to try and improve terms and work conditions for Home Support Workers. Michael Fitzgerald advised that the challenges in recruitment and retention of Home Support Workers is not just within Cork and Kerry but across the country. He advised Members that in addition to a significant recruitment campaign for Home Support Workers across Cork and Kerry and the South East, there is ongoing work including the review of job eligibility criteria requirements to try and encourage greater number of applicants and to attract more people to the Home Support role. Cllr Foley asked about whether HSE Home Support Workers are guaranteed their weekly hours. Cllr Lynch raised the issue of numbers of people approved for hours and those who were in receipt of their full allocation of home support hours. Cllr Richie Molloy stated that non-government organisations should receive greater funding supports to enable them to pay their staff mileage. Cllr Dunphy stated that the RHF South East meeting held in July gave a useful insight into Home Support Services and the ongoing challenges for service provision. Cllr Cleere advised that as ETB Chairman he would work with the HSE to facilitate any work in relation to course/qualifications.

(e) Cllr Norma Moriarty moved the following Motion, standing in her name:

"That all relevant agencies join together to form a Taskforce akin to the Road Safety Authority with a view to combating the misuse of drugs and the very worrying normalisation of their use throughout society."

Cllr Norma Foley thanked Management for the written reply. Mr Michael Fitzgerald confirmed that the Drug and Alcohol Taskforce is in situ and that this is the multi-agency response and organisational structure where we are all engaged to seek to address issues relating to substance misuse in the region and to develop and implement National Drug Strategy in County Cork & Kerry.

A discussion was held in Chambers. Cllr Moriarty stated that she would like to see the work of the Taskforce more visible and particularly in relation to drug use and drug driving.

(f) Cllr Eileen Lynch moved the following Motion, standing in her name:

"Can the HSE please outline the new District Health nurse (DHN) area in Cork County and confirm that service users have been notified of same."

A written response Mr Michael Fitzgerald, Chief Officer, Cork Kerry Community Healthcare was circulated to members and noted. Cllr Lynch thanked Management for the written reply.

Michael Fitzgerald outlined that this is part of the implementation of Slaintecare and the restructuring of community services for a population based needs model. The planned development of Community Healthcare Networks is essential to this. Enhancing community services is essential for continuity of care and seamless service. The CHN Learning pilot site will inform the phased implementation and work of the CHNs. As outlined in the written reply, Mr. Fitzgerald advised that PHN/RGN staff remain as before and patients have access to the same services. The contact numbers for the PHN service in the area remain unchanged. Families with complex care needs have been informed directly in relation to the changes.

5. Questions

(a) Cllr. Norma Moriarty put forward the following question:

“What are the HCA(Health Care Assistant) levels in UHK in comparison to all other hospitals in the South, South West Area and are there measures in place to ensure that this essential role is in place to the level required?”

A written response Mr Gerry O’Dwyer, Chief Executive Officer, South/South West Hospital Group was circulated to members and noted. Cllr Norma Moriarty acknowledged the written response. She stated that the role of HCA is essential for patient care on hospital wards. Dr Ger O’Callaghan stated that he was in agreement with Cllr Moriarty on the need for HCAs and their provision of support role to registered nurses in order to maintain a safe and quality service delivery to our patients.

(b) Cllr. Eileen Lynch put forward the following question:

“Can the HSE please outline the number of occupational therapist and Speech and Language therapist positions in Cork County in CDNT4 and CDNT5 and the number of these positions that have been filled.”

Cllr Lynch asked a number of follow-on queries in relation to Children’s Disability Network Teams (CDNTs). Mr Michael Fitzgerald in response outlined that there has been significant work that went into the implementation of Progressing Disability Services. It is a major change programme and a different model of work for Disability Services and as part of the implementation there is a “bedding-down” period. The vacancy rate is not related to funding, rather it is a people issue and there are challenges in recruiting allied health professionals and other staff. This is not unique to Cork and Kerry, it is a national issue. There are ongoing recruitment campaigns and work to attract and retain staff. Younger staff in many disciplines are more likely to move to other areas for work opportunities or abroad.

Mr Fitzgerald outlined to Members under Progressing Disability Services children with non-complex needs will be offered services through Primary Care and children with complex needs will be offered services through the Children’s Disability Network

Teams (CDNT). The CDNTs are under pressure at present with significant demand for services.

Cllr Lynch asked in relation to Integrated Information Management System for Disability and Primary Care Services - Mr Fitzgerald confirmed that work is ongoing to develop community ICT systems.

6. Date and Time of next meeting – 24th of November 2022 at 2pm. Venue: Council Chambers, Cork County Hall, Co Cork.

MINUTES
MEETING OF REGIONAL HEALTH FORUM SOUTH

Thursday, 24th of November 2022 at 11am
Venue: Council Chambers, Cork County Council, County Hall, Co Cork

Present:

Cllr Audrey Buckley
Cllr Peter Cleere
Cllr Cathal Byrne
Cllr John Coonan
Cllr Caroline Cronin*
Cllr Michael Doran*
Cllr Pat Dunphy*
Cllr Pat Fitzgerald*
Cllr Michael Foley*
Cllr Stephanie Keating*
Cllr Niall Kelleher*
Cllr Mike Kennelly*

Cllr Donal Kenny
Cllr Garry Laffan
Cllr Mary Lenihan Foley
Cllr Eileen Lynch
Cllr Michael McCarthy
Cllr Arthur McDonald
Cllr John McDonald
Cllr Norma Moriarty
Cllr Sean O'Donovan
Cllr John Sheehan*
Cllr Mikey Sheehy
Cllr Ted Tynan

Apologies:

Cllr Mark Fitzgerald
Cllr Roger Kennedy
Cllr Susan McCarthy
Cllr Richie Molloy
Cllr Jody Power

In Attendance:

Mr Gerry O'Dwyer, Chief Executive Officer, South/South West Hospitals Group
Mr Michael Fitzgerald, Chief Officer, Cork Kerry Community Healthcare
Ms Ann Marie Lanigan, Head of Service, Primary Care, South East Community Healthcare
Dr Arthur Jackson, Consultant Physician, Cork University Hospital
Mr Shaun Flanagan, Assistant National Director, PCRS
Ms Kate Halliwell, General Manager National Medical Card Unit.
Members of the HSE South Forum Office staff

At the outset of the meeting, Cllr Mikey Sheehy Chairman advised RHF Members that it was the last meeting for Mr Gerry O'Dwyer Chief Executive Officer, South/South West Hospital Group given his upcoming retirement after 50 years in the health service.

Cllr Sheehy acknowledged Mr O'Dwyer's years of service and dedication to health services. The Regional Health Forum Members unanimously expressed their thanks to Mr O'Dwyer for his service, commitment, support and in particular for his accessibility and availability to them all. Mr Michael Fitzgerald and Ms Anna Marie Lanigan individually and on behalf of HSE Management thanked Mr O'Dwyer for his leadership, continued support and guidance.

Mr O'Dwyer thanked RHF Members for their support over the years - their role as members of the Regional Health Forum is a fundamental part of a democratic society in representing their local constituents and in highlighting issues of concern. Mr O'Dwyer paid tribute to healthcare staff who worked throughout the pandemic. In particular, he thanked staff working in hospitals across the South/South West Hospital Group for their commitment and support over the last eight years of his tenure as CEO.

1. Adoption of the Minutes of the previous Meeting held on Thursday, 22nd September 2022.

On the proposal of Cllr Peter Cleere seconded by Cllr Garry Laffan, the minutes of the Forum meeting held on Thursday, 22nd of September 2022 were approved and adopted by the members.

2. Chairperson's Correspondence

3. Committees

The next Committee meetings will be held on:

South East Committee Meeting to be held in December 2022 was held in July 2022

South West Committee Meeting to be held on 15th of December 2022 in Cork

- 4.** Presentation on the PCRS - Primary Care Reimbursement Services (Medical Card Services) to be given by Mr Shaun Flanagan, Assistant National Director and Kate Halliwell, General Manager, National Medical Card Unit.
- 5.** Update on Long Covid to be given by Dr Arthur Jackson, Consultant Physician, Cork University Hospital.

6. Notices of Motion

(a) Cllr John Coonan moved the following Motion, standing in his name:

“That the HSE outline the up to date position regarding the implementation / delivery of its proposed service plans for the continuous assessment / diagnosis / treatment / rehabilitation and management of Long Covid.”

Dr Arthur Jackson, Consultant Physician, Cork University Hospital provided a presentation to RHF Members. In addition to highlighting the current research, Dr Jackson also provided an update on the HSE approach to long covid service delivery under the following headings; specialist post-acute and long covid clinics in areas across the country, GP assessment support and rehabilitation in primary care and patient led self-management and recovery. For most patients, the goal of medical management is to optimize function and quality of life. Dr Jackson apprised members of staffing resources for clinics and outlined recruitment efforts for the Cork Services. He acknowledged that progress had been slow but nonetheless work continues and they are getting there.

Cllr John Coonan thanked Dr Jackson for his presentation and progress report on proposed service plans for the diagnosis and treatment of long covid. Cllr Coonan stated that up to one-in-ten people who have had Covid virus could be suffering from long covid - so appropriate response and services are much needed. He was disappointed to note the slow progress in developing these long covid services. Cllr Coonan also cited his concerns in relation to the proposed limited geographical availability of these clinics and queried why there appears to be no plans for a long covid clinic to be located in the South East area. Cllr Coonan proposed that the RHF to write to the Minister of Health outlining dissatisfaction with this matter and seeking expanded geographic coverage of long covid clinics. Other RHF members supported Cllr Coonan’s proposal.

(b) Cllr Norma Moriarty moved the following Motion, standing in her name:

“That we thoroughly examine the potential for and means to introducing Ultra Sound services at Cahersiveen Community Hospital with a view to serving the West Iveragh population.”

A written response from Mr Michael Fitzgerald, Chief Officer, Cork Kerry Community Healthcare was circulated to members and noted. Cllr Moriarty thanked HSE Management for their reply.

She noted the statement that whilst the HSE cannot commit to the development of ultrasound services in Cahersiveen at this time and it will remain on the agenda for consideration. Cllr Moriarty stated that it is essential that the needs of the local rural community are considered and prioritised for such services.

(c) Cllr Eileen Lynch moved the following Motion, standing in her name:

“That the HSE would outline the amount and breakdown of funding awarded to adult disability day service providers in Cork, from the HSE, towards transport funding and

outline what circumstances or criteria is taken into account by service providers in the discretionary allocation of same."

A written response from Mr Michael Fitzgerald, Chief Officer, Cork Kerry Community Healthcare was circulated to members and noted.

Cllr Lynch acknowledged the written reply from Mr Fitzgerald. However she stated that she is disappointed with the overall lack of funding and action in relation to fair, adequate and integrated measures for transport for people with disabilities that allows them access services whereby the support meets need and enables people to participate fully in services and aspects of life as required. Cllr Lynch highlighted the impact of families as well as people with disabilities.

Mr Fitzgerald accepted the Councillor's concerns, however, he reiterated that the HSE has no statutory obligation to provide transport services - transport is not considered a core health service and as such Day Service funding does not include transport. He advised that some transport supports are provided by the HSE or funded agencies on a discretionary basis and a range of transport solutions are pursued in different areas. The Department of Transport, Tourism and Sport has responsibility for the continued development of accessibility and availability of accessible public transport.

(d) Cllr Michael Foley moved the following Motion, standing in his name:

"Medical Card Holders in Kerry are finding it difficult to get dental treatment under the scheme. Can the HSE provide a list of Dental Practitioners in Kerry who provide dental service to medical card holders and what measures have been carried out to rectify the issue."

A written response from Mr Michael Fitzgerald, Chief Officer, Cork Kerry Community Healthcare was circulated to members and noted.

Cllr Foley thanked Mr Fitzgerald for his written response. However there are significant concerns for constituents who are medical card holders to access Dental Treatment Services Scheme (DTSS) dentists in Kerry. Mr Fitzgerald in response advised that there are particular issues with the HSE dental service for adults i.e. DTSS and that this is a national issue across the country. A number of private general dental practitioners (GDP`s) have resigned from the scheme and many of the general dental practitioners still operating the scheme have restricted access and are only seeing existing patients. Unfortunately it appears that dentists are not taking on new medical card holders. The consequence is that it is even more difficult for people to get an appointment to see a dentist. Mr Fitzgerald advised that the HSE is aware that some medical card holders have experienced difficulties in accessing dental treatment under the scheme and local community services are seeking to implement temporary solutions where possible.

Mr Fitzgerald stated that there is work ongoing at a national level on this matter. The review of the DTSS is part of a fundamental reform of oral healthcare services, through implementation of the National Oral Health Policy, Smile Agus Sláinte. It is also understood that additional funding may be made available to progress the implementation of the policy and the HSE is assisting the Department of Health to progress this.

(e) Cllr Caroline Cronin moved the following Motion, standing in her name:

"Asking the HSE to reconsider plans to restrict access to the Home Birth Service to people living within 30 minutes of the nearest Maternity Hospital. This would mean most rural families in West Cork and Kerry would be disqualified from having home births."

A written response from Mr Kilian McGrane, National Women & Infants Health Programme, Health Service Executive, was circulated to members and noted.

Cllr Cronin stated that this recommendation to limit access to homebirths to women living within 30 minutes 'blue-light' drive by an ambulance is causing considerable concern across Cork and Kerry which has the highest number of homebirths every year. Women in rural areas being left out. There is an urgent need to revisit this plan. Other Members supported this concern.

The HSE said the proposed recommendation would see women retain access to homebirths, and that is being done to improve safety. Home birth is an important pathway for women. The key objective is to ensure the continuity of the service, and the safety of mothers and their babies, in line with the objectives of the National Maternity Strategy.

(f) Cllr Richie Molloy moved the following Motion, standing in his name:

"That HSE give a report as to the Winter Plan is progressing in the South East and how many extra home help hours will be introduced and what plans are being introduced as regards hiring more care workers?"

A written response from Mr Kate Killeen White, Chief Officer, South East Community Healthcare was circulated to members and noted.

Cllr Molloy thanked HSE Management for their comprehensive reply. Cllr Molloy outlined that Home Help and carer support hours are important to support people remain at home and prevent unnecessary hospital admissions.

Ms Lanigan stated that South East Community Healthcare continues to support the egress from Acute Hospitals as a priority. She also referenced key community/primary care initiatives including Community Intervention Teams.

Cllr Molloy asked whether the HSE were working on measures to try and improve terms and conditions for Home Support Workers including those working in the NGO / Voluntary sector.

Ms Lanigan confirmed that there is continued commitment to delivering Home Support hours to individuals within CHO5/SECH and advised that the challenges in recruitment and retention of Home Support Workers are across the country. Nonetheless there is ongoing recruitment of staff and particularly to try and boost services in the coming winter months. In addition the HSE/SECH has reviewed the

entry level criteria for Home Support Workers and has reduced the number of modules required before entering the workforce.

Cllr Molloy stated that voluntary / NGO providers are struggling to recruit and particularly given that funding is not available to provide travel expenses for their workers who are opting to take up other employment opportunities with the HSE and elsewhere.

7. Questions

(a) Cllr. Norma Moriarty put forward the following question:

“How soon can we see the Cahersiveen Day Hospital returning to a minimum five day service from the three day service currently in operation?”

A written response from Mr Michael Fitzgerald, Chief Officer, Cork Kerry Community Healthcare was circulated to members and noted.

Cllr Moriarty thanked HSE Management for the reply and noted that she was pleased to note the HSE’s intention to return to a 5-day service following the recruitment of staff. This is an important service for the local people and surrounding environs.

(b) Cllr. Eileen Lynch put forward the following question:

“That the HSE would outline plans to provide upgraded/new inpatient facilities for the Mental Health Services in St Stephen's Hospital.”

A written response from Mr Michael Fitzgerald, Chief Officer, Cork Kerry Community Healthcare was circulated to members and noted. Cllr. Lynch stated that the commitment to the Glanmire site is an important decision.

8. Date and Time of next meeting – February 2022 at 2pm. Date to be decided.
