

Miontuairiscí cruinniú ginearálta bliantúil
an Fhórait Sláinte Réigiúnaigh a tionóladh Dé Máirt, 16ú Iúil, 2024 ag 2.00 i.n, i
Seomra 1 an tIonad Oideachais, Feidhmeannacht na Seirbhíse Sláinte, Ospidéal
Ollscoile Páirc Mheirlinne, Gaillimh
Minutes of Regional Health Forum West Annual General Meeting held on
Tuesday, 16th July 2024 at 2.00pm in Room 1, Education Centre,
Merlin Park University, Galway.

Chairperson: Cllr Donagh Killilea, Cllr Ciaran Brogan

Members Present	Members Present (continued)	Members Present (continued)
Cllr Antoinette Bashua Baker	Cllr Francis Foley	Cllr Edel McSharry
Cllr Sharon Benson	Cllr Shane Forde	Cllr Micheál Naughton
Cllr Declan Bree	Cllr Alma Gallagher	Cllr Ryan O'Meara
Cllr Asiling Burke	Cllr Liam Galvin	Cllr Dr Evelyn Francis Parsons
Cllr Marie Casserly	Cllr Felim Gurn	Cllr Gareth Scahill
Cllr John Caulfield	Cllr Alan Harney	
Cllr Bridie Collins	Cllr Mary Howard	Apologies
Cllr Micheal Collins	Cllr Michael Kilcoyne	Cllr Declan Meehan
Cllr John Connolly	Cllr Michael Loftus	Cllr Seamus Morris
Cllr Greg Conway	Cllr Eileen Mannion	Cllr Elisa O'Donovan
Cllr Shaun Cunniffe	Cllr Sean Moylan	
Cllr Gary Doherty	Cllr Donna McGettigan	Members Absent
Cllr Paddy Farrell	Cllr Rita McInerney	Cllr Phyll Bugler
	Cllr Gerry McMonagle	Cllr Ita Flynn Reynolds
		Cllr Emer Kelly

In attendance:

Tony Canavan, Executive Lead, Regional Health Forum/ Regional Executive Officer, HSE West and North West

Ann Cosgrove, Interim CEO, Saolta University Health Care Group

Colette Cowan, CEO, UL Hospitals Group

Charlie Meehan, HOS Mental Health, Community Healthcare West

Dermot Monaghan, Chief Officer, Community Healthcare Cavan, Donegal, Leitrim, Monaghan, Sligo

Maria Bridgeman, Chief Officer, HSE Mid West Community Healthcare

JJ McGowan, General Manager, Area Operations, NAS

Marian Cavanagh, Regional Health Forum Office

Anna Lyons, Regional Health Forum Office

886/111/24 Call to Order

Chairpersons Cllr Donagh Killilea called the room to order and welcomed everybody, especially the new members, to the AGM. Cllr Killilea thanked the Members, the Executive and Media for the courtesy and support received during his term as Chairperson of the Regional Health Forum West. Cllr Killilea handed over to Tony Canavan Executive Chairperson to proceed with the nominations and voting for the new Chairpersons and Vice Chairpersons for the Regional Health Forum West.

887/111/24 HSE Executive Chairperson's Address

Tony Canavan, Regional Executive Officer, HSE West and North West and Executive Chair of the Regional Health Forum West gave a welcoming address to the new Regional Health Forum Members and thanked the outgoing Chairperson, acknowledging the work of Cllr Killilea as Chairperson, noting it was a very productive Forum under his Chairmanship.

888/111/24 Nominations for Chairpersons of Regional Health Forum

Cllr Michael Collins nominated Cllr Ciaran Brogan who was seconded by Cllr Edel McSharry. Cllr Ciaran Brogan was unopposed and deemed elected as the Chairperson of the Regional Health Forum West.

889/111/24 Nominations for Vice Chairperson of Regional Health Forum

Cllr John Caulfield nominated Cllr Michael Kilcoyne and he was seconded by Cllr Michael Collins. Cllr Michael Kilcoyne was unopposed and deemed elected as Vice Chairperson of the Regional Health Forum West.

890/111/24 Nominations for Chairperson of Regional Health Forum Committee

Cllr Gerry McMonagle nominated Cllr Donna McGettigan and he was seconded by Cllr Gary Doherty. Cllr Donna McGettigan was unopposed and deemed elected as Chairperson of the Regional Health Forum West Committee.

891/111/24 Nominations

Cllr Michael Collins nominated Cllr Bridie Collins and he was seconded by Cllr Donagh Killilea. Cllr Bridie Collins was unopposed and deemed elected as Vice Chairperson of the Regional Health Forum West Committee.

892/111/24 Adjournment

Adjournment for official photographs of Chairs/Vice-Chairs

893/111/24 Welcome Address by new Chairperson Cllr Ciaran Brogan

Cllr Brogan thanked his colleagues for his nomination as Chairperson of the Regional Health Forum. Cllr Brogan advised that he has been on the Regional Health Forum since it was formed in 2005 and being from Letterkenny and Donegal in the North West he is very familiar with the workings of the Forum and the members of the Forum and I am very proud to have represented my area over the years.

894/111/24 Matters Arising:

895/111/24 Minutes of previous meeting – 21st May 2024

The minutes of the previous meeting held on the 21st May 2024 were proposed by Cllr Gerry McMonagle, seconded by Cllr Donagh Killilea and adopted.

896/111/24 Questions:

W111Q3996 – Toghermore House & Lands in Tuam:

Action: Cllr Donagh Killilea requested Estates to liaise with Galway County Council and himself to provide a joint proposal for the lands in Toghermore.

W111Q3997 - Pieta House Tuam:

Action: Charlie Meehan agreed to liaise with Cllr Donagh Killilea and Pieta House regarding if there are any options that may be available regarding a location in Tuam.

W111Q3999 - Dental Treatment Service Scheme:

Action: Charlie Meehan representing John Fitzmaurice agreed to revert to Cllr Donagh Killilea regarding the process when a Medical Card holder has tried 3 dental practices under the Dental Treatment Service Scheme and failed to secure a dental practice, does the HSE assign a dentist.

W111Q3999 W111Q4041 & W111Q4044 - Presentation on Dental Services:

Action: RHF Office to organise a presentation at a Regional Health Forum Committee on Dental Services and how it operates.

W111Q4000 – Hydrotherapy pool in Cregg House:

Action: Dermot Monaghan to provide Cllr Marie Casserly with an update regarding the funding application for the hydrotherapy pool in Cregg House.

W111Q4002 – Respite Services Donegal:

Action: Dermot Monaghan to revert to Cllr Gerry McMonagle with an outline of any new developments planned by end of year.

W111Q4003 – Ambulance turnaround times at Letterkenny University Hospital

Action: JJ McGowan to revert to Cllr Gerry McMonagle with data since September 2023 which shows the improvement of Ambulance turnaround times at Letterkenny University Hospital.

W111Q4009 – Heel Prick Test – Mid West:

Action: Maria Bridgeman to check in relation to why there is a discrepancy in the number of tests from new born bloodspot screening between Ireland versus other European Countries and revert to Cllr Mary Howard.

W111Q4014 & W111Q4017 – Ballyhaunis Primary Health Care Centre:

Action: Joe Hoare to revert to Cllr Alma Gallagher prior to the next Regional Health Forum with clear deadlines for the timeframe of the schedule of works and commencement of work on site at Ballyhaunis Primary Health Care Centre.

Request for Estates to attend the next Regional Health Forum Meeting, 24th September 2024:

Cllr Ciaran Brogan requested that a representative from Estates attend the next RHF West Meeting, 24th September 2024.

Action: Tony Canavan agreed to review this request and to provide a solution.

W111Q4020 – Physiotherapy Services in Sligo University Hospital:

Action: Ann Cosgrove to revert to Cllr Declan Bree regarding:

- A) The status of GP referrals to the Physiotherapy Department in Sligo University Hospital.
- B) An update on the filling of posts (if panels in place) for the Physiotherapy Department in Sligo University Hospital.

W111Q4021 – Hydrotherapy pool, Cregg, Sligo:

Action: Dermot Monaghan to provide Cllr Declan Bree with an update at the next Regional Health Forum meeting in September regarding the Hydrotherapy pool, Cregg, Sligo.

W111Q4022 – Community Mental Health Team in Sligo access to CBT:

Action: Dermot Monaghan to provide clarification to Cllr Declan Bree regarding a discrepancy in the response information provided as to whether CBT is available in Sligo Mental Health Services.

W111Q4026 –Appointment allocation from Clare to Nenagh:

Action: Colette Cowan to review if virtual meetings could be facilitated with the Consultant, as an alternative to the patient travelling from Clare to Nenagh and update Cllr Antoinette Baker Bashua.

W111Q4028 – Facilities for Ballinasloe Town AFC on St Brigid’s Hospital Campus:

Action: Charlie Meehan representing John Fitzmaurice agreed that further dialogue was possible in relation to the option of a portable toilet unit on the St Brigid’s Hospital Campus and revert to Cllr Alan Harney.

W111Q4029 – Portiuncula University Hospital 50 bed replacement ward block:

Action: Ann Cosgrove to revert to Cllr Alan Harney regarding the proposed new layout at Portiuncula University Hospital once the plan is available.

W111Q4031 – UHG Psychiatry Outpatients Department:

Action: Charlie Meehan to contact Cllr John Connolly regarding the specifics of a patient who is waiting for an appointment with the Mental Health Services.

W111Q4036 - Enhanced Community Care Hub in Ballinasloe:

Action: Charlie Meehan representing John Fitzmaurice agreed to provide Cllr Evelyn Francis Parsons with the timeline for the Integrated Hub in Ballinasloe and information regarding population it will serve if sanctioned in Q4 2024.

W111Q4037 – Ambulance base in Ballinasloe:

Action: JJ McGowan to provide Cllr Evelyn Francis Parsons with an update regarding the permanent Ambulance base in Ballinasloe when the review between NAS and Estates is completed and a timeline is available.

W111Q4046 – Breakdown of Agency Nurses versus HSE Nursing staff in UL Hospitals:

Action: Collette Cowan to review and if possible to provide Cllr Donna McGettigan with the breakdown of each hospital for the short-term agency Nurses versus HSE Nursing from January to June 2024.

Standing orders were suspended due to time; Cllr McMonagle proposed the continuation and it was seconded by Cllr Bree and carried. The meeting resumed.

897/111/24 Motions:

W111M187 – Pain Clinic in Sligo University Hospital:

This motion was proposed by Cllr Declan Bree, seconded by Cllr Edel McSharry and agreed by all Councillors present.

Action: Motion to be forwarded to the Minister for Health at the Department of Health.

W111M188 – St Brigid’s Hospital Campus in Ballinasloe:

This motion was proposed by Cllr Alan Harney, seconded by Cllr Eileen Mannion and agreed by all Councillors present. The Executive noted while the Motion was passed, the HSE cannot support this Motion and has no role in the active progress of it.

898/111/24 Any other Business:

899/111/24 Date & Time of Next Meeting:

The next **Regional Health Forum Meeting** will take place on Tuesday, 24th September at 2pm in Galway.

The next **Regional Health Forum Committee Meeting** will take place on Tuesday, 22nd October 2024 at 2pm in Castlebar.

This concluded the business of the meeting.

Signed:

Cathaoirleach/Chairman
Adopted at the Regional Health Forum West meeting

QUESTIONS AND RESPONSES RECEIVED
REGIONAL HEALTH FORUM WEST – 24TH SEPTEMBER 2024

Number:	QUESTION	RAISED BY	Page No.
W112Q4066	New Acute unit in St. John's Community Hospital, Ballytivnan, Sligo	Cllr M Casserly	4
W112Q4067	Access through the new barrier system at the top of Merlin Park Hospital.	Cllr S Forde	4
W112Q4068	Opening new Minor procedure clinic Merlin Park Hospital.	Cllr S Forde	4
W112Q4069	Bus transport system that operates between Merlin Park and UCHG, Patient use?	Cllr S Forde	4
W112Q4070	Absenteeism in Galway and Merlin Park Hospitals.	Cllr S Forde	5
W112Q4071	Help for people diagnosed with long term Covid.	Cllr F Gurn	5
W112Q4072	Help for people who are diagnosed with lyme disease.	Cllr F Gurn	5-6
W112Q4073	Cost of the cases of negligence against the HSE in CHO1, 2019 - 2023	Cllr F Gurn	6
W112Q4074	Existing panels and Recruitment Practices – for recruiting staff at Nenagh Hospital	Cllr S Morris	6
W112Q4075	Staffing for new developments and challenges filling posts, Nenagh General Hospital particularly for the new MAU.	Cllr S Morris	6
W112Q4076	How many appointments and operations have been cancelled during the most recent de-escalation of the UHL site?	Cllr S Morris	6-7
W112Q4077	What safeguards are in place to ensure the new 50 bed nursing Home in Nenagh meets the standards of a step-down medical facility?	Cllr S Morris	7
W112Q4078	Impact of accommodation pressures for incoming staff, negatively impacting both recruitment and retention efforts?	Cllr E Francis Parsons	7
W112Q4079	Addiction counsellors Ballinasloe, East Galway, referral pathways for accessing addiction counselling services.	Cllr E Francis Parsons	7-8
W112Q4080	Facilities in Primary Care Centres and District Hospitals in Mayo to bring services closer to patients? Role of telemedicine.	Cllr M Kilcoyne	8
W112Q4081	Number of GPs in County Mayo	Cllr M Kilcoyne	8-9
W112Q4082	How many positions have been filled and in what grades in County Mayo? (MUH and Sacred Heart Hospital)	Cllr M Kilcoyne	9-10
W112Q4083	Agency staff in the HSE in Mayo (MUH & Sacred Heart Hospital)	Cllr M Kilcoyne	10-11
W112Q4084	Sligo/Leitrim primary care Speech and Language Therapy services.	Cllr P Farrell	11-12
W112Q4085	Update on the proposed 2nd Primary Care Centre for Ennis town.	Cllr M Howard	12
W112Q4086	Social Prescription Service Co. Galway.	Cllr E Francis Parsons	12-13
W112Q4087	HPV Vaccination Programme	Cllr E Francis Parsons	13
W112Q4088	Update on the Ballina District Hospital 75-bed new build project	Cllr M Loftus	13-14
W112Q4089	Update on the progress towards the establishment of a Minor Injuries Unit at Ballina?	Cllr M Loftus	14
W112Q4090			
W112Q4091	Winter plan is for A&E and its estimated costs, in Galway hospitals.	Cllr D Killilea	14-16
W112Q4092	Waiting times for elective surgeries in Galway Hospitals.	Cllr D Killilea	16-17
W112Q4093	Sepsis presentations to A&E over the last 2 years.	Cllr D Killilea	18
W112Q4094	Expected delivery date, services and staffing for the old Aras Mhuire Site, Tuam.	Cllr D Killilea	18

W112Q4095	St Joseph's Hospital, Stranorlar re HIQA order "significant fire risks"	Cllr G Doherty	18-19
W112Q4096	St Joseph's Hospital, Stranorlar - Actions taken following January 2024 HIQA inspection report re 'significant fire risks that required urgent action'?	Cllr G Doherty	19
W112Q4097	Confirmation re 'Fire Safety Risk Assessments' on all buildings managed by HSE Estates in Donegal.	Cllr G Doherty	19
W112Q4098	Figures and eta's for ambulances dispatched to Kilmallock town and surrounding areas from the ambulance base in Limerick City.	Cllr G Conway	20
W112Q4099	Riverwalk House Carndonagh; staffing, resumption of Respite provision.	Cllr G McMonagle	20-21
W112Q4100	DTSS dentists in Donegal, locations.	Cllr G McMonagle	21
W112Q4101	Update on the New National Childrens Hospital.	Cllr G McMonagle	21
W112Q4102	Diabetes Posts LUH and recruitment update.	Cllr G McMonagle	21-22
W112Q4103	Primary Care Paediatric Speech and Language Therapy (SLT) Service for Sligo/Leitrim/West Cavan/South Donegal.	Cllr E McSharry	22-23
W112Q4104	Mental Health services for Sligo, Leitrim south Donegal and west Cavan- Pay and number strategy.	Cllr E McSharry	23
W112Q4105	Mental health services in Sligo/Leitrim/West Cavan/South Donegal – leave and unfilled positions impact.	Cllr E McSharry	24
W112Q4106	Is staff funding ring fenced in mental health services covering Sligo, Leitrim south Donegal and west Cavan? Retirements, leave, impact of staff vacancies.	Cllr E McSharry	24-25
W112Q4107	Pathfinder and alternative Prehospital pathways numbers re UHL ED avoidance	Cllr A Baker Bashua	25
W112Q4108	The average wait times (turnaround times) for ambulances at UHL ED 2023	Cllr A Baker Bashua	25-26
W112Q4109	The number of patients who left before treatment was complete (LBTC) at the ED UHL in 2023, and how many of these patients returned within 30 days	Cllr A Baker Bashua	26
W112Q4110	Access to DTSS Dental practices in Co. Clare.	Cllr A Baker Bashua	26-29
W112Q4111	Update on the Enhanced community care for Donegal.	Cllr C Brogan	29-31
W112Q4112	Update on the service being delivered at the CAMHS, based in Letterkenny, for Inishowen, north central Donegal, north west Donegal?	Cllr C Brogan	31-32
W112Q4113	Update on the accessibility of services being delivered at LUH in the last 3 years.	Cllr C Brogan	32-36
W112Q4114	Update from estate management and our progress on our capital programme.	Cllr C Brogan	36-38
W112Q4115	Update on tender request for the development and lease of a Primary Care Centres; Galway City West, An Spideal, Claregalway, Oranmore.	Cllr J Connolly	38-39
W112Q4116	Update on the Masterplan for the delivery of essential health care infrastructure at GUH and the work to date undertaken by the design team.	Cllr J Connolly	39-40
W112Q4117	Dialysis unit in Merlin Park, weekly patient numbers and capacity provision.	Cllr J Connolly	40
W112Q4118	Numbers of GMS patients unable to secure GP of choice or alternative local GP 2021 – 2024, Co Galway locations with >1 GMS patient unable to access local GP.	Cllr J Connolly	40-41
W112Q4119	Vacant post in The Access to Psychological Services Ireland (APSI) post in Castlerea, Co. Roscommon.	Cllr G Scahill	41
W112Q4120	Ambulance service in Loughglynn, Co. Roscommon.	Cllr G Scahill	41
W112Q4121	Information on the specialist supports that are available to those living with endometriosis and PCOS in Limerick.	Cllr E O'Donovan	42

W112Q4122	Numbers awaiting orthodontic treatment in CHO3, average time on waiting list.	Cllr E O'Donovan	42-43
W112Q4123	Number of patients in CHO3 that have been provided treatment under the cross-border healthcare directive in the last 5 years and the total cost for same.	Cllr E O'Donovan	43
W112Q4124	Update on the appointment of a permanent consultant post for the Camhs Intellectual Disability service in Sligo and the expected start date for this post?	Cllr D Bree	44
W112Q4125	Update on Response at RHF West 16.07.24 re Cognitive Behavioural Therapy provision in CH CDLMS.	Cllr D Bree	44-45
W112Q4126	Number of Service users at the Hydrotherapy Pool in Manorhamilton on the list of dates provided, any progress regarding the possible re-opening of the Hydrotherapy pool in Cregg, Co Sligo.	Cllr D Bree	45-46
W112Q4127	To ask if the Sligo-Leitrim Occupational Health Department is adequately staffed.	Cllr D Bree	46
W112Q4128	Staffing cohort at the pathology labs in all the hospitals across the UL Group	Cllr R McNerney	46
W112Q4129	Update on the planned bed blocks and new theatres via capital funding for Ennis hospital.	Cllr R McNerney	46-47
W112Q4130	HSE strategy re the lack of GP services and dentistry care within rural areas, like West Clare?	Cllr R McNerney	47-51
W112Q4131	Step down care for the elderly in the Mid-West Region	Cllr R McNerney	51
W112Q4132	Ballyhaunis Primary Health Care Centre: What date is the developer due to commence work on site?	Cllr A Gallagher	51
W112Q4133	Ballyhaunis Primary Health Care Centre: Has a schedule of works been submitted to the HSE?	Cllr A Gallagher	51
W112Q4134	Ballyhaunis Primary Health Care Centre: Details of key milestones with dates of this schedule?	Cllr A Gallagher	51-52
W112Q4135	Ballyhaunis Primary Health Care Centre: What date is the HSE scheduled to occupy the building?	Cllr A Gallagher	52
W112Q4136	New ambulance base for North Connemara.	Cllr E Mannion	52
W112Q4137	Update on the proposed new Health Centre for Inishbofin?	Cllr E Mannion	52
W112Q4138	Can an Eye and Ear clinic be set up at Clifden District Hospital/Health Centre to facilitate children in the area?	Cllr E Mannion	52-53
W112Q4139	Clifden District Hospital – beds funding for 2025?	Cllr E Mannion	53
W112Q4140	Funding to support people living with acquired brain injuries in Galway and Roscommon?	Cllr A Harney	53
W112Q4141	Ambulance Base PUH- How many ambulances are in operation day and night, additional resources?	Cllr A Harney	53
W112Q4142	HSE plans for the former Health Centre in Ballygar.	Cllr A Harney	54
W112Q4143	Please provide an update on the plans for St. Brigid's Hospital in Ballinasloe.	Cllr A Harney	54
W112Q4144	Update on the construction and staffing for the new laboratory facilities at LUH?	Cllr D Meehan	54
W112Q4145	Planning regarding recruitment and retention of personnel to maintain services in LUH.	Cllr D Meehan	54-55
W112Q4146	Recruitment of physiotherapy posts Donegal, numbers waiting more than 6 months for physiotherapy appointments.	Cllr D Meehan	55
W112Q4147	Numbers on waiting lists for home help Donegal, recruitment for Home Help?	Cllr D Meehan	55-56

Number:	QUESTION	RAISED BY
W112Q4066	When is the new Acute unit in St. John's Community Hospital, Ballytivnan, Sligo going to open?	Cllr M Casserly

Upgrade works have commenced on the 26 bed unit in St John's. These are anticipated to be completed by the end of the year. The unit will then take a number of weeks to commission.

Joe Hoare, Assistant National Director, HSE Capital & Estates

W112Q4067	Will the Residents of Merlin lane be given access through the new barrier system at the top of the Hospital. For over 20 years the traffic along this avenue has made life tough for the residents and this is the minimum we should give them.	Cllr S Forde
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Access through the new barrier system at the rear gate of Merlin Park University Hospital will be restricted to Health Care Workers based at Merlin Park University Hospital and some essential service providers.

A. Cosgrove, Interim CEO, Saolta University Health Care Group

W112Q4068	Would I be correct in saying that the new Minor procedure clinic due to be located on the Grounds of Merlin Park won't open until October 2025.	Cllr S Forde
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Construction of the Surgical Hub is currently underway on the Merlin Park University Hospital Campus. This is due to be completed in Q4 2025. This includes 2 Day Case Theatres, 2 Minor Op Procedure rooms and associated ancillary accommodation to support this.

A. Cosgrove, Interim CEO, Saolta University Health Care Group

W112Q4069	The current bus transport system that operates between both Merlin Park and UCHG. Is this running at full capacity. Would it be possible to offer this service to patients of the new clinic due to open next year as a way of reducing traffic through the city and would be a great initiative by the HSE.	Cllr S Forde
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The Galway University Hospitals shuttle bus service is available for use by HSE Staff and Patients who have appointments at University Hospital Galway or Merlin Park University Hospital.

This service operates from early morning each week day to facilitate staff with capacity available for patients at non peak times during the day

 <p>GALWAY UNIVERSITY HOSPITALS</p> <p>STAFF SHUTTLE BUS TIMETABLE</p> <p><i>Every 20 minutes @ peak times. Otherwise every 30 minutes (as highlighted in bold and red font).</i></p> <p>DEPARTURE TIMES UHG SET DOWN AREA ED</p> <table border="1"> <tbody> <tr><td>07:00 hrs</td><td>11:30 hrs</td><td>16:20 hrs</td></tr> <tr><td>07:20 hrs</td><td>12:00 hrs</td><td>16:40 hrs</td></tr> <tr><td>07:40 hrs</td><td>12:20 hrs</td><td>17:00 hrs</td></tr> <tr><td>08:00 hrs</td><td>12:40 hrs</td><td>17:20 hrs</td></tr> <tr><td>08:20 hrs</td><td>13:00 hrs</td><td>17:40 hrs</td></tr> <tr><td>08:40 hrs</td><td>13:20 hrs</td><td>18:00 hrs</td></tr> <tr><td>09:00 hrs</td><td>13:40 hrs</td><td>18:20 hrs</td></tr> <tr><td>09:20 hrs</td><td>14:00 hrs</td><td>18:40 hrs</td></tr> <tr><td>09:40 hrs</td><td>14:30 hrs</td><td>19:00 hrs</td></tr> <tr><td>10:00 hrs</td><td>15:00 hrs</td><td>19:30 hrs</td></tr> <tr><td>10:30 hrs</td><td>15:30 hrs</td><td>20:00 hrs</td></tr> <tr><td>11:00 hrs</td><td>16:00 hrs</td><td>21:00 hrs</td></tr> </tbody> </table> <p>Effective from November 25th 2014</p>	07:00 hrs	11:30 hrs	16:20 hrs	07:20 hrs	12:00 hrs	16:40 hrs	07:40 hrs	12:20 hrs	17:00 hrs	08:00 hrs	12:40 hrs	17:20 hrs	08:20 hrs	13:00 hrs	17:40 hrs	08:40 hrs	13:20 hrs	18:00 hrs	09:00 hrs	13:40 hrs	18:20 hrs	09:20 hrs	14:00 hrs	18:40 hrs	09:40 hrs	14:30 hrs	19:00 hrs	10:00 hrs	15:00 hrs	19:30 hrs	10:30 hrs	15:30 hrs	20:00 hrs	11:00 hrs	16:00 hrs	21:00 hrs	 <p>GALWAY UNIVERSITY HOSPITALS</p> <p>STAFF SHUTTLE BUS TIMETABLE</p> <p><i>Every 20 minutes @ peak times. Otherwise every 30 minutes (as highlighted in bold and red font).</i></p> <p>DEPARTURE TIMES MPUH 1. SHOP 2. MORTUARY CAR PARK</p> <table border="1"> <tbody> <tr><td>07:00 hrs</td><td>11:30 hrs</td><td>16:20 hrs</td></tr> <tr><td>07:20 hrs</td><td>12:00 hrs</td><td>16:40 hrs</td></tr> <tr><td>07:40 hrs</td><td>12:20 hrs</td><td>17:00 hrs</td></tr> <tr><td>08:00 hrs</td><td>12:40 hrs</td><td>17:20 hrs</td></tr> <tr><td>08:20 hrs</td><td>13:00 hrs</td><td>17:40 hrs</td></tr> <tr><td>08:40 hrs</td><td>13:20 hrs</td><td>18:00 hrs</td></tr> <tr><td>09:00 hrs</td><td>13:40 hrs</td><td>18:20 hrs</td></tr> <tr><td>09:20 hrs</td><td>14:00 hrs</td><td>18:40 hrs</td></tr> <tr><td>09:40 hrs</td><td>14:30 hrs</td><td>19:15 hrs</td></tr> <tr><td>10:00 hrs</td><td>15:00 hrs</td><td>19:45 hrs</td></tr> <tr><td>10:30 hrs</td><td>15:30 hrs</td><td>20:15 hrs</td></tr> <tr><td>11:00 hrs</td><td>16:00 hrs</td><td>20:45 hrs</td></tr> </tbody> </table> <p>Effective from November 25th 2014</p>	07:00 hrs	11:30 hrs	16:20 hrs	07:20 hrs	12:00 hrs	16:40 hrs	07:40 hrs	12:20 hrs	17:00 hrs	08:00 hrs	12:40 hrs	17:20 hrs	08:20 hrs	13:00 hrs	17:40 hrs	08:40 hrs	13:20 hrs	18:00 hrs	09:00 hrs	13:40 hrs	18:20 hrs	09:20 hrs	14:00 hrs	18:40 hrs	09:40 hrs	14:30 hrs	19:15 hrs	10:00 hrs	15:00 hrs	19:45 hrs	10:30 hrs	15:30 hrs	20:15 hrs	11:00 hrs	16:00 hrs	20:45 hrs
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A. Cosgrove, Interim CEO, Saolta University Health Care Group

W112Q4070	What is the current absenteeism in both the Galway and Merlin Park Hospitals. And is absenteeism being addressed by Management.	Clr S Forde
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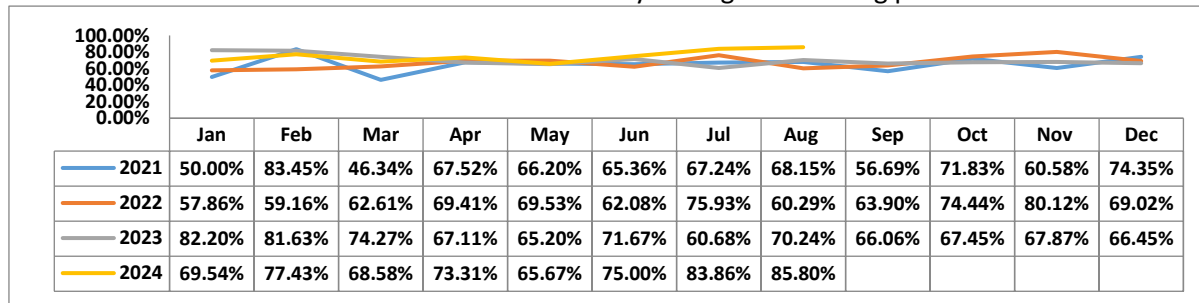
The August 2024 % absence rates by staff category are outlined in the table below:

Calendar Year/Month	Staff Category	Absence % Include Covid-19
AUG 2024	General Support	9.35 %
	Health & Social Care Professionals	6.79 %
	Management & Administrative	5.92 %
	Medical & Dental	1.27 %
	Nursing & Midwifery	7.54 %
	Patient & Client Care	11.03 %
AUG 2024		6.22 %

Galway University Hospitals manage and monitor absenteeism in compliance with the HSE Managing Attendance Policy.

Absenteeism is proactively addressed by Management. Managers have a discussion with employees following each absence from work. This is monitored on an ongoing basis through collation of meeting data below -

The rate of Return to Work Discussions carried out by managers following periods of absence are:



Overall, the management of absenteeism is a key focus of Galway University Hospitals management Team.

A. Cosgrove, Interim CEO, Saolta University Health Care Group

W112Q4071	What is the procedure and help for people who have been diagnosed with long term Covid.	Clr F Gurn
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GUH accept patients from Sligo, Leitrim and Donegal referred to the GUH Long Covid Clinic by their GP. The GUH Long Covid Clinic runs weekly on Monday mornings.

In addition to the weekly combined clinic which takes place in UHG led by Infectious Diseases & Respiratory Consultants/and a Multi-Disciplinary Team (MDT) consisting of Physiotherapist, Occupational Therapist, Psychologist, a second clinic held monthly commenced in March 2024 in Merlin Park University Hospital which is led by Respiratory Consultant.

Urgent referrals are seen within 2 weeks and routine referrals are seen within two months.

A. Cosgrove, Interim CEO, Saolta University Health Care Group

W112Q4072	What is the procedure and help for people who are diagnosed with lime disease.	Clr F Gurn
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There are currently guidelines available from the HSE on the diagnosis and treatment of Lyme disease available at: <https://www.hse.ie/eng/services/list/2/gp/antibiotic-prescribing/conditions-and-treatments/skin-soft-tissue/lyme-disease/> (updated October 2021). These guidelines are appropriate for GP community antibiotic prescribing.

For more complex cases of Lyme disease, medical staff would generally refer to UK guidelines (NICE or British Infection Association) or US guidelines (Infectious Diseases Society of America).

Doxycycline is the first line for treatment of early non-disseminated Lyme disease as well as for post-exposure prophylaxis of Lyme disease. Amoxicillin and azithromycin may also be used in certain instances.

10 days is the recommended duration in the more recent guidance. Alternatives are available in case of allergy, pregnancy, etc.

More complex infections (including early disseminated or later stage infection) are managed by treating physicians with advice from Microbiology and/or Infectious Diseases teams.

Department of Public Health

W112Q4073	What are the cost of the cases that we hear about in the media for cases of negligence against the HSE in ChO1 that cases go to the high court and are settled, from 2019 to 2023?	Cllr F Gurn
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The information contained within this document was extracted from the National Incident Management System (NIMS).

As at the end of August 2024, the State Claims Agency has finalised 80 claims between 1 January 2019 and 31 August 2024, which were issued in the High Court, relating to Community Healthcare Organisations (CHO) Area 1. The claims were managed by the SCA and only one resulted in a decision of the Court. No damages were awarded in respect of this claim.

State Claims Agency

W112Q4074	Existing panels and Recruitment Practices – Can you provide and update on the current status and effectiveness of the live and active panels for recruiting additional staff at Nenagh Hospital and what specific procedures and protocols are being followed to ensure transparency and efficiency in hiring	Cllr S Morris
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For recruitment campaigns across UL Hospitals Group, there are live and active panels in place for specific staff grades/posts and these are utilised in the first instance.

Any positions not filled via our live panels are advertised on the HSE website in line with recruitment procedures and protocols.

N. Spillane, A/CEO, UL Hospitals Group

W112Q4075	Staffing for new developments and challenges filling posts – How is the recruitment progressing for the new developments at Nenagh General Hospital particularly for the new MAU with extra approved hours and what are the main challenges faced in recruiting staff for upcoming posts, especially in light of the recent announcements about staff positions	Cllr S Morris
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We are working with all stakeholders on planning for the continued expansion of our MAU services in Ennis, Nenagh and St John’s hospital, including a further extension of opening hours.

A scoping exercise has been completed to identify the resource requirements to 1) extend opening hours until midnight; or 2) implement a 24/7 model.

A number of posts have been approved for Nenagh MAU in order to facilitate the expansion of the MAU service and we are currently progressing the recruitment process.

We also continue to consult and engage with trade union colleagues on the wider expansion plans.

Pending a successful outcome to discussions with staff representatives and the completion of the recruitment campaign, details of the gradual increase in opening hours will be clarified in due course.

N. Spillane, A/CEO, UL Hospitals Group

W112Q4076	How many (please break down by Hospital in the Mid West Region and type of appointment and operation) appointments and operations have been cancelled during the most recent de-escalation of the UHL site?	Cllr S Morris
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Not available at time of issue.

N. Spillane, A/CEO, UL Hospitals Group

W112Q4077	What safeguards have been put in place to assure that the building built and kitted out as the new 50 Bed Nursing Home in Nenagh will be brought up to standard as a step down medical facility.	Cllr S Morris
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The 50-bed unit in Nenagh has been constructed in line with the latest building regulations and healthcare standards.

Each bedroom is designed for single-occupancy use (with the exception of two twin rooms), and the facility includes comprehensive electrical and mechanical services, such as bedhead services and piped oxygen.

A project evaluation group, consisting of clinical staff, was formed to assess the suitability of the unit as a step-down rehabilitation facility. The group determined the criteria for identifying suitable patients for transfer to the facility and assessed the competence of the private operator to manage the unit effectively.

N. Spillane, A/CEO, UL Hospitals Group

W112Q4078	Reports from Ballinasloe suggest that non-national healthcare workers are increasingly choosing to leave for opportunities abroad, where more favourable job and living conditions are reportedly available, and there is a risk that future workforce streams may not be attracted to fill local vacancies in PUH and in nursing homes. Given the critical need for accommodation in Ballinasloe for healthcare workers in areas facing workforce shortages—how will the HSE seek to address this real concern that the absence of a period of guaranteed accommodation for incoming staff will negatively impact both recruitment and retention efforts?	Cllr E Francis Parsons
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Currently we do not have an issue filling approved vacant posts (within our approved expenditure limits) in the Ballinasloe area specifically. However, the issue around accommodation in general is included as an action in the HSE Recruitment and Resourcing Strategy. The Assistant National Director, HR - Recruitment Reform and Resourcing has established a working group to explore remedies in sourcing and accessing accommodation for staff and we await any recommendations identified to address the issue for the entirety of Community Healthcare West.

J Fitzmaurice, Chief Officer, Community Healthcare West

PUH has not encountered any difficulty in filling posts as a result of local accommodation availability. The Human Resource Department and Medical Manpower Department at Portiuncula University Hospital provide information, support and guidance to non-Irish national healthcare workers in relation to living locally in Ballinasloe and the surrounding area (information booklet provided in advance) this booklet covers all aspects of life in Ballinasloe on what's available to include information on schools and auctioneers regarding accommodation. In addition, NCHDs/Consultants commencing work in the Irish healthcare system are provided with the 'Working as a Doctor in Ireland NCHD Guide by the National Doctors Training & Planning'. In certain circumstances they are provided with temporary bridging accommodation until they secure more regular accommodation. A comprehensive enhanced induction is given to all international graduates both nursing and medical and part of this induction covers living in Ballinasloe this is provided by staff who live in Ballinasloe.

A. Cosgrove, Interim CEO, Saolta University Health Care Group

W112Q4079	Could you please provide detailed information on the number of addiction counsellors provided in Ballinasloe, East Galway, including the separate referral pathways for accessing one-on-one individual addiction counselling services specifically for gambling, for alcohol, for drugs and for multiple co-existing addictions.	Cllr E Francis Parsons
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The Community Healthcare West Drugs Service currently has one Addiction Counsellor that covers the Ballinasloe area.

There are three referral pathways to the service:

- (1) Clients and their family members can self-refer to the service
- (2) GP's and hospitals can refer people to the service via the Healthlink portal.
- (3) Allied Health and Social Care staff can refer people using a dedicated referral form.

The CHW Regional Drug Service also operates a Service Level Agreement with Helplink for two Addiction Counsellors who provide individual and group therapy for people with gambling and gaming addiction.

J Fitzmaurice, Chief Officer, Community Healthcare West

W112Q4080	What additional diagnostic facilities have been established in Primary Care Centres and District Hospitals in Mayo to bring services closer to patients? Additionally, what role is telemedicine playing in reducing the need for travel for patients in rural areas?	ClIr M Kilcoyne
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Primary Care Services:

The table below outlines the availability of X ray and Ultrasound in Primary Care and District Hospital settings.

Location	X Ray	Ultrasound
Castlebar Primary Care Centre	Yes	Yes
Tuam Primary Care Centres	Yes	Yes
Claremorris Primary Care Centre	No	Yes
Ballina District Hospital	Yes	No
Belmullet District Hospital	Yes	No

We continue to develop the Mayo services to meet the needs of our patients. Cardio stats monitoring devices, allowing abnormal heart rhythms to be detected, have recently been purchased. We also have access to echocardiograms and spirometry in Mayo University Hospital. However accessing diagnostics in Galway is not possible for chronic disease patients residing in Mayo.

Telehealth was utilised extensively during the Covid Pandemic, whilst patients are now primarily offered a face to face appointment, telehealth appointments remain available if the clinician identifies that this medium will meet the patients clinical needs.

Older People Services:

In December 2023 Community Healthcare West launched a mobile x-ray service for older people and people with disabilities in partnership with Mobile Medical Diagnostics. This free, community-based service is available to older patients in nursing homes, community facilities and in their own homes. People referred by their GP have x-rays taken in their nursing home or facility where they reside instead of having to travel to a hospital. All types of x-rays are facilitated, including chest, hip/pelvis, knee, wrist and shoulder. The service has steadily grown in capacity since the launch in December, and figures for July 2024 are as follows;

81 patient visits were made in July 2024 and this included referrals from 33 Nursing Homes both public and private. In total 105 x-rays were performed, and 80 of the 81 older people referred avoided a transfer to the acute hospital. This resulted in 160 ambulance trips that were avoided.

J Fitzmaurice, Chief Officer, Community Healthcare West

W112Q4081	Given the recommended number of GPs in County Mayo is not being met, can the Saolta Group provide specific targets and timelines for increasing the number of GPs in our area? For instance, how many GPs do you aim to have recruited and operational in the next 12 months, and what is the plan to achieve this? What additional strategies will be implemented if the current initiatives, such as the "Rural Fellowship Programme," continue to fall short of attracting candidates? What specific extra support and incentives are being offered to ensure that	ClIr M Kilcoyne
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positions in rural and deprived areas are more attractive and sustainable for GPs, beyond what has been mentioned?

Advertising of GMS Vacancies:

When a GP resigns or retires from the GMS Scheme, the position is advertised by the Health Service Executive. If the position is filled following an interview process, the GMS panel of the outgoing GP is allocated to the new GP. All such vacancies in Mayo that have arisen in recent times have been advertised. Some have been filled by GMS GPs. Where this did not occur, GPs have been recruited through Locum Agencies. Therefore all Medical Card patients of GPs in the county, who have exited the GMS Scheme in recent times, have a GP at the present time.

Open Entry Arrangement:

Any qualified General Practitioner, who is on the Specialist Register in the speciality of General Practice with the Irish Medical Council, is entitled to apply for entry to the GMS Scheme through the Open Entry Arrangement. If successful, the GP is granted a GMS Contract without a panel of patients. This GP can then accept new Medical Card patients on to their GMS panel, or existing Medical Card patients can transfer to the new GP if they wish. Most GPs who join the GMS Scheme in this way, join existing GP practices, as it would be very difficult for a new GP to set up business on their own without a panel of patients. The initiative to join the GMS Scheme in this way must come from the GP, as the HSE has no panel of patients to offer to potential candidates.

In an effort to fill some long term vacancies in Mayo, Roscommon and Galway, Community Healthcare West has recently submitted a proposal to the HSE at national level seeking approval for enhanced Terms and Conditions to apply to positions that are challenging to fill and a reply is awaited. It is hoped that if this proposal is approved, that such positions may prove to be more attractive to potential candidates than heretofore.

Although Community Healthcare West has been unsuccessful to date in attracting candidates to work in this area under the “Rural Fellowship Programme” or the “Non EU GP Scheme” operated by the Irish College of General Practitioners, liaison will continue with the college in the hope of attracting more GPs to work in Community Healthcare West, particularly in rural areas.

J Fitzmaurice, Chief Officer, Community Healthcare West

W112Q4082

Following the government’s recent decision to lift the ban on recruitment in the HSE, how many positions have been filled and in what grades and what locations in County Mayo? (MUH and Sacred Heart Hospital, Castlebar)

Clr M Kilcoyne

Mayo University Hospital:

Since the end of the recruitment ban on 15th July 2024, the following have been recruited and have undertaken their roles in MUH:

Title	Grade	Location	Start date
Medical Scientist, Staff Grade (Microbiology)	3875	MUH	22/08/2024
Staff Midwife	2143	MUH	26/08/2024

Please note that also in 2024 year to date, the following posts were filled and closed during this time:

Staff Category	Grade Description	WTE	
Health & Social Care Professionals	Physiotherapist, Senior	1	Filled - Closed-01.07.2024
Health & Social Care Professionals	Radiographer, Clinical Specialist	1	Filled - Closed-17.06.2024
Nursing & Midwifery	Director of Nursing 1, Assistant	1	Filled - Closed 08.07.2024
Nursing & Midwifery	Staff Midwife	1	Filled - Closed 10.06.2024
Health & Social Care Professionals	Medical Scientist	1	Filled - Closed 22.08.2024
Nursing & Midwifery	Clinical Nurse Manager 1	1	Filled- Closed 13.05.2024

Currently, the below table represents additional posts in active recruitment processes at this time.

Grade Description	
Physiotherapist-in-charge (Grade III)	1
Medical Scientist	1
Clerical Officer	2
Grade IV	2
Grade VIII	1
Grade VI	2
Staff Midwife	6
Staff Nurse - General	14
Clinical Nurse Manager 3	1
Advanced Nurse Practitioner (General)	2
Clinical Midwife Specialist	1
Clinical Nurse Manager 2	1

A. Cosgrove, Interim CEO, Saolta University Health Care Group

Sacred Heart Hospital, Castlebar:

In relation to the Sacred Heart Hospital, Castlebar Co Mayo, the current recruitment position is as follows:

SHH, Castlebar, Co Mayo			
Staff Grade	Stage 1 Approval Requested	Stage 2 Approval Requested	Grand Total
Attendant, Multi-Task		1	1
Clinical Nurse Manager 1		1	1
Health Care Assistant	1	1	2
Staff Nurse - General	1.64		1.64
Grand Total	2.64	3	5.64

J Fitzmaurice, Chief Officer, Community Healthcare West

W112Q4083	How many agency staff in total are currently working in the HSE in Mayo? What is the total cost of employing these agency staff and if these people had been employed directly by the HSE what the cost would have been in 2023 and 2024 to date. (MUH and Sacred Heart Hospital, Castlebar)	Cllr M Kilcoyne
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Mayo University Hospital:

	2023	2024 (Jan-July)
Total cost for Agency staff	€7,565,718.66	€4,415,878.79
Estimated figures if staff directly employed by HSE	€5.4m	€3.2m

Please be advised that Consultant costs make up 37.5% of the overall agency spend in 2023 and 50.2% of the overall agency spend for 2024.

The detail required for MUH agency staff will be provided by separate cover as it is unavailable at time of issue.

Agency workers were hired to cover short term needs such as filling in for shifts or covering employees on leave. This flexibility allows each of the services to maintain operational continuity without long term commitments. However, a small percentage of agency workers are used for full time cover. This is typically due to ongoing skill shortages, project based work, or the need for specialised expertise that isn't readily available in the permanent workforce. Employing agency workers full time can also

offer services the ability to adapt quickly to fluctuating demands without the costs or obligations associated with permanent hires.

A. Cosgrove, Interim CEO, Saolta University Health Care Group

Sacred Heart Hospital, Castlebar:

- There are eighteen staff in total working in the Sacred Heart Hospital in Castlebar
- Cost of employing agency staff; 2023 = €1,082,000
2024 (as of end of July) €706,000
- In order to maintain safe staffing levels with the CNU, agency staff are deployed to cover approved vacant posts and other approved leave types/short-term absences/outbreaks.

Sacred Heart Hospital, Castlebar	2023	2024 (Jan-July)
Total cost for Agency staff	€1,082,000	€706,000
Estimated figures if staff directly employed by HSE	€800,000	€580,000

J Fitzmaurice, Chief Officer, Community Healthcare West

W112Q4084	I call on the HSE to urgently address the critical waiting lists and staffing shortages in Sligo/Leitrim primary care Speech and Language Therapy services. In 2023, nine staff-grade Speech and Language Therapists (SLTs) were employed, yet only two posts are currently filled. When will the remaining seven vacancies be addressed? In Carrick-on-Shannon, the 2023 allocation was four full-time SLTs. From September 2024, only one post will be filled. When will the other three vacancies be filled? Furthermore, the Clinical Specialist SLT post for Autism services previously advertised remains unfilled. Why is this the case?	Clr P Farrell
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The HSE continue to prioritise referrals based on clinical need.

In order to provide some support to parents while awaiting appointments, the Speech and Language Therapy department will roll out a new drop in Advice Clinic for families of children waiting for initial assessment from this month. Advice Clinics will run in Sligo and Carrick on Shannon each month for the remainder of 2024.

The HSE continues to strive to provide a high quality service and apologises for any disruption to service and increased wait times for children/ adults awaiting appointments.

The current staffing levels in Primary Care Speech and Language Services in Sligo/ South Donegal and Leitrim/ West Cavan Community Healthcare Networks (CHNs)

Area	Number of Posts Filled 24 th Sept 2024	Number of Posts Vacant
Sligo/ South Donegal CHN	<p>3.26 WTE SLTs in post in Paediatric Services (3 Senior SLTs and 1 Staff Grade SLT)</p> <p>2.0 WTE Senior SLTs in post in Adult Services</p>	<p>4.0 WTE Staff Grade SLT posts are currently vacant in Paediatric Services</p> <p>1.0 WTE Staff Grade SLT post is currently vacant in Adult Services</p> <p>3 posts vacant since 2023 (Sep – Nov 2023)</p> <p>2 posts vacant in 2024</p>

Leitrim/ West Cavan CHN	0.8 WTE Senior SLTs in post (both adults and paediatrics). 1.0WTE Staff SLT (paediatrics) in post	1.0WTE Senior SLT Vacancy (Paediatrics) 1.0WTE Staff Grade SLT vacancy (Paediatrics and adults) 1 vacant post since 2023 (Sept. 2023) 1 vacant post in 2024
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In 2023, there were eight approved Staff Grade SLT in post. However, a Staff Grade SLT post, which was vacant due to Statutory Leave, was temporarily backfilled in 2023. Consequently, for a short period in 2023, there were nine Staff Grade SLTs in post.

In 2023, a development post was approved for Clinical Specialist SLT for Autism Services in Primary Care Sligo Leitrim. This post was advertised and a panel was formed in 2023, however it was impacted by the subsequent recruitment pause.

CH CDLMS have been actively working to fill posts via Agency conversion, new Development Posts and vacancies arising in 2024 from retirements, resignations and promotions, in the context of the agreed Pay and Numbers Strategy for 2024 and WTE limits applicable to the HSE west and northwest region. A number of posts in our services have been progressed across clinical and management roles. The service is continuing to examine opportunities to prioritise recruitment to the above grades in this context and in order to respond to the needs of the population.

D Monaghan, Chief Officer, Community Healthcare Organisation, (Cavan, Donegal, Leitrim, Monaghan, Sligo)

W112Q4085	I request an update on the development of the proposed 2nd Primary Care Centre for Ennis town.	Cllr M Howard
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The second Primary Care Centre intended for Ennis, Co Clare has experienced significant delay. An application by Valley Healthcare to An Bord Pleanála was only finally closed out in late April of this year. The HSE has advised the developer that it is not in a position to renegotiate the commercial terms but can proceed with the project based on the original terms. If this is not acceptable to the developer, then the HSE remains committed to the project and will proceed with alternative options. The matter is due for review in the coming weeks. If a re-advertisement of this project is necessary this will be progressed in Q4 of this year.

Joe Hoare, Assistant National Director, HSE Capital & Estates

W112Q4086	The HSE currently supports a Social Prescription Service in Tuam, Athenry, and Loughrea, Co. Galway, which has been shown to improve health and wellbeing while reducing social isolation and loneliness. However, many other communities could also benefit from this service. When does the HSE plan to expand the Social Prescription Service to Ballinasloe, Portumna, and other areas across the county?	Cllr E F Parsons
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Social prescribing has been developing incrementally throughout Ireland over the past decade. Generally, a social prescribing link worker serves a population of approximately 30,000 - 50,000. The Sláintecare Healthy Communities area in the Erris and Achill areas of North Co. Mayo and the Integrated Care Programme for Older People (ICPOP) have received funding from each programme for a Social Prescriber/Community Connector Link Worker.

Last year the HSE approved funding for the further development of social prescribing in Community Healthcare West and 4 link workers were recruited as follows:

- 1 x Galway city,
- 1 x Community Healthcare Network CHN 7 (Tuam, Athenry & Loughrea)
- 1 x Roscommon
- 1 x Mayo

Following this development, in Galway 2 social prescribing link workers were recruited by Galway Rural Development x 1 and Galway City Partnership x 1 under a Service Arrangement with HSE Community Healthcare West.

A proposal has been prepared for submission to further expand social prescribing in County Galway to include the 3 remaining Community Healthcare Networks (CHN 4 West Galway, CHN 6 Central Galway & East Galway City & CHN 8 East Galway (Ballinasloe) & South Roscommon). Which will be progressed if funding opportunities becomes available.

A Social Prescribing Leaflet is [attached](#) for more information.

J Fitzmaurice, Chief Officer, Community Healthcare West

W112Q4087	<p>September marks Gynaecological Cancer Awareness Month, highlighting the critical importance of HPV infection prevention in reducing the risk of cervical cancer. HPV infection is responsible for 99% of cervical cancer cases and is also linked to a range of other cancers affecting all genders, including cancers of the head, neck, anus, and penis.</p> <p>In Ireland, approximately 150 people die each year from HPV-related cancers. While vaccination programs are key to prevention, they typically rely on parental or guardian consent, which can be influenced by the quality of information, communication, and understanding provided. There remains a clear unmet need to support young people, particularly those aged 16 to 18 and older, who may not have received the vaccine during their school vaccination program at ages 12/13 due to lack of parental consent but now wish to be vaccinated as independent adults.</p> <p>For many, private vaccination is prohibitively expensive, and confidentiality concerns further complicate access. Given the vaccine's proven long-term health and economic benefits, how does the HSE plan to identify and provide vaccination to this distinct group, ensuring they are adequately protected?</p>	Cllr E F Parsons
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The most up to date resource for information on the programme for 24/25 is

<https://www.hse.ie/eng/health/immunisation/pubinfo/schoolprog/hpv/hpv-information-materials/>

Decisions regarding funding & cohorts for vaccination programmes are taken at Department of Health level on the basis of recommendations made by the National Immunisation Advisory Committee (NIAC). NIAC provides evidence-based advice to the Chief Medical Officer and Department of Health on vaccines.

The HPV vaccine has been offered to girls in their first year of secondary school since 2010.

Since September 2019, boys have also been offered the HPV vaccine. This is to protect children from HPV before adulthood and likely exposure to HPV.

All children at 12-13 years of age should receive HPV vaccine as part of the national HPV vaccination programme. The vaccine is most effective in young people between 12 and 13 years old compared with older teenagers and young adults.

In December 2022 the DoH provided funding to expand access to HPV vaccination programme in 2022 through the Laura Brennan HPV Vaccine Catch-Up Programme. Funding for this programme has now ceased. The Department of Health funding for the 2nd level school immunisation states that the programme for 24/25 is only available to those in first 1st year.

The HSE immunisation teams are tasked with implementing these DoH recommendations and can only provide the vaccinations for children in 1st year as detailed in the policy.

J Fitzmaurice, Chief Officer, Community Healthcare West

W112Q4088	<p>Could the Regional Health Forum be provided with an update on when a design team is expected to be appointed for the Ballina District Hospital 75-bed new build project? Additionally, what is the anticipated timeline for the development, including when the facility is expected to be ready to accept its first admission?"</p>	Cllr M Loftus
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It is intended to commence the process for the procurement of a design team for this project over the coming months. This will be done via the establishment of new design team frameworks for the region. It is hoped to have the design team procurement process completed in Q1 2025. It will then take a number of years to progress the scheme through the statutory approvals, design, tender, construction and equipping phases.

Joe Hoare, Assistant National Director, HSE Capital & Estates

W112Q4089	Can the Regional Health Forum be provided with an update on the progress made towards the establishment of a Minor Injuries Unit at Ballina? Has there been any advancement in planning, resourcing, or setting a timeline for this initiative?"	Clr M Loftus
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As part of a national plan for the expansion of Injury Units, an Implementation Group was established in 2024 with the objective of developing a proposal to provide more equitable and convenient access to Injury Units for an appropriate cohort of suitable patients. As part of same, criteria such as population within a 30-minute drive time, population need and equitable access, Ballina has been identified as a suitable region in this regard and will be included in the overall expansion plan.

This Implementation Group will submit a national proposal to the Senior Management Team and subsequently to the Department of Health.

A. Cosgrove, Interim CEO, Saolta University Health Care Group

W112Q4090		
W112Q4091	Can the HSE confirm what the winter plan is for A&E and its estimated costs, in Galway hospitals please.	Clr D Killilea

Galway University Hospitals:

As high numbers of attendances to our ED Department continues, work to address the sustained pressure on UHG is ongoing. We continue to focus on a number of issues including trying to reduce numbers of patients on trolleys in ED, reduced wait times for bed allocation for the longest waiting patients in ED and a reduction of > 24 hour ED breaches.

In order to achieve these priorities we are focusing on the following:

- **EDTA:** We continue to use the Emergency Department Transit Area for surge capacity and prioritise patients >75 years, providing cubicle spaces and privacy while the patients await a bed at ward level. **Patients >75 years** are prioritised for a bed and waiting no longer than 24 hours. Breaches >24hrs are recorded as incidents. These are monitored closely.
- Seek to recruit **(ED) Emergency Department Consultants**. Two new ED Consultants are in post since January and February, a third Consultant commenced in August with another post due to commence in Spring 2025. There are now 6.5 ED Consultants in place. An ED Senior Consultant is available each day 7/7 (on site Saturday and Sunday/Bank Holiday Monday), with an extended onsite day as a result of the increased consultant staffing.
- A **second Registered Advanced Nurse Practitioner for Paediatrics in the Emergency Department** has commenced in September 2024. This service will be covered 5/7 days from 08.00-20.30hrs. It is anticipated that this impact will reduce Paeds ED waiting times /time to discharge.
- GUH have twice daily **Safety Flow Huddles**/operational hub meetings to ensure all day to day operations of patient flow are operationalised and functioning with clear escalations in place. The key focus is managing patient safety at all times.
- **Mars (Multidisciplinary Allied Response Team)** and **FFD (frailty)** team are present in ED and ensure early intervention for frailty screening and also admission avoidance. The HSCP team and Frailty Intervention teams provide a Monday to Friday service, however, some vacancies are impacting capacity. Physiotherapy provide a 24/7 emergency on-call service which includes facilitating same day discharge. This can also provide a sessional weekend service for acute respiratory and orthopaedics.
- **Egress**-There is a continued focus on Integrated Length of Stay weekly rounds & >14 days patients assisted discharge/discharge planning, in collaboration with CHO west colleagues.
- Service agreements have been put in place with both the Galway Clinic and the Bon Secours to provide **(30) medical/frailty beds** to support bed capacity for GUH.
- The **Pathfinder service** (alternative pathways for older patients who can be treated for non-urgent issues without having to attend ED) commenced in May 2023. This service operates 8 a.m. to 8 p.m. Monday to Friday for patients

>65 years. The Pathfinder team (Physio/OT/AP) respond to low acuity calls, to prevent conveyance to ED. We continue to work with our community colleagues on ways to optimise the calls.

- **OPRaH** (Older Persons Rehabilitation at Home): Early Supported Discharge to enable selected patients to return home on average 8 days sooner from hospital.
- **Patient Flow and Discharge Co-ordinators** are in place for extended day Monday to Friday and onsite 7/7.
- **Integrated Discharge Planning** Tracker meetings are in place with GUH Senior Management and CHO Senior Management in attendance to maximise discharges to Community Hospitals & Long Term Care facilities. We continue to work closely with our community colleagues on egress/integrated discharge rounds to ensure we are utilising every possible avenue. The Integrated Discharge Manager for CHO West links closely with Public and Private nursing homes to help progress the discharge process.
- **Cohorting phase 2** -Over the last year there has been a significant amount of work done on the UHG site, to focus on improving patient experience times within ED and improving the patient journey including discharge planning. A key enabler to assist in this work was the cohorting pilot project that ran from May to September 2023. Phase 2 of cohorting has commenced on the 11th of September 2024, we hope to see a number of positive impacts for our patients, including reduced Patient Experience Times, a better quality patient journey within the hospital and decreased Length of Stay. Several positive impacts for our Clinical, Nursing and HSCP staff will include a reduction in boarders and outliers, reduction in “Safari Rounds” which increases Clinician/Patient contact, supported Multidisciplinary team processes, improvements in Bed Turnover with planned discharges (Early Morning Discharges) and improvement in Discharge Planning.
- Patient flow team have developed a weekly **deep dive analysis tool/report** of all inpatients, which assists on highlighting any patient flow issues and is circulated to all relevant managers to address any blockers to patient flow.
- Initiatives with the aim of Hospital Avoidance for patients are progressing. Currently the **Navigational Hub** which was a Slaíntecare funded pilot programme has the potential to significantly reduce ED attendances and save hospital bed days. Over a five month period the hub has dealt with 108 referrals with two thirds of these patients avoiding an ED visit as a result. 59 patients were diverted to new or existing pathways. Within one week of receiving the referral in the Navigational Hub, 78% of patients were seen by the appropriate specialist. For patients aged 75 or older, 35 were referred to the hub and 28 (80%) avoided ED attendances as a result.

In addition to the above priorities:

- ✚ A Service plan submission for staff has been included in the Estimates process for 2025 and is being progressed to create 4 additional rehab beds in Merlin Park University Hospital. This will assist in the improvement in rehab activity for the unit as a whole, reducing length of stay in the unit and will also have a positive cascade effect, as freeing up capacity in MPUH and will allow greater transfer of patients from UHG, on the rehab waiting list. Due to the demand/capacity deficit in Rehab, there is a constant list of patients, some of which are rehabbed on the UHG site, reducing capacity on the acute site.

- ✚ Our Flu Vaccination and COVID Booster programme for staff is to be rolled out in October.

Portiuncula University Hospitals:

As part of Hospital’s Winter Plan and the HSE’s Urgent and Emergency Care Operational Plan 2024, the hospital will continue to focus on reducing the waiting times for patients in the Emergency Department, reducing the waiting times for bed allocation and meeting the targets in relation to patients waiting >greater than 24 hours and patients over 75 years. This plan has been in progress over the past two years and will continue and be developed year on year.

The hospital has implemented a number of measures including:

- Continue to utilise all inpatient beds and surge beds at ward level to facilitate capacity within the Emergency Department.
- Patient Flow Team including Discharge Co-ordinator and In-patient Co-ordinator in place to optimise flow to wards of allocated patients.

- Frailty at the Front Door pathway implemented including a Consultant Geriatrician who was appointed and joined the team in April 2024. Pathway linked to OPD and Community ICPOP Clinics and a medical registrar post is in recruitment at present time.
- Work within ED escalation framework to ensure Triage times <15 min from registration.
- The Emergency Department Consultants operate an on call rota at weekends and are onsite between 9am and 7pm.
- Separate streaming pathway in place for Paediatric presentations to allow for rapid triage and treatment.
- Optimise use of all CNU/Egress beds/Model 2 Roscommon beds.
- Escalation plan in place to manage the waiting times of patients aged 75years or older - Project is in progress to develop a pathway for >75yrs with dedicated sessions in AMU provided by the Consultant Geriatrician and other consultant. It is planned to reopen our AMAU in December 2024.
- Discharge Lounge in place for suitable patients ensuring a quick turnaround of beds.
- Safety Huddle each morning with ward managers and senior nursing and the General Managers office in attendance
- Weekly >14 Length of Stay review of all patients every Monday with multi disciplinary teams and Senior Manager - with a site target of less than 20 patients.
- The target for patients categorised as Delayed Transfer of care is less than 7. We continue to work with CHO colleagues on complex cases - challenges with homelessness and complex psychiatric patients (anorexia) - pathway currently being developed for this category
- All inpatients have a comprehensive plan for discharge, developed in conjunction with community services and a predicted date of discharge is assigned at time of admission.
- We continue to focus on maximum number of discharges daily to prevent hospital using surge capacity.
- Integrated meeting to identify DTOCs is in place. A daily review by Patient Flow Team identifies potential DTOCs/highlight complex patients before they become a DTOC.
- **In addition to the above priorities:**
- The hospital opened 12 additional beds in 2023, which has had a significant impact on improving patient flow from the Emergency Department and reducing the number of patients awaiting beds. Funding for additional staffing for these 12 beds to included nursing, support staff and allied health professionals all recruited and in place. Funding received for the 12 bed including pay and non-pay was €1,916,681 recurring plus pay increases as applicable
- The opening of a new 50 bedded single room accommodation block in mid-October will improve the patient's journey, reduce length of stay and reduce the volume of in-house patient transfers between wards. There will be no loss of beds.
- A new Consultant in Emergency Medicine will commence in November 2024, bringing the overall number of Emergency Medicine consultants to 4.
- It is planned to re-establish the Medical Assessment Unit in one of the vacated wards in the late Q4 following the relocation of two existing wards to the new 50 bedded replacement ward block. This will impact 8am trolley numbers and PET times, project is in progress to develop a pathway for >75yrs with dedicated sessions in AMU provided by the Consultant Geriatrician and other consultants.
- Roll-out of Flu and COVID vaccination programme for staff.
- Recruitment of medical and nursing staff is on-going.

A. Cosgrove, Interim CEO, Saolta University Health Care Group

W112Q4092	Can the HSE confirm what the waiting times are for elective surgeries in Galway Hospitals.	Clr D Killilea
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Galway University Hospitals:

GUH currently has 8,327 patients and PUH has 789 patients awaiting an inpatient or day case procedure. Due to the increasing volume of outpatient activity being carried out in both hospitals (11% increase year on year), there is a consequent increased demand for inpatient and day case procedures. Both hospitals are continuing to use maximise all available capacity and have a particular focus on facilitating long waiting patients. This includes providing a significant number of additional day case surgeries at weekends and utilising capacity in private hospitals. Inpatient non-urgent elective surgeries for complex patients continues to pose a significant challenge due to lack of capacity.

Below are the active waiting list figures for GUH:

Galway University Hospital IPDC Active Waiting List

Row Labels	0-3 Mths	3-6 Mths	6-9 Mths	9-12 Mths	12-15 Mths	15-18 Mths	18-24 Mths	24-36 Mths	36-48 Mths	48+ Mths	Grand Total
Cardio-Thoracic Surgery	33	15	11	2							61
General Surgery	291	213	195	209	107	60	120	124	82	125	1,526
Gynaecology	164	87	26	34	24	11	27	39	25	14	451
Maxillo-Facial	330	72	34	32	21	12	17	29	2	11	560
Obstetrics	1										1
Ophthalmology	367	178	107	91	47	43	49	52	15	15	964
Orthopaedics	398	233	135	88	48	30	32	15	2	3	984
Otolaryngology (ENT)	209	177	146	163	104	36	53	57	16	24	985
Plastic Surgery	429	218	155	140	85	47	36	53	43	77	1,283
Urology	367	202	112	95	60	42	67	57	40	64	1,106
Vascular Surgery	182	155	35	10	7	4	5	6	1	1	406
Grand Total	2,771	1,550	956	864	503	285	406	432	226	334	8,327

Row Labels	0-3 Mths	3-6 Mths	6-9 Mths	9-12 Mths	12-15 Mths	15-18 Mths	18-24 Mths	24-36 Mths	36-48 Mths	48+ Mths	Grand Total
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Plastic Surgery	429	218	155	140	85	47	36	53	43	77	1,283
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Vascular Surgery	182	155	35	10	7	4	5	6	1	1	406
Grand Total	2,771	1,550	956	864	503	285	406	432	226	334	8,327

Portiuncula University Hospital:

Part 1:-Elective WL by Speciality, by Wait times

PUH Active Elective WL By specialties & Wait Time

Count of MRN	Wait Time Bands						
Specialty	0-3 Mths	3-6 Mths	6-9 Mths	9-12 Mths	12-15 Mths	15-18 Mths	Grand Total
Gastro-Enterology	2						2
General Surgery	269	55	2				326
Gynaecology	80	79	33	30	23	9	254
Maxillo-Facial	3	3		1			7
Pain Relief	19	26	21	22	23		111
Plastic Surgery	33	2	2	4	1		42
Respiratory Medicine	3	1					4
Urology	36	2	4	1			43
Grand Total	445	168	62	58	47	9	789

A. Cosgrove, Interim CEO, Saolta University Health Care Group

W112Q4093	Can the HSE confirm the number of cases of sepsis presenting to A&E over the last 2 years. What were the number of deaths from same presentations and is there an increase in the numbers and an opinion why.	Clr D Killilea
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Galway University Hospitals:

In the last two years (01/07/2022-30/06/2024) there were 1,317 cases (discharges) who were admitted to GUH as an Emergency or Emergency readmission and had a diagnosis relating to Sepsis. This amounted to 678 for 1 year requested in May 2024 (01/04/2023 & 31/03/2024).

There were 317 cases in the Hospital, where the patient later died, who were admitted as an Emergency or Emergency readmission in the last two years (01/07/2022-30/06/2024.) Please note that this categorisation does not confirm that the patient's death was as a result of sepsis. We cannot provide the number of deaths specifically as a direct result of sepsis as a patient may already have another diagnosis or primary underlying condition and these figures would not accurately reflect the question being asked.

The National sepsis guidelines 2021 are implemented in GUH and the use of INEWS is audited quarterly.

Portiuncula University Hospital:

The below indicates the number of sepsis cases recorded in PUH from 1/6/22 to 30/6/24 (two years).

From January 2024, urosepsis is no longer captured or coded as per national criteria. We do not have a record of the number of deaths from sepsis as there may be other underlying contributing factors such as chronic disease.

Portiuncula University Hospital	
Patients with sepsis in their admission as a diagnosis admitted 01/06/22-30/06/2024	
Total Number of Cases	487

A. Cosgrove, Interim CEO, Saolta University Health Care Group

W112Q4094	What is the expected delivery date and services going into the old Aras Mhuire Site, on Dublin road, Tuam. What staff will it take and from where?	Clr D Killilea
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The majority of space in Áras Mhuire is being repurposed to accommodate ICPOP Services on an interim basis providing clinical services and office administrative space for the ICPOP Team. The expected delivery date is the first week in October 2024 – 12.5 WTE staffing.

There are also plans to accommodate a number of Primary Care Services into Aras Mhuire, Ophthalmology, Paediatric Therapy Services and office accommodation for Nursing staff.

J Fitzmaurice, Chief Officer, Community Healthcare West

W112Q4095	What is the current status of St Joseph's Hospital, Stranorlar in relation to the recent HIQA order to close sections due to what was deemed "significant fire risks" and when will services be fully restored?	Clr G Doherty
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The HSE is currently carrying out essential fire safety works in St. Joseph's Community Hospital in Stranorlar, Co. Donegal. These fire safety works are being undertaken on a planned phased basis which will ensure the hospital is fully compliant with both Fire Safety Regulations and HIQA Fire Safety Regulations.

The Older Persons Services Management team is in continual engagement with HIQA and every effort is being made to ensure that works are completed in a timely manner.

The HSE confirms that all efforts are being made to minimise the impact to the residents within the community hospital. As a result of these ongoing works, a number of temporary service restrictions within St. Joseph's Community Hospital are in place, whereby short-term care and respite services have been limited for a duration of the fire works.

On completion of these essential and necessary fire upgrades, St. Joseph’s Community Hospital will be restored to a fully functional residential facility providing both long-term and short-term care for people within the area. There is an expectation that the bed numbers will be maintained as previous; however, this will be dependent on a HIQA inspection and ongoing registration.

Primary Care Services which were previously delivered from St Joseph’s Hospital are now operating from alternative locations as follows:

- Physiotherapy Service – Lifford Community Hospital and Donegal Town Community Hospital
- Occupational Therapy Service – Community Headquarters, St. Joseph’s Community Hospital, Stranorlar

All service users have been notified of arrangements for their appointments.

Work is ongoing in relation to securing a permanent location within the Twin Towns or Finn Valley area for the delivery of these primary care services.

The HSE is committed to the provision of excellent services for older persons in the Finn Valley area and we are focused on ensuring that residential, dementia and respite care beds are available through the continued refurbishment of St. Joseph’s Community Hospital, thereby ensuring it meets HIQA requirements. St. Joseph’s also has a vital role in providing step-down beds for Letterkenny University Hospital and we will ensure that St. Joseph’s remains as a flagship Community Hospital serving the Finn Valley area.

We will continue to provide you with further updates in relation to the progression of the works at St Joseph’s Community Hospital.

The HSE would like to apologise for any inconvenience caused as a result of these essential and necessary fire upgrade works.

D Monaghan, Chief Officer, Community Healthcare Organisation, (Cavan, Donegal, Leitrim, Monaghan, Sligo)

W112Q4096	What actions were taken following the January 2024 HIQA inspection report on St Joseph’s Hospital, Stranorlar, which identified 'significant fire risks that required urgent action'?	Cllr G Doherty
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Following the HIQA inspection in St. Joseph’s Community Hospital in January 2024 the HSE requested a Fire Risk Safety Assessment be completed. This identified a number of fire risks to be addressed throughout the hospital. As a result of this HSE Estates, the Provider and the Person in Charge met with the Fire Officer to develop a plan to address the risks identified as per the Fire Risk Safety Assessment.

While the works are being completed a number of additional control were added to include an additional staff member allocated on nights from 20.00- 08.00 hours to complete fire checks of the premises as outlined by the Fire Officer. The Fire safety upgrade works are in progress within St Joseph’s and are expected to be completed by December 2024.

D Monaghan, Chief Officer, Community Healthcare Organisation, (Cavan, Donegal, Leitrim, Monaghan, Sligo)

W112Q4097	Can the HSE confirm that ‘Fire Safety Risk Assessments’ have been conducted on all buildings managed by HSE Estates in Donegal, in particular those housing vulnerable patients and residents in light of the HIQA report stating that there was no ‘Fire Safety Risk Assessment’ in place for St Joseph’s Hospital, Stranorlar?	Cllr G Doherty
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Following a HIQA inspection of St. Joseph’s Community Hospital in January 2024 the HSE requested a Fire Risk Safety Assessment be completed. This identified a number of fire risks to be addressed throughout the hospital. As a result of this HSE Estates, the Provider and the Person in Charge met with the Fire Officer to develop a plan to address the risks identified as per the Fire Risk Safety Assessment.

While the works are being completed a number of additional control were added to include an additional staff member allocated on nights from 20.00- 08.00 hours to complete fire checks of the premises as outlined by the Fire Officer. The Fire safety upgrade works are in progress within St Joseph’s and are expected to be completed by December 2024.

D Monaghan, Chief Officer, Community Healthcare Organisation, (Cavan, Donegal, Leitrim, Monaghan, Sligo)

W112Q4098	I will ask at the next Regional Health Forum meeting if I could receive recent figures and eta's for ambulances dispatched to Kilmallock town and surrounding areas from the ambulance base in Limerick City.	Cllr G Conway
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NAS report monthly on PURPLE (Echo) and RED (Delta) call activity, category AS1 (life threatening cardiac or respiratory arrest or life threatening other than cardiac or respiratory arrest) calls. Response times per county or CHO are not deemed a Key Performance Indicator (KPI) for the Health Information Quality Authority (HIQA), the Department of Health (DoH) or the National Ambulance Service (NAS). Therefore, reporting and publishing of response times on a county by county or CHO basis is not a requirement.

- PURPLE (Echo, life-threatening cardiac or respiratory arrest) (75% in 18 minutes, 59 seconds)
- RED (Delta, life-threatening illness or injury, other than cardiac or respiratory arrest) (45% in 18 minutes, 59 seconds)

The National Ambulance Service has received 210,774 AS1 and AS2 calls by the end of June 2024. By comparison, in 2023 the figure to the end of June was 192,570 and in 2022 it was 190,935. The NAS daily average of calls until the end of June in 2024 was 1,158; it was 1,058 in 2023.

Despite this year-on-year rise in demand, the NAS has improved service response times for both PURPLE and RED calls. The table below outlines NAS HSE MW response times KPI for the Jan – Aug 2024

Emergency Call Category	Midwest - Jan – Aug 24
PURPLE (life-threatening cardiac or respiratory arrest)	75.45%
RED (life-threatening illness or injury, other than cardiac or respiratory arrest)	49.89%

Niall Murray, General Manager Area Operations, NAS.

W112Q4099	What is the current staff complement at Riverwalk House Carndonagh and has the restoration and resumption of Respite provision in Inishowen recommenced at Riverwalk House, Carndonagh?	Cllr G McMonagle
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Respite services have not yet resumed at Riverwalk Respite House. The HSE Human Resources (HR) department, supported by Disability Services, is working to address the staffing issues so that respite services at Riverwalk House can recommence as soon as possible.

The current staff complement at Riverwalk Respite House consists of a Clinical Nurse Manager, three staff nurses and three healthcare assistants (HCAs). There are two nursing posts to be recruited to in addition to two Health Care Assistant posts as well as recruitment to a residential centre to which existing Riverwalk Respite House staff have been redeployed.

There are a number of posts going through the approval process at the moment and recruitment will progress as soon as approval for these posts is received.

Recruitment to the relevant posts remains challenging. Applicant numbers are low and one applicant for a nursing post subsequently withdrew acceptance of the post. There is an acknowledged national and international shortage of health and social care professionals with the necessary qualifications and experience. A number of health care professional roles, including registered nurses, are included on the Department of Enterprise, Trade and Employment's Critical Skills Occupations List.

In addition, a workforce planning review has been completed to assess staffing requirements to extend respite provision in Riverwalk Respite House to five days per week. Approval of additional resources will be required to enable this extension.

In the meantime, centre based respite continues to be provided at Ballymacool Respite House, Letterkenny and Seaview Respite House, Mountcharles and service users from the Inishowen area are being accommodated for respite at these facilities, where possible.

D Monaghan, Chief Officer, Community Healthcare Organisation, (Cavan, Donegal, Leitrim, Monaghan, Sligo)

W112Q4100	How many dentists in Donegal, provide services to medical card holders under the Dental Treatment Services Scheme (DTSS) and where are they located?	Cllr G McMonagle
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Currently there are 39 Dental Surgeons and 2 Clinical Dental Technicians operating the medical card Dental Treatment Services Scheme.

Locations:

Letterkenny	Buncrana
Moville	Carndonagh
Donegal Town	Ballyshannon
Dungloe	Stranorlar/Ballybofey
Bunbeg	Ardara

D Monaghan, Chief Officer, Community Healthcare Organisation, (Cavan, Donegal, Leitrim, Monaghan, Sligo)

W112Q4101	Can we please have an update on the proposed delivery and opening of the New National Childrens Hospital which we visited last year?	Cllr G McMonagle
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BAM has shifted its cited substantial completion date for the new children’s hospital 14 times since it commenced above ground works in early 2019.

It has not provided a compliant Baseline Programme since February 2021.

A Baseline Programme is a critical contractual requirement, fundamental to any construction project, because it provides a clear approach and timeline for works underway allowing for work to happen in an efficient and effective manner. The absence of this process is highly unorthodox on any construction project, especially one of the scale of the new children’s hospital. It is utterly unacceptable on a project of national importance like the new children’s hospital.

All available contractual levers are being applied by the NPHDB to compel BAM to conclude its work and fulfil its responsibilities. Given BAM has failed to provide a Baseline Programme, the NPHDB has moved to withhold 15% of certified payments due to BAM. The NPHDB has also notified BAM of its intention to apply Liquidated Damages for late completion.

National Paediatric Hospital Development Board

W112Q4102	Can I have an update on the vacant Post's in relation to Diabetes at LUH and the process initiated to date by SAOLTA and Management at LUH to recruit the necessary staff to fill the Vacant Posts?	Cllr G McMonagle
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Consultant Posts

LUH is approved for 2.0 WTE Consultant posts with 100% commitment at LUH. In addition, since October 2022, LUH was also approved for a further Consultant post (1.0 WTE) who has a 50% commitment to LUH and 50% commitment to Donegal Primary Care Service through the National Framework for the Integrated Prevention and Management of Chronic Disease, the National Clinical Programme (NCP) for Diabetes and the Enhanced Community Care Programme (ECC Programme).

Interviews have taken place for both hospital posts. We have now offered out a post to one successful candidate and this is currently being progressed for clearance with PAS. There is no agreed start date. The second post was offered to a successful candidate but they have since withdrawn, this post will be re-advertised for recruitment through PAS.

Interviews are scheduled for the 8th October 2024 for the post of Consultant in Endocrinology & Diabetes Mellitus Letterkenny University Hospital & Primary Care, Donegal, HSE West & North West (Integrated post).

A Locum Consultant Endocrinologist is taking up this post on Monday the 23rd September on a specified purpose contract until the post is filled permanently through PAS.

Nursing and HSCPs

All approved nursing posts are filled. The ANP for Adult Type 1 diabetes which remains a priority is on the 2025 Estimates list for approval.

There is currently 2.5 WTE dietitians posts allocated to Diabetes Services in LUH. All and these positions are filled.

LUH is funded for one Staff Grade Podiatrist and one Senior Grade Podiatrist.

LUH have recruited an agency Basic Grade Podiatrist, whose full registration is pending with CORU. However the person has commenced in the service as a Podiatry Assistant while registration is progressing. The Senior Grade Podiatrist remains vacant and is subject to WTE approval. This position was previously advertised but garnered no applicants.

Our podiatry colleagues from GUH continue to support this service, once every two weeks and travel to LUH to facilitate outpatient clinics.

A. Cosgrove, Interim CEO, Saolta University Health Care Group

W112Q4103	Following the lifting of the embargo, have the vacancies (operating at 50% of approved funded posts on March 1 st 2024) in Primary Care Paediatric Speech and Language Therapy (SLT) Service for Sligo/Leitrim/West Cavan/South Donegal now being recruited for and are these vacant positions filled? What is the current waiting list for this service? What was the waiting list for this service prior to the recruitment embargo in March 2022?	Cllr E McSharry
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As of September, 2024 there are currently 6.0WTE vacant staff grade posts and 1.0WTE vacant senior posts across the service, with 7.06WTE staff in post. These vacancies relate to both 2023 and 2024.

In order to provide some support to parents while awaiting appointments, the Speech and Language Therapy department will roll out a new drop in Advice Clinic for families of children waiting for initial assessment from this month. Advice Clinics will run in Sligo and Carrick on Shannon each month for the remainder of 2024.

CH CDLMS have been actively working to fill posts via Agency conversion, new Development Posts and vacancies arising in 2024 from retirements, resignations and promotions, in the context of the agreed Pay and Numbers Strategy for 2024 and WTE limits applicable to the Health Region. A number of posts have been progressed across clinical and management roles in our services.

The HSE continues to strive to provide a high quality service and apologises for any disruption to service and increased wait times for children/ adults awaiting appointments

The table below outlines current waiting list times and numbers for the PC SLT service and the waiting list times and numbers in March 2023.

Length of Time	Numbers Waiting March 23 (pre vacancies/recruitment pause)	Numbers Waiting August 24
0-4 months	171 Waiting Initial Assessment	214 Waiting Initial Assessment
	67 Waiting Initial Therapy	11 Waiting Initial Therapy
	155 Waiting Further Therapy	248 Waiting Further Therapy
4-8 months	7 Waiting Initial Assessment	143 Waiting Initial Assessment

	2 Waiting Initial Therapy 33 Waiting Further Therapy	3 Waiting Initial Therapy 104 Waiting Further Therapy
8-12 months	0 Waiting Initial Assessment 0 Waiting Initial Therapy 11 Waiting Further Therapy	125 Waiting Initial Assessment 0 Waiting Initial Therapy 65 Waiting Further Therapy
12-18 months	0 Waiting Initial Assessment 0 Waiting Initial Therapy 10 Waiting Further Therapy	15 Waiting Initial Assessment 0 Waiting Initial Therapy 22 Waiting Further Therapy
18+ months		1 Waiting Further Therapy
Totals	178 waiting initial assessment 69 waiting initial therapy 209 waiting further therapy	497 waiting initial assessment 14 waiting initial therapy 440 waiting further therapy

D Monaghan, Chief Officer, Community Healthcare Organisation, (Cavan, Donegal, Leitrim, Monaghan, Sligo)

W112Q4104	<p>What is the Pay and number strategy for the mental services for Sligo, Leitrim south Donegal and west Cavan for each discipline or budget holder, that is what is the specific number of staff set out for each head of Service</p> <ul style="list-style-type: none"> • How many disciplines /service are over the set ceiling? • When were these ceilings set and have they changed following the 1.5 billion received from the Minister of Health in July? 	Clr E McSharry
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CH CDLMS are committed to delivering efficient, high-quality Mental Health services to eligible service users in the CH CDLMS area.

The establishment of Health Regions allows each area to plan and deliver services around the specific needs of people in each area, and to provide a consistent quality of care across the country.

Each region has its own budget, leadership team and responsibility for local decision-making.

The HSE recruitment embargo ended on Monday 15th July 2024 with the release of a Pay and Numbers Strategy. This was approved by the Department of Health and the Department of Public Expenditure and Reform. This provides for a new approved maximum Whole Time Equivalent (WTE) staff figure for the HSE and Section 38 Agencies of 129,753. (This excludes disability services, pre-registration nursing and midwifery students, and 76 special assignment temporary posts). The figure of 129,753 includes an additional 3,310 new service development posts.

The HSE West North West Region has been provided with its own specified number of WTEs and we can, within that approved number, replace, recruit and prioritise posts. Nationally the approved number represents a 25% increase when compared to 2019 staffing levels. This provides greater flexibility for Health Regions and national services to respond to the needs of the population and prioritise posts appropriately.

CH CDLMS have been actively working to fill posts via Agency conversion, new Development Posts and vacancies arising in 2024 from retirements, resignations and promotions, in the context of the agreed Pay and Numbers Strategy for 2024 and WTE limits applicable, a number of positions have been filled in Mental Health Services across various disciplines in clinical and management roles.

D Monaghan, Chief Officer, Community Healthcare Organisation, (Cavan, Donegal, Leitrim, Monaghan, Sligo)

W112Q4105	How many medium and long term leave clinical positions (that is Nurses, OT, social workers) are not backfilled in the mental health services in Sligo/Leitrim/West Cavan/South Donegal? What impact are these unfilled positions having on service delivery?	Cllr E McSharry
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The table below outlines the position regarding vacant posts for Nursing, Occupational Therapy and Social Work within Sligo Leitrim Mental Health Services (SLMHS). This data relates to medium and long term leave.

Grade	No. of Vacancies	Date post became vacant
Occupational Therapy	2	2024
Nursing	10	X7 2024 X3 pre 2024
Social Work	1	2024

REO approval has been received to progress the recruitment of 7.5 WTE staff nursing positions in SLMHS.

The West North West Region has been allocated a WTE ceiling in line with national HSE Pay & Numbers (PNS) Strategy and we are working within that WTE limit.

Clinical leads within SLMHS are required to risk assess the clinical impact of non-replacement of staff on team functioning and direct clinical care, and should take the appropriate measures within their teams to adapt to the non-replacement of staff. Clinical Leads monitor and document any unmet clinical need and this information is brought for attention and discussion to the monthly Area Mental Health Management Team Meeting.

D Monaghan, Chief Officer, Community Healthcare Organisation, (Cavan, Donegal, Leitrim, Monaghan, Sligo)

W112Q4106	Is the staff funding ringfenced for all the innovative and national clinic programmes and pilot sites in mental health services covering Sligo, Leitrim south Donegal and west Cavan as set out by Minister Mary Butler to improve services or is it included in the pay and number strategy How many staff have retired or gone on leave from these national clinical programmes and have they being replaced Has staff vacancies had an impact on the previous service delivery of these clinical programmes?	Cllr E McSharry
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The table below outlines the current number of staff posts vacant by respective NCP in SLMHS;

National Clinical Programme Name	Number of staff retired / On Leave
Early Intervention in Psychosis	Keyworker – 1 wte
ADHD	Nurse – 1wte
Crisis Resolution Service	Psychologist – 1wte Nurse – 1 wte OT – 1 wte

Clinical leads within SLMHS are required to risk assess the clinical impact of non-replacement of staff on team functioning and direct clinical care, and should take the appropriate measures within their teams to adapt to the non-replacement of staff.

Clinical Leads monitor and document any unmet clinical need and this information is brought for attention and discussion to the monthly Area Mental Health Management Team Meeting.

The West North West Region has been allocated a WTE ceiling in line with national HSE Pay & Numbers (PNS) Strategy and we are working within that WTE limit.

D Monaghan, Chief Officer, Community Healthcare Organisation, (Cavan, Donegal, Leitrim, Monaghan, Sligo)

W112Q4107	To ask the HSE to confirm the number of patients who have used the Pathfinder service & other alternative Prehospital pathways, avoiding the need to attend the Emergency Department in UHL	Cllr A Baker Bashua
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Limerick Pathfinder is a service run collaboratively between National Ambulance Service and University Hospital Limerick Occupational Therapist and Physiotherapy Departments. The service is designed to safely keep older people who phone 112/999 in their own home rather than taking them to a hospital emergency department. The service went live in Limerick October 2022. The Pathfinder 'Rapid Response Team' respond to 999/112 calls for older people in their homes. The older person is assessed by both an Advanced Paramedic and Occupational Therapist/Physiotherapist. Where safe, the team supports the older person at home rather than transporting them to emergency department, by linking with a wide range of alternative hospital and community services. Pathfinder also operates a 'Follow-Up Team' (Physiotherapy & Occupational Therapy) which provides immediate home-based rehabilitation, equipment provision and case-management in the subsequent days following a 999/112 call. Limerick Pathfinder responds in a NAS vehicle to appropriate calls within MW region, currently operates Monday to Friday (8am – 7pm).

- a. 2023 – total calls 343 – Alt Pathway 168 - 49% ED avoidance
- b. 2024 (Jan – Aug) – total calls 340 – Alt Pathway 217 – 64% ED avoidance

Alternative Prehospital Care Pathway (APP) is a community emergency medicine collaboration between University Hospital Limerick and the National Ambulance Service. The primary function of the APP team is to respond to low-acuity emergency calls in the Limerick City and county area, along with the greater Mid West region, and to provide definitive patient care in the community or to refer patients to the appropriate community or specialist service. This reduces the need for ambulance conveyance to the Emergency Department (ED) and frees up emergency ambulance resources for critically ill or injured patients. Established in Sept 2023, the service operates from NAS Base in Dooradoyle. The team responds in a NAS vehicle to appropriate calls within a 45-minute radius, currently operates five days a week (10 am – 8pm). Team made up of: Registrar in Emergency Medicine from UHL ED & Emergency Medical Technician from NAS

- a. 2023 – total calls 245 – Alt Pathway 127 – 51.8% ED avoidance
- b. 2024 (Jan – Aug) – total calls 685 - 2024 – Alt Pathway 343 – 49.77% ED avoidance

Community Paramedic (CP) service was established in Sept 2021, operates from NAS Base in Limerick, responding in a NAS vehicle to appropriate calls within MW region, currently one CP covers rostered shifts. The CP helps to effectively manage low acuity calls by identifying solutions that the patients are treated safely in their homes and communities by identifying alternative pathways of treatment. The social aspect of care for Community Paramedics is at the forefront as they are visiting these homes and can initiate a referral pathway for the Occupational therapies input to keep patients safe in their own environment

- a. 2023 – total calls 552 - 2023 – Alt Pathway 320 - 57.9% ED avoidance
- b. 2024 (Jan – Aug) – total calls 419 – Jan 24 to Aug 24 – Alt Pathway 264 - 63% ED avoidance

Niall Murray, General Manager Area Operations, NAS.

W112Q4108	To ask the HSE to confirm the average wait times (turnaround times) for ambulances at UHL Emergency Department in 2023	Cllr A Baker Bashua
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Increased activity in ambulance bays outside the emergency department of hospitals is to be expected at a time of ever increasing demand and activity. At any one time, ambulance bays may be hosting both public ambulances, including inbound emergency and intermediate care vehicles transferring patients to other acute sites or residential care settings. Arrival to Handover (A2H) delays seriously impact the NAS' capacity and ability to respond to patients in the community. Clinical handover of patients must occur quickly to ensure ambulances are available to respond to further 112/999 calls. Where this does not occur, the NAS can commence rapid escalation measures and can deploy a Hospital Ambulance Liaison Persons (HALP). HALPs are deployed by the National Ambulance Service to play an important role in reducing patient arrival to handover times at Emergency Departments by initiating Fit to Sit and Cohorting responses.

The average hospital turnaround time from arrival to ambulance going clear in UHL for 2023 was as follows:

2023	Ave
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UHL Monthly Average Time at Hospital - from arrival to clear for NAS	00:45:19
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Niall Murray, General Manager Area Operations, NAS.

W112Q4109

To ask the HSE to confirm the number of patients who left before treatment was complete (LBTC) at the Emergency Department in UHL in 2023, and how many of these patients returned within 30 days

**Cllr A Baker
Bashua**

Improving the patient experience at our Emergency Department is a major priority for UL Hospitals Group, and for the HSE nationally.

Emergency Departments (EDs) and their associated hospitals must clinically prioritise those who must be treated first, and those who may need to wait, or those who may need to attend a more appropriate care setting.

To ensure this process is clinically safe for patients, Irish hospitals use the internationally tested Manchester Triage Tool which prioritises patients into a number of categories based on their clinical needs. Where a patient is seriously ill or injured, their needs will be prioritised above those with less serious conditions. Ideally, hospitals would be in a position to treat patients on their arrival. However, as demand inevitably overtakes capacity, prioritisation and consequential waiting may occur. In this regard, some patients with less serious needs may choose to avail of alternative options.

This is not to minimise the frustration of the many patients who face long waits to see a doctor. We are committed to reducing patient experience times (PET) for admitted and non-admitted patients, and continue to promote alternative options to ED where this is appropriate. The [Urgent and Emergency Care](#) reports published by the HSE show that in the year to date, average ED PET times at UHL are below the national average for all hospitals both for admitted and non-admitted patients and compares favourably to other model 4 hospitals.

During 2023, 6,198 patients left the ED at UHL before completing their treatment. Of those, 667 returned within 30 days.

N. Spillane, A/CEO, UL Hospitals Group

W112Q4110

To ask the HSE if there is a policy in place to address the situation in Co. Clare when a medical card patient cannot access a Dental practice for treatment and whether the HSE has a duty of care to ensure these patients are treated in an HSE dental clinic.

**Cllr A Baker
Bashua**

The HSE Dental Service is responsible for the provision of dental services to children under 16, patients with additional needs and adults who have a medical card.

The HSE Dental Service provides dental examination in schools for children in 1st, 2nd and 6th class. The school dental examination programme is currently dealing with a backlog of between 18 to 24 months as the service was suspended for a number of months due to the pandemic. When the service resumed, it had to do so at a reduced capacity and in line with the Public Health and Government guidelines in place at that time. The children who were due to be seen when the service was suspended were prioritised when the service resumed.

The HSE Dental Service also provides an emergency care for children under 16 who are experiencing dental pain, whereby, they will be seen at their local dental clinic for pain relief/treatment for the presenting dental issue.

Adults (over 16) who have a medical card receive a service from dental surgeons in the private sector who are contracted by the HSE to provide dental treatment/care under the Dental Treatment Services Scheme (DTSS). Dental surgeons submit claims to the Primary Care Reimbursement Service (PCRS) for any treatment carried out under the scheme.

The Schedule of Treatments available under the DTSS and the amount which the dental surgeon can claim from the PCRS for services provided under the scheme are governed by the Department of Health.

These factors form part of the DTSS contract which is signed by the HSE and the dental surgeon. The DTSS is a national scheme and decisions regarding the scheme, including any negotiations, are not made by the HSE at a local level.

Any negotiations will involve the Department of Health and the Irish Dental Association who represents the Dental Surgeons.

Recruitment of dental surgeons is an issue for both public and private dental practice in Ireland and the HSE are not involved in the training of dental surgeons. However, the Irish Dental Association continuously highlight the need for additional dental student training places in the Higher Education Institutions.

The Principal Dental Surgeon for the HSE Mid West area advised that according to PCRS records, in the period - January to July 2024, Dental Surgeons in Co. Clare submitted claims to the PCRS for the provision of dental services to 3,797 patients under the DTSS.

Below is a copy of the most recent list of dental surgeons contracted under the DTSS in the Mid West (including Co. Clare). The Principal Dental Surgeon has advised that it is the responsibility of the patient (medical card holder) to secure the services of a DTSS contracted Dental Surgeon. This may involve the patient travelling outside of their own immediate area in the Mid West i.e. Limerick, Clare, Nth. Tipperary.

A dental patient is not registered with one specific dental surgeon i.e. they can attend any DTSS contracted dental surgeon in the country who is in a position to see them. A dental surgeon is reimbursed only for the specific treatment carried out for a patient under the DTSS.

HSE DENTAL TREATMENT SERVICES SCHEME

LIMERICK, CLARE AND NORTH TIPPERARY AREAS

PRIVATE DENTISTS PROVIDING ROUTINE/DENTURE TREATMENT TO ADULT MEDICAL CARD HOLDERS

This Scheme provides access to certain dental treatments to eligible persons, aged 16 years and over with medical card entitlement. *Treatments include a dental examination, teeth cleaning, extractions, 2 fillings each year.* Treatment can be accessed by arranging an appointment with a dental practitioner in private practice under contract arrangements with the HSE, from the list below. Patients must present their current medical card at the dental surgery when attending for dental treatment. While this is a list of dentists in the Limerick, Clare & North Tipperary areas, patients may attend any private dentist contracted with the HSE elsewhere in the country. Lists of these dentists are available from local HSE centres or online at hse.ie

(w) Wheelchair Accessible

Limerick

BOWE, ROBERT BRESLIN, ANNA	BOWE DENTAL CLINIC, MAIN ST., FOYNES, CO. LIMERICK.V94 K250 (W)	069 32001
BOWE, ROBERT	BOWE DENTAL, UNIT 7, Q RETAIL PK., ROXBORO, LIMERICK V94 YR67	061 608186
BARRY, GAVIN	10 BALLYKEEFFE EST., DOORADOYLE, LIMERICK (W)	061 228366
CANTON, CLARE	NO 8, DENTAL CLINIC, 1 OLD WINDMILL, LR. GERALD GRIFFIN St., LIMERICK V94 EY23 (W)	061 417566
BIELIKOV, ARTEM	CORNMARKET DENTAL, 1 OLD WINDMILL, LR. GERALD GRIFFIN St., LIMERICK V94 EY23 (W)	061 417566
BIELIKOV, ARTEM	NO. 8 DENTAL CLINIC, SHANNON ST, LIMERICK. V94 TY79	061 490710
DAVIS, AMELIA	6 ABBEYVILLE, STATION ROAD, ADARE, CO. LIMERICK.	061 396001
FLANAGAN, MÁIRE	MULLANE DENTAL, BISHOP ST., NEWCASTLEWEST, CO. LIMERICK. (W)	069 62703
FLANAGAN, MÁIRE	NO. 8 DENTAL CLINIC, SHANNON ST, LIMERICK. V94 TY79	061 490710
FOLEY, ANNA	CRESCENT DENT, DOORADOYLE HSE, DOORADOYLE RD. LIMERICK	061 484844
FOLEY, JACQUELINE FOLEY, CLAIRE	NO. 3 OAKPARK, GORTBOY, NEWCASTLEWEST, CO. LIMERICK (W)	069 62962

GUINAN, THOMAS	9 SILVERBIRCH GROVE, DOORADOYLE RD., LIMERICK. (W)	061 305653
FOLK, SARAH	BOWE DENTAL, UNIT 7, Q RETAIL PK., ROXBORO, LIMERICK	061 608186
HENNESSY, JOHN	1 QUINLAN STREET, LIMERICK	061 315352
HIGGINS, AIDAN	5 COUNTY VIEW TCE., BALLINACURRA, LIMERICK.	061 315335
KERRISK, DENIS	81 O'CONNELL ST., LIMERICK.	061 312300
LYONS, MAURICE	DENTAL SURGERY, BRIDGE ST., ABBEYFEALE, CO LIMERICK.	068 31293
McCABE, BRIAN	2 AN DÚN, CHURCH ROAD, RAHEEN, LIMERICK. (W)	061 225533
McMAHON, JOHN	18 BARRINGTON STREET, LIMERICK.	061 316322
MILLS, EOIN	UNIT 7, Q RETAIL PARK, ROXBORO, LIMERICK. (W)	061 608186
MORLEY, JOHN	13 UPPER MALLOW ST., LIMERICK.	061 317781
NAGLE, MARIAN	BISHOP ST. DENTAL CLINIC, BISHOP ST., NEWCASTLEWEST. (W)	069 62703
NOONAN, EAMONN T.	17 ELLEN STREET, LIMERICK. (W)	061 468765
NEO, VICTORY	NO. 8 DENTAL CLINIC, SHANNON ST, LIMERICK. V94 TY79	061 490710
O'CONNOR, JULIET	DENTAL SURGERY, BRIDGE ST., ABBEYFEALE, CO. LIMERICK.	068 31293
O'CONNELL, PAUL	UNIT 3, RETAIL PARK, KILMALLOCK, CO. LIMERICK.	063 31688
O'CONNELL, PAUL	OLD QUARTER HOUSE, ELLEN STREET, LIMERICK.	061 419682
O'DOWD, RITA	NO. 8 DENTAL CLINIC, SHANNON ST, LIMERICK.	061 490710
	18 UNIVERSITY COURT, CASTLETROY, LIMERICK	061 331414
O'DONNELL, MARK	4 PERY SQUARE, LIMERICK.	061 315203
O'LEARY, EVA	NO 8, DENTAL CLINIC, 1 OLD WINDMILL, LR. GERALD GRIFFIN St., LIMERICK. V94 EY23. (W)	061 417566
O'MAHONY, URSULA	BISHOP STREET, NEWCASTLEWEST CO. LIMERICK (W)	069 62703
OSBORNE, MICHAEL	LANSDOWNE DENTAL, 95 LANSDOWNE PK., ENNIS RD, LIMERICK. (W)	061 321867
POWER, KILLIAN	NO 8, DENTAL CLINIC, 1 OLD WINDMILL, LR. GERALD GRIFFIN St., LIMERICK V94 EY23 (W)	061 417566
SCANLON, RUTH	VICTORIA HOUSE DENTAL, 5 ST. JOHN'S SQUARE, LIMERICK.	061 490049
TOOMEY, DEIRDRE	NOONAN DENTAL PRACTICE, 17 ELLEN ST., LIMERICK.	061 468765

Cork

DRAKE, CLARAGH	LR. PATRICK ST., FERMOY, CO. CORK.	025 31137
CAGNEY, NUALA	NEW LINE DENTAL SURGERY, CHARLEVILLE, CO. CORK	063 81088
McMORROW, CLODAGH MILLS, JOHN MOLONEY, NORRIE	LR. PATRICK ST., FERMOY, CO. CORK.	025 31137
MURPHY, NOREEN	50 LR. CORK ST., MITCHELSTOWN, CO. CORK. (W)	025 24519
MURRAY, CLARE	NEW SQUARE, MITCHELSTOWN, CO. CORK. (W)	025 24197
NOONAN, EAMONN	NOONAN DENTAL CARE, MAIN ST, CHARLEVILLE, CO. CORK. P56 NY61 (W)	063 81251
NOLAN, DENIS M.	50 LR. CORK ST., MITCHELSTOWN, CO. CORK. (W)	025 24519
O'MEARA, CIAN	LR. PATRICK ST., FERMOY, CO. CORK.	025 31137
RIORDAN, DEREK	NEW SQUARE, MITCHELSTOWN, CO. CORK. (W)	025 24197
RIORDAN, MAIREAD	NEW SQUARE, MITCHELSTOWN, CO. CORK. (W)	025 24197
STUCKENBERG, ANNA	NOONAN DENTAL CARE, MAIN ST, CHARLEVILLE, CO. CORK. P56 NY61 (W)	063 81251

Co. Tipperary

BARRY, CATHERINE	BIRR, CO. OFFALY	0509 20488
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BOWE, ROBERT 96575	WESLEY PLACE, CUDVILLE, NENAGH, CO. TIPPERARY.	067 32111
BURKE, AIDAN	DENTAL SURGERY, CATHEDRAL ST., THURLES, CO. TIPPERARY.	0504 21262
DWYER, CORINNE	LANDSDOWNE HOUSE, FRIAR ST, THURLES, CO. TIPPERARY	0504 21523
DWYER, CORINNE	THE MALL, THURLES, CO. TIPPERARY.	0504 21418
FARRELLY, TERRY	MAIN STREET, ROSCREA, CO. TIPPERARY.	0505 21000
GUINAN, ELAINE	BROOK COTTAGE, GRANGE ROAD, BALLINA, CO. TIPPERARY.	061 375493
KELLY, ANDREW	2 O'RAHILLY ST., NENAGH, CO. TIPPERARY.	067 33755
LENIHAN, RORY	THE MALL, THURLES, CO. TIPPERARY.	0504 21418
LUMBROSO, JACQUES	"THE DOVES", CHURCH ROAD, NENAGH, CO. TIPPERARY.	067 33350
O'DONOGHUE, CATHAL	LIBERTY SQUARE DENTAL PRACTICE, THURLES, CO. TIPP.	0504 22028
O'REACHTAGAIN, P.M.	NATIONWIDE HSE. CASTLE ST., ROSCREA, CO. TIPPERARY.	0505 23000
TIMMONS, ELIZABETH	THE DOVES, CHURCH ROAD, NENAGH, CO. TIPPERARY.	067 33350
RYAN, MICHAEL G.	WESLEY PLACE, CUDVILLE, NENAGH, CO. TIPPERARY.	067 32111
SHIELDS, CORMAC	SHIELD'S DENTAL CENTRE, 24/25 MAIN ST., ROSCREA, CO. TIPPERARY. E53 EC56	0505 21000

Co. Clare

COTGREAVE, A.E.	16 MERCHANT'S SQUARE, ENNIS, CO. CLARE.	065 6821612
MAHONY, DERMOTT F.	STEELES TCE., ENNIS, CO. CLARE.	065 6821547
McGRATH, EIMEAR	THE OLD MILL DENTAL, GEORGES ST., SIXMILEBRIDGE, CO. CLARE.	061 713685
McNICHOLL, BARRY	16 MERCHANTS SQ., ENNIS, CO. CLARE.	065 6821612
O'MEARA, JUDITH	DENTAL SURGERY, CONNAUGHT RD, SCARRIFF, CO. CLARE.	061 640926
O'DOWD, BRENDA	RYAGAN HOUSE, SHANTRAUD, KILLALOE, CO. CLARE.	061 374744

Maria Bridgeman, Chief Officer, HSE Mid West Community Healthcare.

W112Q4111	Can we have an updated report on the Enhanced community care for Donegal?	Clr C Brogan
<p>CHO 1 was phase 2 funding for ECC and commenced implementation in September 2021. The programme is at an advanced stage of implementation in Donegal.</p> <p>All four Community Healthcare Networks are operational with CHN Managers in posts and all areas with exception of Southwest Donegal have a GP lead on the management team. This post is under active recruitment. Clinical team meetings are in operation with clinical coordinators assigned.</p> <p>The Community Specialist Teams for Chronic Disease and Older Persons are operational. As can be seen in the data Appendix 1, Donegal specialist teams are exceeding national targets in the number of patient contacts.</p> <p>The Chronic Disease Management Service (CDM) in Donegal operates from the Errigal CDM Hub in Letterkenny with spokes clinics throughout the four network areas in Donegal. The CDM service offers GP's direct access to specialist teams in Cardiology, Diabetes and Respiratory and supports patients in self-management of chronic disease offering pathways to assist patients to remain well at home and link to services in the right place, at the right time and the most appropriate level of complexity. GP Direct access to diagnostics including ECHO and plain film x-rays is available in the hub with plans to open GP direct access to spirometry by year end.</p> <p>The Integrated Care Consultant post for Cardiology is filled and end-to-end pathways have been developed with the Cardiology Integrated Care Team for heart failure, atrial fibrillation, palpitations and Virtual heart clinics. Local HIPE data from</p>		

LUH confirms a 20% -25% decrease in overall admissions to LUH with the presenting condition of Heart Failure and a 50% decrease in readmissions with Heart Failure since the commencement of the Integrated Care Heart Failure service in 2021.

The Integrated Care team for Diabetes nursing in Donegal has implemented an integrated model of care for type 2 diabetes and has transitioned from hospital or GP clinics to chronic disease management hubs and outlying 'spoke' clinics to increase equity and accessibility for patients with type 2 diabetes. The overall conclusion is that specialist diabetes nursing support in community settings reduces waiting times and distance travelled. It also results in reduced Consultant waiting lists and attendance at ED's. The Advanced Nurse Practitioner (ANP) Diabetes, Integrated Care Service in Donegal increases access to appropriate safe, timely care to patients at an advanced nursing level and has reduced waiting times for patients accessing this service, from 36 months to less than 2 months. The majority of referred patients have been diverted or removed from hospital waiting lists.

Diabetes self-management –DESMOND - programmes are delivered across Donegal, and online, with 217 patients attending these from January 2024 to date with an average wait time of less than 12 weeks.

The Integrated Care Dietetic service also offers one to one consultations to patients with type 2 diabetes, as well as delivering a virtual diabetes prevention programme and weight management programmes.

The diabetes podiatry service is operational offering podiatry care for patients with diabetes as per the diabetic foot model of care 2021.

Respiratory Integrated Care pathways include assessment and management clinics, oxygen clinics, physiotherapy clinics and pulmonary rehabilitation programmes which are delivered throughout the four network areas in Donegal using a hub and spoke model.

Pulmonary Rehabilitation Programmes are now delivered in all four network locations throughout Donegal.

The implementation of the CARE Virtual Ward project in November 2023 has allowed for the expansion of COPD outreach throughout the entire county of Donegal regardless of geographical location and has improved equity for patients living with chronic respiratory disease in Donegal. The CARE CVW has admitted 158 patients to date saving 648 bed days in Letterkenny University Hospital and supporting patients in self-management, offering an alternative care pathway to hospital admission. Recent HIPE data from LUH reports a 21% reduction in overall admission to LUH with presenting complaint of COPD as well as a reduction in readmission rates within 30 days from 28.7% to 13.08%.

The integration between acute and community teams has been vital in achieving these outcomes.

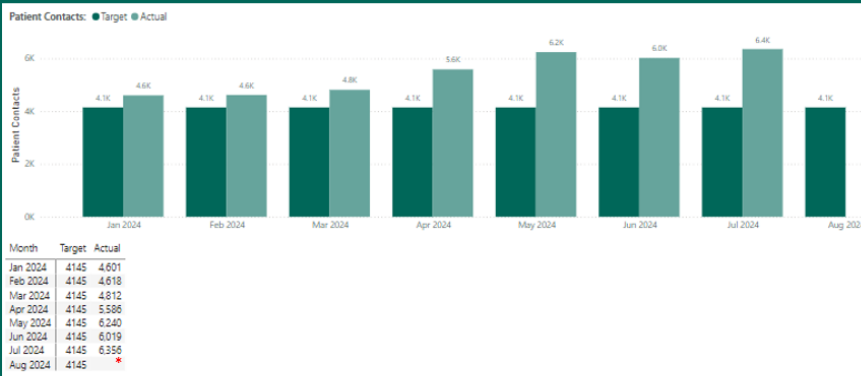
Recruitment campaigns are ongoing to fill the Integrated Care Consultant posts in Respiratory, and Endocrinology.

The Integrated Care Team for Older Persons (ICPOP) includes the Falls Prevention service which provides a service to the 4 networks in Donegal. This includes domiciliary assessments, clinic-based assessments and strength and balance classes. The service also includes the ICTOP (Frailty) service which is a domiciliary only service providing assessment and interventions in the home to frail older people in the North and East network. Unfortunately, due to key staff vacancies and lack of suitable accommodation for this team it is not currently possible to expand to Inishowen and Southwest Donegal. We continue to advocate for additional resources to extend this service across the county. The ICPPOP service will also include the MASS (Memory Assessment and Support Service) which will focus on early diagnosis of dementia and post diagnostic support. The MASS service also requires additional recruitment before it can become operational.

As we move into the Integrated Healthcare Areas, continued focus will be given to further developing and embedding care pathways for older persons and those living with chronic disease working in collaboration with our GP colleagues to reduce the need to attend emergency departments, avoid hospital admission and improve the quality of life for this population group. This will be within the constraints of finance and pay and numbers strategy.

Appendix 1- National ECC Workbench data on Community Specialist Teams in Donegal

Donegal – Errigal Chronic Disease Hub Patient Contacts vs. National Target Jan-July 2024



* - Aug 2024 Actual figure not yet available on KPI dashboard

Donegal – ICPOP Service Patient Contacts vs. National Target Jan-July 2024



* - Aug 2024 Actual figure not yet validated on KPI dashboard

D Monaghan, Chief Officer, Community Healthcare Organisation, (Cavan, Donegal, Leitrim, Monaghan, Sligo)

W112Q4112

Can we have an updated report on the service being delivered at the CAMHS, child and Adolescent Mental Health based in Letterkenny, for Inishowen, north central Donegal, north west donegal?

Cllr C Brogan

The following appointments were offered to clients across the three Donegal CAMHS teams in 2024 year to date (Jan-Aug 2024):

- North Donegal Team – based in Letterkenny – 2711
- South Donegal Team – based in Donegal Town – 2563
- Inishowen Team – based in Bunrana – 1483

The above figures are the number of appointments offered per team, this does not mean the patients were all seen in the clinic setting but in a combination of clinic, home, peripheral clinics, school, online, telephone etc. Our current systems of data collection have no means of counting how many service users are physically seen in every clinic setting. These figures do not include agencies such as Cunamh and Pneuma and other community partners who see patients on behalf of CAMHS.

CAMHS patients are normally offered 1:1 appointments. There can be a number of clinicians involved with each patient. The majority of appointments are individual face to face sessions however group therapy, family sessions and virtual sessions are also provided as well as on call out-of-hours service and liaison and consultation to hospital wards.

D Monaghan, Chief Officer, Community Healthcare Organisation, (Cavan, Donegal, Leitrim, Monaghan, Sligo)

W112Q4113	Can we have an updated report on the accessibility of services being delivered at LUH in the last 3 years, In -patient and day care services Out-patient day services A breakdown of all our services, Through put discharges and a breakdown of our waiting lists.	Cllr C Brogan
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Outpatient attendances in LUH increased by 5% in the first seven months of 2024 compared to the same period in 2023. However despite the increase in the activity, there has been a rise in overall number of patients awaiting an outpatient appointment and this due to two factors:

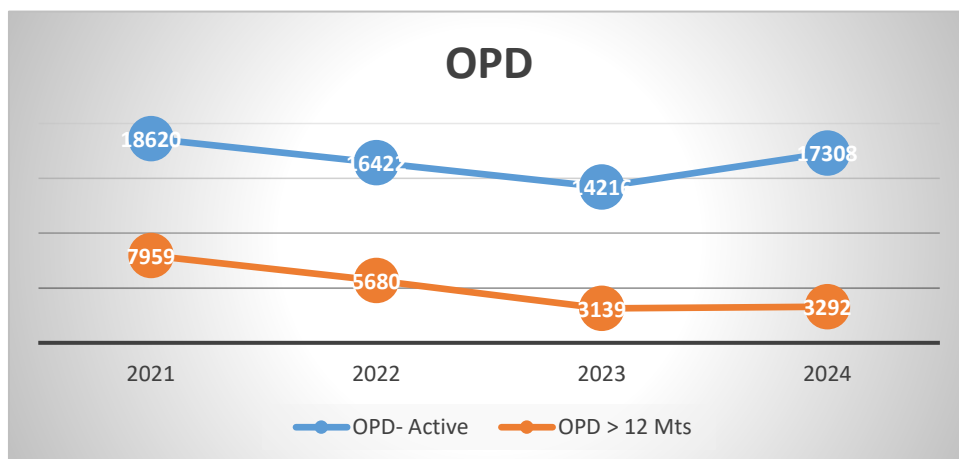
- (a) an increase in the number of referrals by 14% compared to 2023 (24,323 v. 21,273).
- (b) migration of LUH to the Saolta Group patient administration system in May of this year which led to a temporary pause in commissioning (oursourcing) and validation of the waiting list. Commissioning and validation have recommenced and is expected to be fully up to date in September, which should result in a fall in the waiting list numbers.

Additional outpatient activity is planned for Q3 and Q4 in order to achieve waiting list targets by year-end.

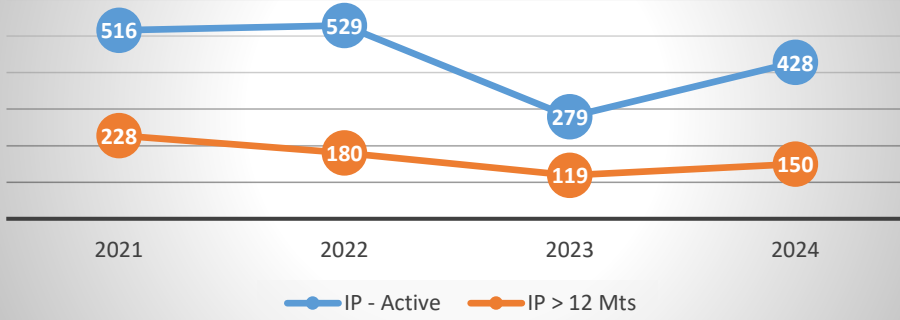
Inpatient numbers waiting have increased since 2023 due to additional outpatient activity and the requirement for inpatient procedures for those patients.

Day case numbers waiting continue to fall year on year due to additional activity arising from weekend initiatives being undertaken at the hospital.

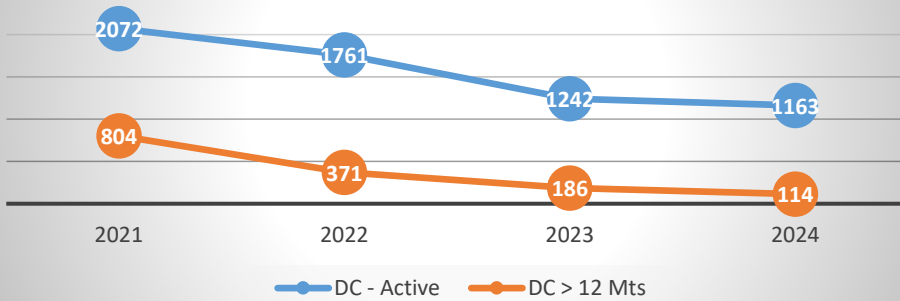
OPD	2021	2022	2023	2024
Total	18620	16422	14216	17308
>12 Mts	7959	5680	3139	3292
In-patients	2021	2022	2023	2024
Total	516	529	279	428
>12 Mts	228	180	119	150
Day Case	2021	2022	2023	2024
Total	2072	1761	1242	1163
>12 Mts	804	371	186	114



IN-PATIENTS

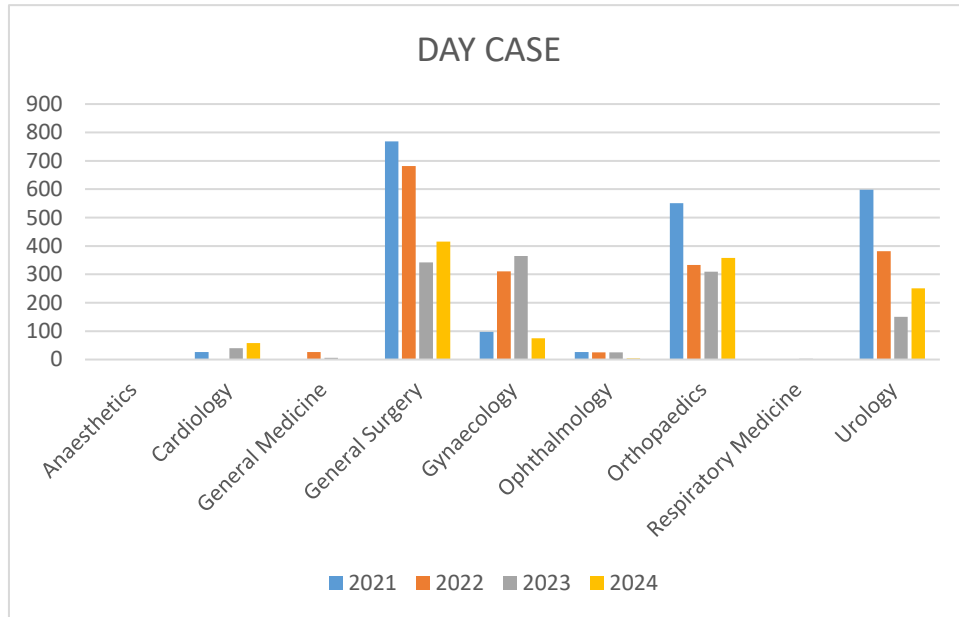


DAY CASE

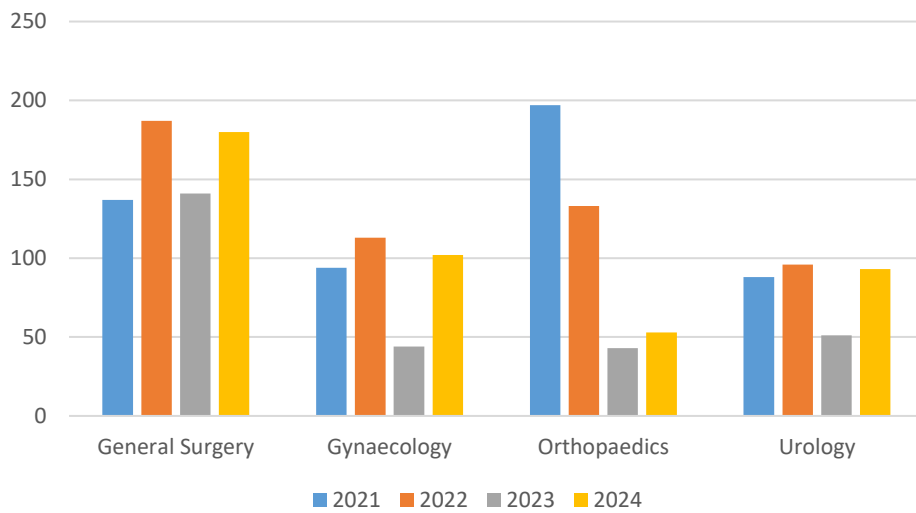


DC	2021	2022	2023	2024
Anaesthetics	1	0	0	1
Cardiology	27	0	40	58
General Medicine	1	26	6	0
General Surgery	768	682	342	416
Gynaecology	98	311	365	75
Ophthalmology	26	25	25	4
Orthopaedics	551	333	310	358
Respiratory Medicine	2	2	3	0
Urology	598	382	151	251
Total	2072	1761	1242	1163

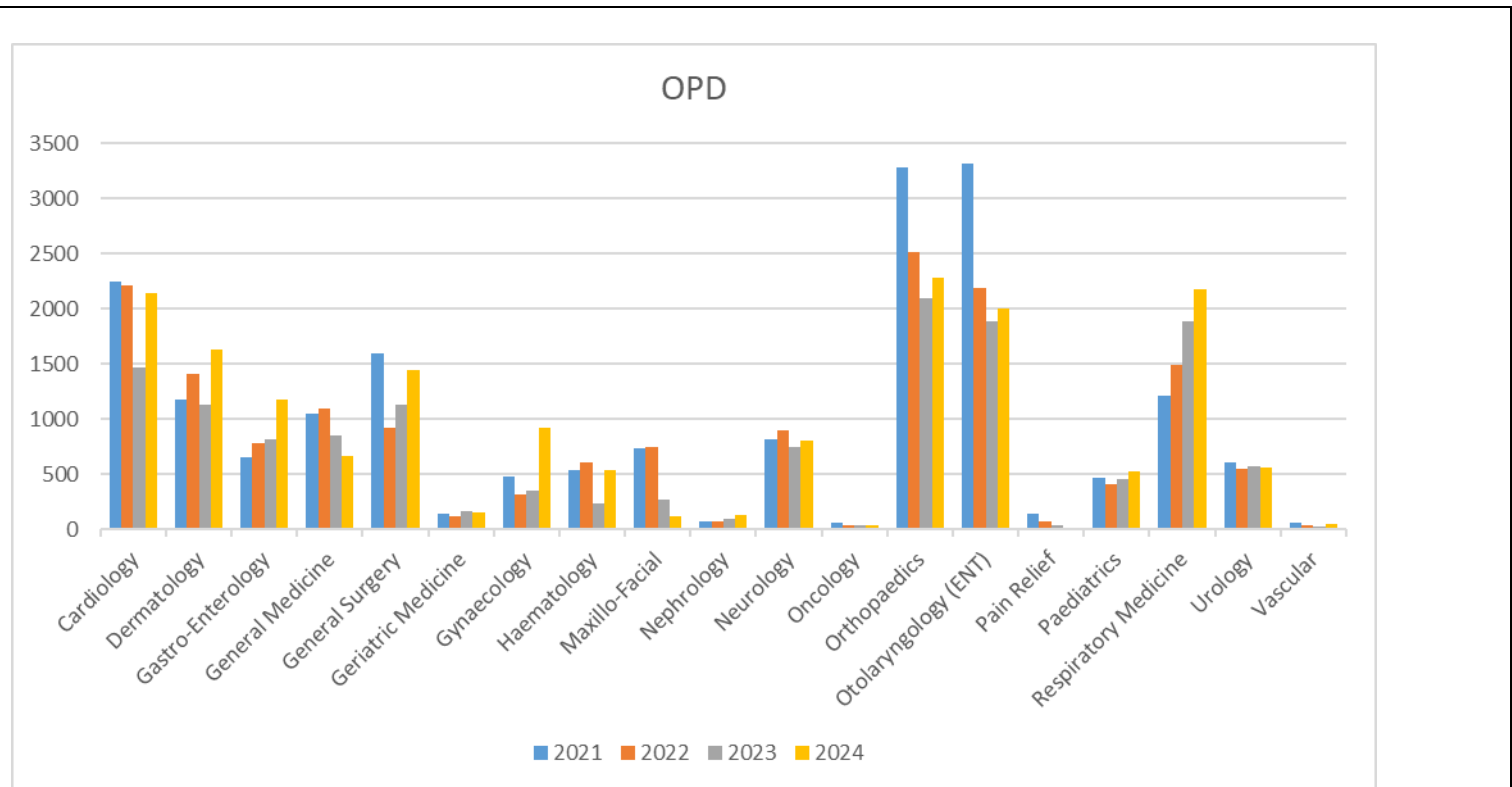
IP	2021	2022	2023	2024
General Surgery	137	187	141	180
Gynaecology	94	113	44	102
Orthopaedics	197	133	43	53
Urology	88	96	51	93
Total	516	529	279	428



IN-PATIENT



OPD	2021	2022	2023	2024
Cardiology	2249	2204	1459	2140
Dermatology	1172	1412	1131	1622
Gastro-Enterology	655	776	808	1174
General Medicine	1048	1094	847	662
General Surgery	1591	919	1131	1439
Geriatric Medicine	140	121	162	154
Gynaecology	481	312	354	916
Haematology	535	599	236	532
Maxillo-Facial	729	749	264	115
Nephrology	72	64	98	133
Neurology	814	893	748	801
Oncology	60	40	32	38
Orthopaedics	3283	2510	2096	2281
Otolaryngology (ENT)	3313	2180	1878	2000
Pain Relief	142	75	39	9
Paediatrics	462	402	456	521
Respiratory Medicine	1206	1486	1883	2173
Urology	610	550	568	556
Vascular	58	36	26	42
Total	18620	16422	14216	17308



A. Cosgrove, Interim CEO, Saolta University Health Care Group

W112Q4114	Can we have an updated report from our estate management and our progress on our capital programme?	Cllr C Brogan
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Attached please see below a list of the major capital projects in Donegal from the HSE Capital Plan for this year. Work also takes place locally with the various services to prepare new submissions to seek to get more projects onto the HSE Capital Plan and approved for future funding allocation. There is also a significant programme of minor works and a capital equipment replacement programme annually. The major project lifecycle typically takes a number of years as the project progresses through initiation, design and construction with the design stage taking 12 -15 months typically and construction taking 12 to 24 months depending on the scale and scope of the project.

Project Ref.	County	Facility	Brief Description of Project	Stage Current (Sept 2024)
10027A	Donegal	Letterkenny University Hospital	Fire Safety Works to Medical Ward Block (scope of works under review, may not be required - possible fire engineering solution)	Detailed Design
11017C	Donegal	Letterkenny University Hospital	Renal Dialysis expansion. Increasing Capacity from 14 to 21.	Detailed Design
11117	Donegal	Dungloe	Primary Care Centre - including accommodation for GPs - by Operational Lease Model	Under Review
11393	Donegal	Letterkenny University Hospital	Fire Safety Upgrade - Fire Alarm upgrade & new Emergency lighting system.	Construction
11439	Donegal	Cleary Centre, Donegal Town	New ID Adult Day Services facility	Detailed Design

11543	Donegal	Letterkenny University Hospital	Electrical Infrastructure Upgrade, 1980's building. Phases 2 & 3. Equipment purchase in 2021	Detailed Design
11544	Donegal	Letterkenny University Hospital	Boiler replacement (Enabling works 2022, new gas tank)	Detailed Design
11587	Donegal	Letterkenny University Hospital	Extension to Laboratory (Microbiology, Virology and Immunology) to provide capacity for Additional Covid 19 Testing (additional equipment and staff already in place) and to bring the Lab up to current standards (not upgraded post flooding event). Stage 2c June 22	Complete
11600	Donegal	Letterkenny University Hospital	Accommodation for Physio and OT dept at LUH (420sqm). This accommodation is to reinstate accommodation dispersed due to flooding at LUH.	Tender
11601	Donegal	Letterkenny University Hospital	New Aseptic Compounding unit. Extension and reconfiguration of the existing	Detailed Design
11604	Donegal	Donegal Hospice	New extension to Donegal Hospice to provide 4 No. bedrooms with family/visitor accommodation. 4 No. existing bedrooms are to be converted for administration/clinical use. Overall bed capacity will remain as existing. Funded by Donegal Hospice.	Detailed Design
11631	Donegal	Letterkenny	St. Conal's Refurbishment - fabric upgrade of Block R	Complete
11651	Donegal	Letterkenny University Hospital	Weather proofing: Flat roof covering repair and balcony spalling repair works, phased project.	Tender
11768	Donegal	Lifford	Proposed 25 bed Community Nursing Unit (approx 1827sqm) at Lifford to replace the existing.	Appraisal
11769	Donegal	Lifford	Proposed new Primary Care Centre (approx 3000sqm) at Lifford.	Appraisal
11850	Donegal	Letterkenny University Hospital	Extension to the existing Orthodontics Dept (360sqm). The extension will create additional space for new radiology equipment, 2 no. additional treatment rooms, new reception and waiting area and refurbish existing space	Appraisal
11851	Donegal	Letterkenny University Hospital	Relocate existing AMAU and admin accommodation to a new extension (538sqm) providing 6 no. single rooms. Reconfigure vacated space to provide additional enclosed single ED cubicles (6 No.) & to create separate enclosed ED Paediatric Treatment single cubicles (4 No.) and a stand-alone waiting room.	Appraisal

11925	Donegal	Buncrana	Renovation of an existing HSE health centre at McGinn Avenue, Buncrana (190sqm) and conversion to an ambulance base.	Appraisal
12025	Donegal	St. Conal's Hospital	St. Conal's Refurbishment - Redevelopment of existing building (3000sqm) to provide a permanent Admin Hub. This will allow the relocation of administration services from the St. Conal's Main Building and thus allow that building to be refurbished. It is proposed that Tusla will also relocate to this building.	Appraisal
10091	Donegal	Letterkenny	110 Bed CNU & Medical Rehab to replace existing beds and address capacity deficit as per Service Priority List (formerly PPP). Board Decision no: 300623/42	Construction
11660	Donegal	Falcarragh CNU	Refurbishment (HIQA agreement to follow Dungloe) - 35 beds	Construction
11662	Donegal	Buncrana CNU	Refurbishment (To follow Carndonagh) - 30 beds	Detailed Design
11424	Donegal	Ramelton CNU	HIQA Compliance - Refurbishment - 30 beds	Appraisal
11425	Donegal	St Joseph's, Stranorlar	HIQA Compliance - Refurbishment - 67 beds	Appraisal
14162	Donegal	Ballinacor, Killygordon, Lifford, Co. Donegal	Purchase and refurbishment of residential dwelling at Ballinacor, Killygordon, Lifford	Detailed Design
14163	Donegal	Millbrae, Carndonagh, Co. Donegal	Purchase of a site, demolition of the existing building and the construction of a new house for De-congregation.	Detailed Design
14164	Donegal	Tiernaleague, Carndonagh, Co. Donegal	Purchase and refurbishment of residential dwelling at Tiernaleague, Carndonagh, Co. Donegal for four residents	Appraisal
13230	Donegal	HUB 01 - St. Conals, Letterkenny	Extension (200sqm) to existing Chronic Disease Management Hub to provide support accommodation.	Detailed Design
13255	Donegal	HUB 01 - St. Conals, Letterkenny	New building to house ECC Hub (2824sqm) to include ICPOP, ICPCD, Diagnostics etc. A road realignment is required as enabling works.	Appraisal

Joe Hoare, Assistant National Director, HSE Capital & Estates

W112Q4115	Can the Forum be updated on the submissions received in response to the tender request for the development and lease of a Primary Care Centres at the following locations: <ul style="list-style-type: none"> Galway City West An Spideal Claregalway Oranmore 	Cllr J Connolly
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Initial submissions were received in respect of all four locations. These responses are currently being validated. It is intended to seek tenders for these locations in Q4 2024.

Joe Hoare Assistant National Director, HSE Capital & Estates

W112Q4116	Can the health forum receive an update on the progress made by the project board established to complete the Masterplan for the delivery of essential health care infrastructure at GUH encompassing the new ED and Women’s and Children’s block, a new Laboratory, Cancer Centre and bed block on the UHG campus? Can the Forum also be briefed on the work to date undertaken by the design team appointed by the project board?	Cllr J Connolly
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Galway University Hospitals is the only Model 4 Hospital in the HSE West North West Region. It provides secondary care for Galway city and surrounds and tertiary care for the region (catchment population of circa 850,000).

A Galway University Hospitals Capital Programme Oversight Board was established by the Saolta Group CEO in late 2023 with membership from Saolta, GUH, Estates, Community, National Acute Hospitals, University of Galway and patient representatives.

A design team has been appointed to develop the masterplan and a Project Manager for Major Capital Projects on the GUH Campus took up post in July 2024 to drive this ambitious development for the region. We also have engaged health planning expertise for a time focused piece of work to support the work of the design team and to provide international and national benchmarking and demand modelling.

The Health Planning Team for GUH which is led by Deloitte in partnership with MJ Medical has linked extensively with clinical teams and the GUH Capital Oversight Group to ensure that the overall design / clinical scoping brief reflects best practice, national, regional and local strategic imperatives.

The major requirement for healthcare in the region is the provision of protected Emergency Care, Elective Scheduled Care and Cancer Care and the associated increased bed capacity. This Capital Programme Board is now developing a masterplan which runs to 2048 and encompasses projects of significant scale on the campus. The key projects are:

- New Emergency Department UHG
- Women & Children’s Block, UHG
- Laboratory UHG
- New Ward Block
- Cancer Centre UHG
- Additionally the Elective Hospital, Surgical Hub, Outpatients Department & Adult OPD Cystic Fibrosis Unit are in progress on our MPUH campus.

The Masterplan will play a pivotal role in delivering on National and Regional healthcare policies. It will be used to support capital submissions for priority capital projects and to secure investment.

The new plan will see elective, day surgery and ambulatory care move to the MPUH campus while complex acute elective and unscheduled inpatients and day cases, oncology and maternity and paediatric inpatient care remains in UHG. It will also provide the required bed capacity to address the demand for increased inpatient beds and additional day case requirements.

Work is also progressing in decanting some services to the Merlin Park site. The build for Phase One of the Outpatient Department block in MPUH has completed and is now at commissioning stage and the Adult CF OPD is also due to be handed over shortly to be commissioned. Phase Two of this development which will relocate the majority of outpatient appointments to Merlin Park is currently at design stage and will then have to go to tender for construction.

Plans for an elective hospital and surgical hub are also progressing for the MPUH campus with construction work now underway on the surgical hub. The HSE is in the final approval stages of procurement for a number of key teams for the elective hospital, including:

1. Architect Led Design Team (to provide architectural, design and engineering services)

2. Project Control Team (to support the HSE to manage, control and administer the design/construction programme)

At this time and subject to HSE approvals, the aim is to have the Architect Led Design Team and Project Control Team in place by Q3, 2024.

The Elective Care Programme continues to take forward a range of workstreams that will support the completion of a detailed design brief which will be necessary to inform the Design Team upon their appointment and to prepare the deliverables required to meet Approval Gate 2 of the Infrastructure Guidelines.

As previously advised, timelines will be refined as the projects develop and evolve, and in particular, on appointment of the Architect Led Design Team further analysis will be undertaken in terms of timelines for the Galway hospital to become operational

A. Cosgrove, Interim CEO, Saolta University Health Care Group

W112Q4117	How many patients can be accommodated on a weekly basis for Dialysis treatment at the Dialysis unit in Merlin Park? Is there a requirement to make supplementary provision for patients beyond the capacity of the Dialysis unit? How is such provision provided?	Cllr J Connolly
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There is a significant demand on the Dialysis service in Merlin Park University Hospital which is currently providing dialysis to approximately 90 patients / week. There has been a significant increase in demand on the dialysis service over the past 4 years with patient numbers increasing from 63 in 2020 to 92 patients in September 2024. Capacity is further being expanded to facilitate an additional 2 patients from Sunday 22nd Sept. The service will then have an expanded capacity of 94 patients.

In order to meet the increasing demand, two additional isolation rooms have been added to the service and will become operational in November. While these rooms were being commissioned, a contingency plan was put in place. This involved placing 2 surge dialysis treatment chairs onto the unit.

We now plan to retain these treatment chairs which will allow 24 additional dialysis sessions a week, accommodating approx. 8 additional patients. We will require 2.5 additional staff for which a submission has been made to facilitate these sessions (treatment chairs). Retaining these chairs will allow us to facilitate 102 patients (94 +8).

The Acute unit has also been under significant pressure due to an increase in demand for acute dialysis since 2020. In order to expand the service to meet demand, an additional nurse was allocated to support out of unit dialysis e.g. inpatient ward, 7 days/week. Due to a recent surge in demand for acute dialysis the acute unit experienced unprecedented demand and was operating above capacity. The demand on the dialysis service is expected to rise year on year with the last 4 years as an indicator of same. There are currently a number of patients who are attending the Renal OPD who will require commencement on dialysis in the near future. This will place further demand for dialysis slots on the existing service.

The Home Therapies unit currently facilitates 34 patients for Renal home therapies, the development of this service would also be required to support capacity in the long term.

A. Cosgrove, Interim CEO, Saolta University Health Care Group

W112Q4118	How many medical card holders in Co Galway were unable to secure placement with their doctor of choice or a further local doctor in the following years: a. 2021 b. 2022 c. 2023 d. 2024 Can the Forum also be informed as to what locations within the county have more than one medical card holder unable to access a local GP?	Cllr J Connolly
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All records provided dated up to and including 31 August 2024.

- Medical card holders in Co Galway unable to secure placement with their doctor of choice or a further local doctor.

Table 1: Galway GP assignment records for 2021-2024:

2021	2022	2023 (Jan – Aug)	2024 (Sep – Aug)
94	271	284	605

- Locations within Galway county that have more than one or more medical card holder unable to access a local GP

Table 2: Galway clients on hold pending assignment of GP:

County/area	Clients on hold
Galway	
Carraroe	15
Claregalway	1
Galway	212

Primary Care Reimbursement Service

W112Q4119	The Access to Psychological Services Ireland (APSI) post in Castlerea, Co. Roscommon is vacant for more than a year which is concerning as its a Primary Care local and swift support for people suffering Low Mood, Stress and Anxiety. With this post vacant, has it not posed a risk of people's mood becoming more chronic and therefore needing a referral through their GP to the Mental Health Services?	Clr G Scahill
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The APSI service has been successfully delivered to the Castlerea region for over 10 years, seeing over a thousand individuals in this time. While it is not possible to predict if in individual cases, the absence of an APSI intervention would or would not have led to a deterioration in their condition, we do know that the majority of individuals who receive an intervention demonstrate a positive significant improvement in their presentation.

J Fitzmaurice, Chief Officer, Community Healthcare West

W112Q4120	Currently the ambulance service in Loughglynn, Co. Roscommon sees a number of call per day with the local unit being under extreme pressure to respond to these calls. The base in Loughglynn's immediate service area has one of the oldest demographics in the country along with the 6 IP Centres in the vicinity. Numerous Nursing Homes, a prison, along with numerous manufacturing and industrial units. Will you explore the possibility of putting an additional ambulance unit in Loughglynn and resources to man the same?	Clr G Scahill
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Currently, Loughlynn operates with one day crew and one night crew seven days a week. As the National Ambulance Service operated a dynamic deployment model the base is further supported by nearby ambulance stations in Boyle, Roscommon, Tuam, and Castlebar.

On average, 16 emergency calls are activated daily within County Roscommon over a 24-hour period. At this time, no additional crews are being sought for Loughlynn Ambulance Station. However, please be assured that this situation is under constant review to ensure that service levels remain appropriate for the needs of the region.

As a snap shot the average response time to priority 1 calls (Echo and Delta) week dated 2nd – 8th September for Co Roscommon was circa 21 minutes.

Should any changes or developments occur, we will communicate them accordingly.

JJ McGowan, Chief Ambulance Officer - West

W112Q4121	I will ask at the next meeting of the Regional Health Forum West for information on the specialist supports that are available to those living with endometriosis and PCOS in Limerick.	Clr E O'Donovan
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Dedicated endometriosis clinics take place in University Hospital Limerick twice a month. There is a dedicated clinical lead overseeing this service. Plans are underway to expand this service by recruiting additional nursing staff and a sonographer.

For patients diagnosed with PCOS, ULHG provides support through our gynaecology clinics, led by our experienced gynaecologists.

N. Spillane, A/CEO, UL Hospitals Group

W112Q4122	I will ask at the next meeting of the Regional Health Forum West for the number of people currently awaiting orthodontic treatment in CHO3 and average time on waiting list for same.	Clr E O'Donovan
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Orthodontic Assessment:

As per HSE policy, patients who are in need of an orthodontic assessment are referred from the Primary Care Dental Service prior to their 16th birthday. As per the protocol, referrals are received following the child's sixth class school dental examination within the HSE Dental Service where the referring clinician considers that the patient's malocclusion may be eligible for HSE orthodontic treatment in accordance with the Modified Index of Orthodontic Treatment Need (IOTN) Eligibility Guidelines (2007).

While the national target for the waiting time for orthodontic assessment is that 100% of patients should be seen within twelve months of referral, 100% of patients are seen within six months of referral and 80% of assessments are seen within three months of referral. This provides reassurance to the referring clinicians that patients will be seen for orthodontic assessment in a timely manner, it allows for the early detection of pathology and permits parents to be informed of the assessment outcome at the earliest possible opportunity.

Number of patients awaiting orthodontic assessment with the HSE Mid West Orthodontic Service:

- 52 patients are currently awaiting orthodontic assessment. All of these patients will be offered an appointment for assessment in Quarter 4 2024
- 212 patients were offered an appointment for orthodontic assessment in Quarter 3 2024

Orthodontic Treatment:

Patients who have been considered eligible for HSE orthodontic treatment are categorised into two grades:

- Grade 5: Severe malocclusion e.g. impacted teeth, multiple missing teeth, increased overjet (prominence of the teeth)
- Grade 4: Less severe malocclusion e.g. deep overbite, cross-bite, crowding

There are currently 676 patients on the waiting list with the HSE Mid West Orthodontic Service to commence orthodontic treatment. This figure can be broken down as follows:

- Grade 5 patients = 563
- Grade 4 patients = 113

The average wait time for the commencement of treatment for Grade 5 and Grade 4 patients is four years.

In an effort to reduce the waiting time for treatment, some Grade 4 patients (with the exception of those who have a surgical component to their treatment) are outsourced to private service providers through the National Orthodontic Waiting List Initiative which has been ongoing since 2016. It can be anticipated that ongoing funding for this initiative will continue to have a very positive impact on the waiting times for Grade 4 patients.

A validation of the orthodontic treatment waiting list was completed in April 2024 which resulted in a 23.1% reduction in the waiting list.

At end of Quarter 2 2024, there were 1,111 patients in active orthodontic treatment with the HSE Mid West Orthodontic Service. A course of orthodontic treatment takes on average of 18 months to two years to complete. The waiting time for treatment is based on the number of patients in active treatment at any given time, the complexity of treatment and the time taken to complete treatment.

To reduce the waiting time for orthodontic treatment, every effort is being made to recruit additional Specialist Orthodontists and approval has been received to fill two additional Specialist Orthodontist vacancies. Since May 2022, the HSE has conducted five recruitment campaigns (most recently in August 2024) in an attempt to fill three vacant Specialist Orthodontist posts (one retirement and two newly approved posts).

While the service has been successful in recruiting one additional Specialist Orthodontist (start date 21/07/24). Other candidates who were successful at interview were offered positions, however, they have not accepted the posts. The most recent recruitment campaign (August 2024) attracted no applicants. Plans are now proceeding to develop an international recruitment campaign for two Specialist Orthodontist vacancies within the service.

A planned National Orthodontic Waiting List Initiative for Grade 5a patients in the 11-14-year category is currently at the procurement stage, a timeframe for commencement will be confirmed once procurement is finalised.

Patients who have been considered eligible for HSE orthodontic treatment may avail of treatment in Northern Ireland under the Northern Ireland Planned Healthcare Scheme. Under the scheme, the HSE will reimburse up to €2,100 towards the cost of treatment or the cost of treatment whichever is the lesser amount.

All of the treatment must be completed within Northern Ireland to be eligible for reimbursement. Any patient who has been considered to be eligible for HSE orthodontic treatment can avail of this scheme from the time of assessment onwards.

Maria Bridgeman, Chief Officer, HSE Mid West Community Healthcare.

W112Q4123	I will ask at the next meeting of the Regional Health Forum West for the number of patients in CHO3 that have been provided treatment under the cross-border healthcare directive in the last 5 years and the total cost for same.	Clr E O'Donovan
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In general the CBD allows public patients to access healthcare in another EU/EEA country which they are entitled to access in Ireland. The patient pays for the treatment up front and claims reimbursement upon return to Ireland. Reimbursement is at the cost of the treatment abroad or the cost of the treatment in Ireland whichever is the lesser. Public patient pathways as they apply to accessing the healthcare in Ireland equally apply to accessing the healthcare abroad under the CBD.

In accessing healthcare abroad under the provisions of the CBD a patient must follow public patient pathways as they apply in Ireland.

No of patients who availed of CBD from Clare, Limerick, Tipperary 2019-2024 (August)						
	2024	2023	2022	2021	2020	2019
Clare	48	34	17	33	70	57
Limerick	34	41	23	29	59	66
Tipperary	46	46	29	46	107	90
Total	128	121	69	108	236	213

In general the NIPHS allows public patients to access healthcare in the private healthcare sector in Northern Ireland which they are entitled to access in the public healthcare sector in Ireland. The patient pays for the treatment up front and claims reimbursement upon return to Ireland. Reimbursement is at the cost of the treatment in the private healthcare sector in

Northern Ireland or the cost of the treatment in the public healthcare service Ireland whichever is the lesser. Public patient pathways as they apply to accessing the healthcare in Ireland equally apply to accessing the healthcare abroad under the NIPHS.

NIPHS Reimbursements by County 2021 – 2024 (Jan-June YTD)				
County	2021	2022	2023	2024 Jan - Jun YTD
Clare	25	39	33	17
Limerick	8	34	57	20
Tipperary	32	63	98	49

We do not provide costs per scheme broken down by county, however, below is the total costs for reimbursements under the schemes for the years requested.

Cost of Reimbursements Processed 2019 - 2024 Jan – June YTD						
Scheme	2019	2020	2021	2022	2023	2024 Jan - June YTD
CBD	€13,121,259	€15,376,336	€7,811,327	€4,323,231	€9,002,407	€6,181,689
NIPHS	n/a	n/a	€4,046,742	€11,349,248	€15,684,435	€8,421,052

National Schemes & Reimbursements

W112Q4124	Can we have an update in regard to the appointment of a permanent consultant post for the Camhs Intellectual Disability service in Sligo and the expected start date for this post?	Cllr D Bree
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The Consultant for CAMHS ID position was approved by the Consultant Applications Advisory Committee on the 14th May 2024 and the Letter of Approval was issued on 20th May 2024.

The post was advertised by the Public Appointments Service on 18th June 2024 with a closing date for applications of July 2024. Unfortunately we have not received any applications to date and have extended the closing date on a number of occasions. The Medical Manpower Office is also working on additional marketing and communications material to attach to this recruitment campaign in an effort to attract applicants to the post/area.

The recruitment campaign for the post remains open. The service is actively exploring alternative options to provide the service, and has sent a request to the agency framework to explore whether a suitable consultant can be recruited in the interim pending ongoing recruitment efforts.

D Monaghan, Chief Officer, Community Healthcare Organisation, (Cavan, Donegal, Leitrim, Monaghan, Sligo)

W112Q4125	Noting that in a reply to a question submitted by Cllr Declan Bree at the Health Forum meeting in July 2024, the Chief Officer, Community Healthcare Organisation (Cavan, Donegal, Leitrim, Monaghan, Sligo) stated “At present within Sligo-Leitrim Mental Health Service our clients have access to Cognitive Behavioural Therapy. Seven staff are trained and can provide the service however this will be reducing to 6 staff later this year.” The Chief Officer also stated “There are no plans to increase the number of Psychologists above our staff complement at present within this area. Psychology is available in our community teams providing a range of services.”; and further aware that the Executive Clinical Director of the North Sligo Community Mental Health Service has stated that the service does not have access to Cognitive Behavioural Therapy or Clinical Psychology within its community mental health team; can the Forum now be advised if the HSE West	Cllr D Bree
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	has investigated this matter and can the Executive Lead of the Health Forum now provide a comprehensive statement on the matter.	
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It is our understanding that the query relates to a client who was informed that Cognitive Behavioural Therapy (CBT) is not available to them from their Community Mental Health Team (CMHT). I have not had sight of the letter referenced therefore I am unable to personalise this response to the client.

CBT is a treatment broadly available within community teams to clients in SLMHS however; a very recent retirement within the North Sligo CMHT has led to a situation where there is currently no therapist available to provide CBT within this particular team. This has led to open communication with GPs advising them of the unavailability of services. This includes the inability to provide a CBT Therapist to patients referred by their GPs.

We acknowledge that our previous response did not include this information and I apologise for this omission. I accept that it was not clear in the response provided in July that new referrals were not being accepted to the North Sligo Team; SLMHS apologise for this oversight.

SLMHS value the CBT service and have agreed to support four additional staff members through CBT training commencing this month. This course has been developed between the ATU St. Angela's and SLMHS. The course will enable staff to be fully qualified within twelve months on completion of the course. We anticipate that by September 2025 ten staff in total will be providing this service.

All clinicians within SLMHS advocate for a care plan individualised to their client's needs. In an effort to offer alternate routes to access CBT the CMHT are signposting GP's to alternative sources where clients can access therapies. These include online platforms. Digital guided CBT with SilverCloud® by Amwell® can be accessed by GP referral.

The HSE and SilverCloud® provide internet-based CBT programmes for clients over the age of eighteen. These programmes run for up to eight weeks. The platform is accessible twenty-four hours per day. I have included the link below:

Digital guided CBT with the HSE - silvercloudhealth.com

Counselling in Primary Care (CIPC) provided by the National Counselling Service is also available free of charge across the country for medical card patients. Counselling is available in person, by phone or by online video.

SLMHS regret this pause in service within this CMHT and for the confusion caused. SLMHS are happy to discuss this issue with Cllr. Bree or the client should this be required.

In relation to the Executive Clinical Director of the North Sligo Community Mental Health Service stating that the service does not have access to Clinical Psychology within its community mental health team; I have clarified with the Executive Clinical Director that this was due to a staff member being on leave for a period of time and who has now returned to work. Psychology is available within the North Sligo Team.

D Monaghan, Chief Officer, Community Healthcare Organisation, (Cavan, Donegal, Leitrim, Monaghan, Sligo)

W112Q4126	How many service users used the Hydrotherapy Pool in Manorhamilton on the 13th; 14th; 15th; 16th; 17th November 2023; the 12th Feb; 13th Feb; 14th Feb; 15th Feb; 16th Feb 2024; the 15th; 16th; 17th; 18th; 19th April 2024 and the 1st July; 2nd July; 3rd July; 4th Jul; 5th July 2024; and to ask if there has been any further progress regarding the possible re-opening of the Hydrotherapy pool in Cregg, Co Sligo.	Cllr D Bree
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The number of service users who used the Hydrotherapy pool in Our Ladys Manorhamilton, on the above specified dates is as follows:

November 2023: (13th to 17th) –

5 day Rehab Inpatient week:

4 inpatients attended pool session each day from Tuesday to Friday.

February 2024: (12th to 16th)-

12th: 2 day rehab patients and 2 out patients attended pool session on Monday 12th.

(Pool was out of Order from Tuesday to Friday).

April 2024: (15th to 19th)-

5 day Rehab Inpatient week:

4 inpatients attended pool session each day from Tuesday to Friday.

2 day rehab Patients attended on 16th Monday.

July 2024: (1st to 5th)-

4 day rehab patients attended pool session and 2 out patients attended the pool session.

The maximum capacity the pool can take in each session is 2 patients on each side of pool at any time.

Specialities using the pool include Rheumatology, GP, other Consultant (e.g. Orthopaedic, MSK)

Factors impacting on full capacity use of the pool include availability of pool attendant, availability of physiotherapist, changing facilities for x2 people only available, no wheelchair accessible changing area

A. Cosgrove, Interim CEO, Saolta University Health Care Group

Community Healthcare Cavan, Donegal, Leitrim, Monaghan, Sligo (CH CDLMS) Disability Services management met with the Head of Operations for Rosses Punto on July 16th, 2024, regarding reopening of the hydrotherapy pool at the former Cregg campus. Rosses Punto have agreed, in principle, to reopen the hydrotherapy pool for an interim period of six months. A proposal with updated costings has been submitted to the Disability Services Manager Sligo Leitrim. CH CDLMS Disability Services cannot meet the cost from within its existing allocated budget and funding will need to be sought as per the national budgetary allocation process should this be decided by senior management.

Sligo Leitrim Disability Services Management has also engaged with other HSE Services, namely Primary Care Services, Older Persons Services and Mental Health Services regarding their requirement to access a hydrotherapy facility in Sligo. These services do not have a demand for hydrotherapy services.

Pending senior and national HSE management position, scoping of need, funding allocation and in consideration of matters relating to the former Cregg campus being addressed by the HSE Estates Department, further decisions in respect of the hydrotherapy service being delivered by Rosses Punto remain to be agreed.

D Monaghan, Chief Officer, Community Healthcare Organisation, (Cavan, Donegal, Leitrim, Monaghan, Sligo)

W112Q4127	To ask if the Sligo-Leitrim Occupational Health Department is adequately staffed.	ClIr D Bree
The Sligo Occupational Health Services has a skill mix in all staffing categories i.e. Occupational Health Physicians, Nursing and Management/Administration. All currently available positions in the service are occupied. As with many other clinical services, additional resources would be valued.		

Dr Grant Jeffrey, Director Workplace Health & Wellbeing Unit

W112Q4128	Can we get a breakdown of the full staffing cohort at the pathology labs in all the hospitals across the University Limerick Hospital Group?	ClIr R McInerney
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Not available at time of issue.

N. Spillane, A/CEO, UL Hospitals Group

W112Q4129	Can we get an update on the planned bed blocks and new theatres for which capital funding has been allocated in Ennis hospital?	ClIr R McInerney
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A capital project to deliver a replacement Theatre Block, Central Sterile Services Department (CSSD) and associated facilities has been included in the HSE Capital Programme for 2024. This includes a site enabling works package which includes the relocation of the oxygen supply (VIE) to facilitate the expansion plans. A public works contract has recently been awarded for

these enabling works and the building contractor is currently setting up on site. It is anticipated that these works will be completed over the next 8 months. Additional bed capacity of 48 inpatient beds was included for Ennis Hospital as part of the Acute Hospital Inpatient Bed Capacity Expansion Plan 2024-2031 announced by Government on 29th May 2024. This plan envisages the beds will be delivered before end of 2028. Currently the site masterplan for Ennis Hospital is under review to consider how both this additional bed capacity and the theatres might be provided for on the site. A business case for the new project will also be progressed over the coming months. It is anticipated that subject to overall funding availability and prioritisation that additional capital funding for the bed capacity will be included in the HSE Capital Programme for 2025. This would allow the procurement and engagement of a design team for the project. It will then take a number of years to progress the scheme through the statutory approvals, design, tender, construction and equipping phases.

Joe Hoare, Assistant National Director, Capital & Estates (West)

W112Q4130	Is there a strategy from the HSE to address the lack of GP services and dentistry care delivered locally within rural areas, like West Clare?	Cllr R McInerney
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General Practitioner (GP) services

The HSE, Irish College of General Practitioners (ICGP) and the Medical Council recognise the need to expand the GP workforce by 40% to meet the healthcare needs of the population. To increase the GP workforce to this level, we will need 1,540 more GPs to support the 3,852 GPs already working beyond capacity in every community, nationwide.

The HSE Mid West Primary Care Unit continuously monitors the age profile and the upcoming retirements of GPs who hold GMS contracts in the region. The Primary Care Unit engages with and supports GPs who are nearing retirement with succession planning to ensure continuity of GP care for patients. It is anticipated that two GMS GPs will retire in Co. Clare next year.

The HSE Mid West is currently managing a GP Practice in Kilrush, Co. Clare to ensure continuity of GP services for the patients. The HSE advertised the GMS panel on five occasions since January 2023, however, no suitable applicants applied. The HSE have organised a number of recruitment campaigns to fill the vacancy since it arose, however, the vacancy has failed to fill on a permanent basis.

The HSE Mid West is working continuously to secure a permanent GP for the GP Practice.

A number of initiatives have been introduced to increase GP capacity and maintain and support GP practices in rural areas, including:

International Medical Graduate Rural GP Programme

The International Medical Graduate Rural GP Programme (IMG) is operational in the HSE Mid West area and currently has 15 places across the region. The HSE works closely with the Irish College of General Practitioners (ICGP) on supporting the placement of IMG Programmes and also provides information and support to the GPs applying for an IMG. The role of the IMG Rural GP programme is to:

- identify and recruit suitable experienced IMG GPs, in accordance with the programme criteria for rural GP practices
- facilitate supported and supervised practice;
- assist the IMG GP to undertake the ICGP (MICGP) exam, leading to Specialist Registration with the Irish Medical Council and encourage the retention of the IMG GP in Irish General Practice

The Rural Fellowship Programme

The Rural Fellowship Programme, funded by the HSE, is a unique collaboration between the HSE, the ICGP and the Disciplines of General Practice at the University of Limerick. The Programme offers the Fellow experience in rural practice and academic opportunities.

The first Rural Fellowship Programme became operational in Lisdoonvarna, Co. Clare, in November 2023. The HSE Mid West successfully filled a vacancy in Lisdoonvarna due to the programme which increased the number of GPs in the area. This

increase has had a positive impact on service delivery and also provides an opportunity for the Fellow to continue to work there, while also ensuring that patients will have a GP available to them in the longer term.

Increase in GP Trainees

The HSE Mid West in line with the national target to increase GP trainees has had a 47% increase in GP Trainee numbers since 2021. It can be anticipated that this will result in an incremental increase in the number of GPs in the Mid West.

GP Agreement 2023

A key priority of the GP Agreement 2023 is to address the challenges for rural practices. A package of targeted initiatives to maintain GP services in isolated rural and urban disadvantaged communities is available via the GP Agreement. The targeted initiatives are aimed at attracting GPs to 'hard to fill' vacancies i.e. practices in rural locations and/or single handed practices. Initiatives include for example funding supports for GPs in practices in rural and isolated areas.

Further information in relation to the GP Agreement 2023 and the targeted initiatives mentioned above can be found on the HSE website <https://www.hse.ie/eng/about/who/gmscontracts/GPagreement2023/>

The HSE Mid West Primary Care Unit links with GPs to provide information and support as appropriate.

Dental services

The HSE Dental Service is responsible for the provision of dental services to children under 16, patients with additional needs and adults who have a medical card.

The HSE Dental Service provides dental examination in schools for children in 1st, 2nd and 6th class. The school dental examination programme is currently dealing with a backlog of between 18 to 24 months as the service was suspended for a number of months due to the pandemic. When the service resumed, it had to do so at a reduced capacity and in line with the Public Health and Government guidelines in place at that time. The children who were due to be seen when the service was suspended were prioritised when the service resumed.

The HSE Dental Service also provides an emergency care for children under 16 who are experiencing dental pain, whereby, they will be seen at their local dental clinic for pain relief/treatment for the presenting dental issue.

Adults (over 16) who have a medical card receive a service from dental surgeons in the private sector who are contracted by the HSE to provide dental treatment/care under the Dental Treatment Services Scheme (DTSS). Dental surgeons submit claims to the Primary Care Reimbursement Service (PCRS) for any treatment carried out under the scheme.

The Schedule of Treatments available under the DTSS and the amount which the dental surgeon can claim from the PCRS for services provided under the scheme are governed by the Department of Health. These factors form part of the DTSS contract which is signed by the HSE and the dental surgeon. The DTSS is a national scheme and decisions regarding the scheme, including any negotiations, are not made by the HSE at a local level.

Any negotiations will involve the Department of Health and the Irish Dental Association who represents the Dental Surgeons.

Recruitment of dental surgeons is an issue for both public and private dental practice in Ireland and the HSE are not involved in the training of dental surgeons. However, the Irish Dental Association continuously highlight the need for additional dental student training places in the Higher Education Institutions.

The Principal Dental Surgeon for the HSE Mid West area advised that according to PCRS records, in the period - January to July 2024, Dental Surgeons in Co. Clare submitted claims to the PCRS for the provision of dental services to 3,797 patients under the DTSS.

Below is a copy of the most recent list of dental surgeons contracted under the DTSS in the Mid West (including Co. Clare). The Principal Dental Surgeon has advised that it is the responsibility of the patient (medical card holder) to secure the services of a DTSS contracted Dental Surgeon. This may involve the patient travelling outside of their own immediate area in the Mid West i.e. Limerick, Clare, Nth. Tipperary.

A dental patient is not registered with one specific dental surgeon i.e. they can attend any DTSS contracted dental surgeon in the country who is in a position to see them. A dental surgeon is reimbursed only for the specific treatment carried out for a patient under the DTSS.

HSE DENTAL TREATMENT SERVICES SCHEME

LIMERICK, CLARE AND NORTH TIPPERARY AREAS

PRIVATE DENTISTS PROVIDING ROUTINE/DENTURE TREATMENT TO ADULT MEDICAL CARD HOLDERS

This Scheme provides access to certain dental treatments to eligible persons, aged 16 years and over with medical card entitlement. *Treatments include a dental examination, teeth cleaning, extractions, 2 fillings each year.* Treatment can be accessed by arranging an appointment with a dental practitioner in private practice under contract arrangements with the HSE, from the list below. Patients must present their current medical card at the dental surgery when attending for dental treatment. While this is a list of dentists in the Limerick, Clare & North Tipperary areas, patients may attend any private dentist contracted with the HSE elsewhere in the country. Lists of these dentists are available from local HSE centres or online at hse.ie

(w) Wheelchair Accessible

Limerick

BOWE, ROBERT BRESLIN, ANNA	BOWE DENTAL CLINIC, MAIN ST., FOYNES, CO. LIMERICK.V94 K250 (W)	069 32001
BOWE, ROBERT	BOWE DENTAL, UNIT 7, Q RETAIL PK., ROXBORO, LIMERICK V94 YR67	061 608186
BARRY, GAVIN	10 BALLYKEEFFE EST., DOORADOYLE, LIMERICK (W)	061 228366
CANTON, CLARE	NO 8, DENTAL CLINIC, 1 OLD WINDMILL, LR. GERALD GRIFFIN St., LIMERICK V94 EY23 (W)	061 417566
BIELIKOV, ARTEM	CORNMARKET DENTAL, 1 OLD WINDMILL, LR. GERALD GRIFFIN St., LIMERICK V94 EY23 (W)	061 417566
BIELIKOV, ARTEM	NO. 8 DENTAL CLINIC, SHANNON ST, LIMERICK. V94 TY79	061 490710
DAVIS, AMELIA	6 ABBEVILLE, STATION ROAD, ADARE, CO. LIMERICK	061 396001
FLANAGAN, MÁIRE	MULLANE DENTAL, BISHOP ST., NEWCASTLEWEST, CO. LIMERICK (W)	069 62703
FLANAGAN, MÁIRE	NO. 8 DENTAL CLINIC, SHANNON ST, LIMERICK. V94 TY79	061 490710
FOLEY, ANNA	CRESCENT DENT, DOORADOYLE HSE, DOORADOYLE RD. LIMERICK	061 484844
FOLEY, JACQUELINE FOLEY, CLAIRE	NO. 3 OAKPARK, GORTBOY, NEWCASTLEWEST, CO. LIMERICK (W)	069 62962
GUINAN, THOMAS	9 SILVERBIRCH GROVE, DOORADOYLE RD., LIMERICK. (W)	061 305653
FOLK, SARAH	BOWE DENTAL, UNIT 7, Q RETAIL PK., ROXBORO, LIMERICK	061 608186
HENNESSY, JOHN	1 QUINLAN STREET, LIMERICK	061 315352
HIGGINS, AIDAN	5 COUNTY VIEW TCE., BALLINACURRA, LIMERICK.	061 315335
KERRISK, DENIS	81 O'CONNELL ST., LIMERICK.	061 312300
LYONS, MAURICE	DENTAL SURGERY, BRIDGE ST., ABBEYFEALE, CO LIMERICK.	068 31293
McCABE, BRIAN	2 AN DÚN, CHURCH ROAD, RAHEEN, LIMERICK. (W)	061 225533
McMAHON, JOHN	18 BARRINGTON STREET, LIMERICK.	061 316322
MILLS, EOIN	UNIT 7, Q RETAIL PARK, ROXBORO, LIMERICK. (W)	061 608186
MORLEY, JOHN	13 UPPER MALLOW ST., LIMERICK.	061 317781
NAGLE, MARIAN	BISHOP ST. DENTAL CLINIC, BISHOP ST., NEWCASTLEWEST. (W)	069 62703
NOONAN, EAMONN T.	17 ELLEN STREET, LIMERICK. (W)	061 468765
NEO, VICTORY	NO. 8 DENTAL CLINIC, SHANNON ST, LIMERICK. V94 TY79	061 490710
O'CONNOR, JULIET	DENTAL SURGERY, BRIDGE ST., ABBEYFEALE, CO. LIMERICK.	068 31293
O'CONNELL, PAUL	UNIT 3, RETAIL PARK, KILMALLOCK, CO. LIMERICK.	063 31688
O'CONNELL, PAUL	OLD QUARTER HOUSE, ELLEN STREET, LIMERICK.	061 419682
O'DOWD, RITA	NO. 8 DENTAL CLINIC, SHANNON ST, LIMERICK.	061 490710

	18 UNIVERSITY COURT, CASTLETROY, LIMERICK	061 331414
O'DONNELL, MARK	4 PERY SQUARE, LIMERICK.	061 315203
O'LEARY, EVA	NO 8, DENTAL CLINIC, 1 OLD WINDMILL, LR. GERALD GRIFFIN St., LIMERICK. V94 EY23. (W)	061 417566
O'MAHONY, URSULA	BISHOP STREET, NEWCASTLEWEST CO. LIMERICK (W)	069 62703
OSBORNE, MICHAEL	LANSDOWNE DENTAL, 95 LANSDOWNE PK., ENNIS RD, LIMERICK. (W)	061 321867
POWER, KILLIAN	NO 8, DENTAL CLINIC, 1 OLD WINDMILL, LR. GERALD GRIFFIN St., LIMERICK V94 EY23 (W)	061 417566
SCANLON, RUTH	VICTORIA HOUSE DENTAL, 5 ST. JOHN'S SQUARE, LIMERICK.	061 490049
TOOMEY, DEIRDRE	NOONAN DENTAL PRACTICE, 17 ELLEN ST., LIMERICK.	061 468765

Cork

DRAKE, CLARAGH	LR. PATRICK ST., FERMOY, CO. CORK.	025 31137
CAGNEY, NUALA	NEW LINE DENTAL SURGERY, CHARLEVILLE, CO. CORK	063 81088
McMORROW, CLODAGH MILLS, JOHN MOLONEY, NORRIE	LR. PATRICK ST., FERMOY, CO. CORK.	025 31137
MURPHY, NOREEN	50 LR. CORK ST., MITCHELSTOWN, CO. CORK. (W)	025 24519
MURRAY, CLARE	NEW SQUARE, MITCHELSTOWN, CO. CORK. (W)	025 24197
NOONAN, EAMONN	NOONAN DENTAL CARE, MAIN ST, CHARLEVILLE, CO. CORK. P56 NY61 (W)	063 81251
NOLAN, DENIS M.	50 LR. CORK ST., MITCHELSTOWN, CO. CORK. (W)	025 24519
O'MEARA, CIAN	LR. PATRICK ST., FERMOY, CO. CORK.	025 31137
RIORDAN, DEREK	NEW SQUARE, MITCHELSTOWN, CO. CORK. (W)	025 24197
RIORDAN, MAIREAD	NEW SQUARE, MITCHELSTOWN, CO. CORK. (W)	025 24197
STUCKENBERG, ANNA	NOONAN DENTAL CARE, MAIN ST, CHARLEVILLE, CO. CORK. P56 NY61 (W)	063 81251

Co. Tipperary

BARRY, CATHERINE	BIRR, CO. OFFALY	0509 20488
BOWE, ROBERT 96575	WESLEY PLACE, CUDVILLE, NENAGH, CO. TIPPERARY.	067 32111
BURKE, AIDAN	DENTAL SURGERY, CATHEDRAL ST., THURLES, CO.TIPPERARY.	0504 21262
DWYER, CORINNE	LANDSDOWNE HOUSE, FRIAR ST, THURLES, CO. TIPPERARY	0504 21523
DWYER, CORINNE	THE MALL, THURLES, CO. TIPPERARY.	0504 21418
FARRELLY, TERRY	MAIN STREET, ROSCREA, CO. TIPPERARY.	0505 21000
GUINAN, ELAINE	BROOK COTTAGE, GRANGE ROAD, BALLINA, CO. TIPPERARY.	061 375493
KELLY, ANDREW	2 O'RAHILLY ST., NENAGH, CO. TIPPERARY.	067 33755
LENIHAN, RORY	THE MALL, THURLES, CO. TIPPERARY.	0504 21418

LUMBROSO, JACQUES	"THE DOVES", CHURCH ROAD, NENAGH, CO. TIPPERARY.	067 33350
O'DONOGHUE, CATHAL	LIBERTY SQUARE DENTAL PRACTICE, THURLES, CO. TIPP.	0504 22028
O'REACHTAGAIN, P.M.	NATIONWIDE HSE. CASTLE ST., ROSCREA, CO. TIPPERARY.	0505 23000
TIMMONS, ELIZABETH	THE DOVES, CHURCH ROAD, NENAGH, CO. TIPPERARY.	067 33350
RYAN, MICHAEL G.	WESLEY PLACE, CUDVILLE, NENAGH, CO. TIPPERARY.	067 32111
SHIELDS, CORMAC	SHIELD'S DENTAL CENTRE, 24/25 MAIN ST., ROSCREA, CO. TIPPERARY. E53 EC56	0505 21000

Co. Clare

COTGREAVE, A.E.	16 MERCHANT'S SQUARE, ENNIS, CO. CLARE.	065 6821612
MAHONY, DERMOTT F.	STEELES TCE., ENNIS, CO. CLARE.	065 6821547
McGRATH, EIMEAR	THE OLD MILL DENTAL, GEORGES ST., SIXMILEBRIDGE, CO. CLARE.	061 713685
McNICHOLL, BARRY	16 MERCHANTS SQ., ENNIS, CO. CLARE.	065 6821612
O'MEARA, JUDITH	DENTAL SURGERY, CONNAUGHT RD, SCARRIFF, CO. CLARE.	061 640926
O'DOWD, BRENDA	RYAGAN HOUSE, SHANTRAUD, KILLALOE, CO. CLARE.	061 374744

Maria Bridgeman, Chief Officer, HSE Mid West Community Healthcare.

W112Q4131	What are the HSE's plans to actively engage with the private nursing home sector to utilise their facilities in enabling step down care for the elderly in the Mid-West Region?	Cllr R McInerney
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The HSE is currently engaging with private nursing homes on a daily basis to identify available beds for long term, short term, respite and palliative care. A daily private nursing home bed availability report is shared with colleagues across acute and community services in the Mid West.

There are 42 private nursing homes in the Mid West Area with 2171 beds currently in operation, 716 in Limerick, 733 in Clare and 722 in North Tipperary.

There are 70 HSE funded, contracted beds in 12 private nursing homes. These beds are primarily to allow for admission from the acute hospital service for patients who will benefit from additional therapy supports prior to discharge home. They are also used when possible to prevent hospital admission.

Maria Bridgeman, Chief Officer, HSE Mid West Community Healthcare

W112Q4132	I seek an update on the progress of Ballyhaunis Primary Health Care Centre that has recently been confirmed to recommence in September 2024. What date is the developer due to commence work on site?	Cllr A Gallagher
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I confirm that the builder has started back on site in September 2024. Significant activity on site is not anticipated until during October 2024 when both the mechanical and electrical subcontractors are due to return to site.

Joe Hoare, Assistant National Director, HSE Capital & Estates

W112Q4133	Ballyhaunis Primary Health Care Centre Has a schedule of works been submitted to the HSE?	Cllr A Gallagher
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The builder has been engaging with his supply chain and an updated construction programme to completion is being finalised once they have confirmation from the various trades on the extent of works to be completed and timelines for same.

Joe Hoare, Assistant National Director, HSE Capital & Estates

W112Q4134	Ballyhaunis Primary Health Care Centre Please provide details of key milestones with dates of this schedule?	Cllr A Gallagher
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A detailed programme for commencement through to completion is awaited and is expected to be submitted in the coming weeks.

Joe Hoare, Assistant National Director, HSE Capital & Estates

W112Q4135	Ballyhaunis Primary Health Care Centre What date is the HSE scheduled to occupy the building?	Clr A Gallagher
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The HSE cannot confirm this date at present. However, it is anticipated that the building works will be completed with 10 months. A minimum allowance of two further months would be required for the HSE to equip the building following agreement of practical completion. Therefore it is expected the HSE might occupy the building in late 2025.

Joe Hoare, Assistant National Director, HSE Capital & Estates

W112Q4136	Planning permission has been granted for a new ambulance base for North Connemara. Has this project gone for tender? If not when is it expected to go for tender?	Clr E Mannion
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We can confirm the following in relation to this project.

- Statutory Consents:
 - Planning - granted
 - Fire Safety Certificate (FSC) – Granted
 - Disability Access Certificate (DAC) – Lodged & awaiting grant
- Detailed Design towards provision of pre-tender cost estimate & completion of tender documents is ongoing. Currently frozen Architectural packages are with the NAS for final comment.
- The programme currently targets issue of the tender package in mid-to-late October.
- Commencement on-site is expected January 2025 with an estimated six month construction period.

JJ McGowan, Chief Ambulance Officer - West

W112Q4137	Can an update be given on the proposed new Health Centre for Inishbofin?	Clr E Mannion
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A number of property transactions are required to facilitate the development of a Primary Care Centre on Inishbofin. These involve the transfer of land from Galway County Council to the Department of Rural and Community Development and the subsequent transfer of a portion of that land to the HSE. The Chief State Solicitors Office (CSSO) represents the Department on this matter. The HSE's legal agent has received a draft proposed sales contract from the CSSO for the latter transaction and the documentation received is currently under review. HSE Capital & Estates are concluding a new Design Team appointment for the proposed Primary Care project on the site on Inishbofin. The intent is to progress Stage 1 design feasibility assessment in parallel with seeking to conclude the purchase of the site.

Joe Hoare, Assistant National Director, HSE Capital & Estates

W112Q4138	Children in the North Connemara area are travelling to UCHG to attend Eye and Ear Clinics. Can a regular Eye and Ear clinic be set up at Clifden District Hospital or Clifden Health Centre to facilitate children in the area?	Clr E Mannion
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Paediatric Audiology Services in Ireland are under two categories

-Community Based Paediatric Audiology Services which provides diagnostic testing with view to rehabilitation (hearing aids) and ongoing monitoring of these children from 0 – 18 yrs of age. We currently run this service primarily from our base at 10 Ely Place, Sea Road, Galway and will shortly be having an outreach clinic at Tuam PCCC.

The Paediatric Audiology Service in the CHO2 is severely short staffed and at full capacity we have 4.5 audiologists (currently with the embargo and no backfills approved for staff on leave, we have only 2.5 audiologists actively working) who are qualified to test this group of children and cover the Paediatric Audiology Services over Galway/Mayo and Roscommon.

-Acute Audiology Services is based in the hospitals and run in conjunction with ENT departments. In Galway this is run in UCHG. Details on services and plans to open outreach clinics if any can be obtained from the clinical coordinator at UCHG.

Ophthalmology

Generally children are not seen for eye appointments in UCHG now but in community at the Shantalla clinic

In Shantalla we provide a comprehensive paediatric eye service with no waiting list, up to date equipment and are flexible with regards scheduling to facilitate patients.

J Fitzmaurice, Chief Officer, Community Healthcare West

W112Q4139	Clifden District Hospital is funded for seven beds only. Can funding be increased for 2025 to increase the number of beds available?	Cllr E Mannion
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Unfortunately there is no funding provided for additional beds under the National Service Plan.

J Fitzmaurice, Chief Officer, Community Healthcare West

W112Q4140	Can funding be put in place to support people living with acquired brain injuries in Galway and Roscommon?	Cllr A Harney
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Disability services in Galway and Roscommon support and enable people with disabilities to live the life of their choosing in their own homes and communities, through services, supports and environments, designed and adapted as necessary to meet their needs, enabling them to live ordinary lives in ordinary places as independently as possible.

The following is a list of support services and suitable assisted living arrangements offered to adults living with acquired brain injuries in CHO2:

1. Personal Assistant (PA) services – home care supports provided to individuals with a physical & sensory disability
2. Quest Brain Injury Services – group rehabilitative training support offered to individuals living with an acquired brain injury
3. Rehab Care, Outreach – 1:1 rehabilitative training support in the home for individuals living with an acquired brain injury
4. Cheshire apartments - individual apartments with 24/7 on call Nursing support and collaborative working with Rehab care and Personal Assistant services where appropriate
5. Rehab care Logan House – residential apartments for individuals with an acquired brain injury with access to OT, Neuropsychology and other MDT supports
6. Holly Lane Services – 24/7 residential and rehabilitative support providing Nursing, OT & Physio for individuals with an acquired brain injury
7. Residential Bespoke Services – residential houses delivered by private providers / agencies with high staff ratio / transport / full MDT including behavioural therapy, Psychology and Psychiatry
8. Collaborative supports with the City & County Councils and HSE Primary Care teams through social housing allocations with wrap around supports

J Fitzmaurice, Chief Officer, Community Healthcare West

W112Q4141	How many ambulances are in operation at the base at Portiuncula University Hospital during the day and during the night and can additional resources be put in place to deliver an enhanced service during nighttime hours.	Cllr A Harney
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Currently, Ballinasloe Ambulance station operates with two day crew and one night crew every day of the week except for a Thursday where it operates one day crew and one night crew. As the National Ambulance Service operated a dynamic deployment model the base is further supported by nearby ambulance stations in Loughrea, Birr and Athlone.

Call volume averages tend to be highest between the hours of 1000 – 2300 with call volumes dropping significantly during night time periods.

At this time, no additional crews are being sought for Ballinasloe Ambulance Station. However, please be assured that this situation is under constant review to ensure that service levels remain appropriate for the needs of the region.

JJ McGowan, Chief Ambulance Officer - West

W112Q4142	What plans does the HSE have for the former Health Centre in Ballygar which was destroyed by fire a number of years ago. If there are no plans in place, can a transfer of this building to the community be facilitated?	Cllr A Harney
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Primary Care Services are continuing to review their accommodation requirements in the Ballygar area. While rebuilding the Health Centre on the main street remains an option, Primary Care Services are of the opinion that the original footprint will not provide the necessary accommodation for both GP and enhanced Primary Care Services with car parking. The HSE have taken measures to tidy up the site and improve the façade of the fire damaged building and are liaising with HSE Capital and Estates Department to work towards a final decision on HSE accommodation in Ballygar. If Primary Care Services no longer have use for the fire damaged building, HSE Capital and Estates will then make a decision on the future use or disposal of the asset.

J Fitzmaurice, Chief Officer, Community Healthcare West

W112Q4143	Please provide an update on the plans for St. Brigid's Hospital in Ballinasloe. Can works be undertaken to clean up the campus as a matter of priority including the removal of weeds, cutting back of trees and shrubbery, the painting of external walls and removal of ivy from the buildings as the ever worsening state of repair of the area is a blight on the landscape. Finally, can space be provided for a carpark across from creagh graveyard to facilitate parking during funerals, there is an existing entrance which would need to be reopened to facilitate this.	Cllr A Harney
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The Internal review process based on the completed professional valuation remains to be completed by our Estates colleagues.

The HSE remain committed to disposing of surplus land and buildings on the former St Bridget's campus in Ballinasloe and the buildings referred to are part of this process. Expressions of interested form other state bodies will be considered in the first instance as part of any disposal.

Unfortunately we have a limited Maintenance budget and we will always prioritise works required in our existing buildings in use by our service users and the general public, as regards the car park requests as graveyards come under the management of Galway County Council it would be best refer that request to them and we are happy to engage with them regarding use of the area mentioned.

J Fitzmaurice, Chief Officer, Community Healthcare West

W112Q4144	Some blood test investigations across Donegal are currently being outsourced causing delays for diagnostics from GPs and for patients. Can we get a detailed update on the construction and staffing arrangements for the new laboratory facilities at LUH?	Cllr D Meehan
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The Pathology Department at LUH has experienced a significant increase in workload and no longer has the capacity to perform all GP samples in the routine 8am to 8pm window. The only solution to this problem is additional analysers and currently LUH have no floor space to accommodate. Therefore, a small proportion of GP blood science work is being outsourced owing to lack of processing capacity within the Biochemistry Department. LUH continue to try to resolve the LUH Blood Sciences laboratory capacity issue with procurement. Discussions are taken place with the Assistant National Director at HSE procurement and based on these discussions there may be a possibility to progress an arrangement to provide a turn-key solution to deliver a second track on our blood sciences laboratory, including modular accommodation.

A. Cosgrove, Interim CEO, Saolta University Health Care Group

W112Q4145	What planning is in place with regards to recruitment and retention of personnel to maintain services in LUH, specifically in the breast cancer and rehabilitation unit as retirements of existing staff are approaching, and retention of colleagues in those services may be difficult without active planning for replacements?	Cllr D Meehan
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LUH is experiencing challenges in relation to workforce recruitment and retention, similar to all our health services. Our management team and HR are proactively managing a cycle of recruitment campaigns and initiatives to ensure continuity of service for all our patients.

In relation to retirements; to replace a permanent consultant within a given speciality can take a number of months, for this reason and in order to avoid a gap in service upon retirement, it is prudent to commence the recruitment process in advance of a retirement date.

In anticipation of a possible retirement of a Consultant Breast Surgeon, LUH have to date interviewed 3 Consultant Breast Surgeons, an offer of employment has been made to two of these but neither accepted. LUH will continue to source suitable candidates for replacement of the existing Breast Surgeon.

Similarly, recruitment continues for the recruitment of a Consultant Geriatrician through local recruitment or PAS.

A. Cosgrove, Interim CEO, Saolta University Health Care Group

W112Q4146	GPs across Donegal received a letter informing them of the physiotherapy working at 40% capacity with just 2 of 5 posts currently filled, resulting in waiting lists of between 8 and 12 months for patients. Given that the recruitment embargo has now been lifted in the HSE, when will direction be given for the recruitment to the 3 vacant physiotherapy posts for this desperately under-staffed service, and can the administrative support for this department be increased from the current level of 4 hours per week? Can we also have information on the numbers of patients in Donegal currently waiting more than six months for physiotherapy appointments?	Cllr D Meehan
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The HSE is continuing to prioritise physiotherapy referrals based on clinical need due to a number of vacant physiotherapy posts within the Letterkenny Community Physiotherapy Department. GPs have been informed of the current situation which will result in increased wait times to access services.

Issues around administrative support for this department had been affected due to staff leave, however staff have now returned from leave and previous levels of staffing have been reinstated. Also, due to a review of the local services a Physiotherapy Assistant is now covering the area, and administrative duties for the Physiotherapy Department are included in the role.

CH CDLMS have been actively working to fill posts via Agency conversion, new Development Posts and vacancies arising in 2024 from retirements, resignations and promotions, in the context of the agreed Pay and Numbers Strategy for 2024 and WTE limits applicable, a number of posts have been progressed across clinical and management roles.

The HSE wishes to apologise for any disruption to services and the increased wait times for patients and confirms that all necessary steps are being taken by Human Resources to expedite recruitment to these vacant posts.

Number of people waiting more than six months for a physiotherapy appointment

Number of weeks	Number of People
>26 weeks ≤ 39 weeks	337
>39 weeks ≤ 52 weeks	167
≥ 52 weeks	93
Total	597

D Monaghan, Chief Officer, Community Healthcare Organisation, (Cavan, Donegal, Leitrim, Monaghan, Sligo)

W112Q4147	Can we have information on the numbers of people on waiting lists for home help across Donegal with specific reference to the numbers in each Primary Care Team area? The recruitment embargo has been lifted since July. When will additional home help workers be recruited to meet these waiting lists in Donegal to address the dire need that exists in the community for this vital service?	Cllr D Meehan
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As of Tuesday, 9th September 2024, there are 373 clients awaiting a new home support service or an increase in their current package of care in Co. Donegal. This equates to 2,682 additionally resourced hours per week and, as it stands, all HSE rosters are at full capacity.

Donegal County Home Support Waiting Lists (per Network)

	Total no. clients on waiting list	New Services	Increases	Total hours per week
East Network	120	88	32	973.75
Inishowen Network	40	30	10	333.50
North Network	75	52	23	490.00
South Network (Including Ballyshannon / Bundoran)	138	96	42	873.75

From August 2024, Donegal Home Support Service has been placed under the mandatory Pay & Number protocol which has consigned limitations on recruitment and increasing home support hours at a local level. The service is currently working with the local HR department regarding recruitment of additional Home Support Workers within the agreed WTE for the service.

D Monaghan, Chief Officer, Community Healthcare Organisation, (Cavan, Donegal, Leitrim, Monaghan, Sligo)