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**24/11/2022**

Sam Keenan,  
Committee Secretariat,  
Public Accounts Committee,  
Leinster House,  
Dublin 2.

**Re: Ref: S01074 PAC33**

Dear Sam,

I refer to your correspondence of 10<sup>th</sup> November re follow up issues arising from the meeting of the Public Accounts Committee held on 29<sup>th</sup> September 2022.

Please find below for the attention of the Public Accounts Committee members a briefing note and accompanying Appendices on a number of the follow up matters as requested.

If any further information is required, please do not hesitate to contact me.

Yours sincerely,

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**Ray Mitchell**  
**Assistant National Director**  
**Parliamentary Affairs Division**

## Briefing Note for the Public Accounts Committee

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### 1. The likely number of claims from the issues arising in CHO 4 in relation to CAMHS.

The CAMHS Scheme, approved by Government, to address the findings of the Look-Back Review report into Child and Adolescent Mental Health Services in South Kerry which examined the treatment of more than 1,300 young people by a Non-Consultant Hospital Doctor in South Kerry Mental Health Service, identified 240 young people whose care did not meet acceptable standards. All 240 people identified in the report are entitled to apply to the Kerry CAMHS Scheme. To date 129 applicants have applied to the Scheme. The State Claims Agency manage this scheme.

### 2. A summary of the report published by the HSE on the Owenacurra centre.

The original plan for the Owenacurra Approved Centre was to refurbish the day centre section of the building to address privacy concerns for residents of the centre. The current building simply did not allow for the kind of care and recovery, which a modern service should provide. As a result of the Covid-19 pandemic, these works were delayed.

Notwithstanding the fact that there were no conditions attached to the registration or escalation or enforcement actions since the previous inspection in 2020, the Mental Health Commission (MHC) completed an inspection between 16-19th February, 2021 raising serious concerns with regard to persistent non-compliance with Regulation 22: Premises. On foot of this, Cork Kerry Community Healthcare (CKCH) committed to providing plans for the Owenacurra Centre to work to address the noncompliance. These concerns echoed the on-going concerns of local management about the condition and unsuitability of the current building to serve the needs of the people using the service.

During Quarter 2 of 2021, Service planning and delivery started to recommence in a more normal way as Covid measures eased. Covid 19 also had the added effect of focusing additional attention on the standard of accommodation available in residential settings across the CHO. Subsequently, the originally proposed works in Owenacurra were revisited and reviewed in both this context and in the context of other concerns evident in the centre, including fire risk assessment, asbestos survey, infrastructural deficiencies, etc.

Following a review by HSE Estates of the independent Fire Risk Assessment, Asbestos Survey, Mechanical and Electrical Infrastructure reports, and taking account of the structural design of the Owenacurra Centre, all of which were undertaken to identify risks and potential solutions. The view was formed that the investment of significant capital did not represent the best use of public funds in providing the best solution for the service.

Given the unacceptable deficiencies in the accommodation, the extensive level of investment required to provide a centre that would meet the resident's needs, the decision became clear to close the Centre and identify alternative appropriate options for the residents. The following outlines further deficiencies and issues in relation to the centre:

- A Fire risk assessment report survey findings was undertaken, which details works required to address these deficiencies, which were significantly more than “repair” works.
- Asbestos survey detailing findings of a decorative coating throughout the ceilings in the centre that contains chrysotile asbestos, which would need to be removed when completing necessary fire risk works to a significant number of ceilings within the building. The presence of Asbestos was also noted in the flooring.
- Essential systems such as heating, electrics, building fabric etc. being beyond their end of useful life;
- Continuance of HSE clients living in 7.5m<sup>2</sup> bedrooms with no ensuite when the current best practice to achieve is 22m<sup>2</sup> (including an ensuite)
- Lack of social spaces, therapeutic spaces and essential staff support accommodation.
- The fact that investment of significant funding into a building would still not bring the unit up to an acceptable accommodation standard for residents and other service users.
- As has been outlined previously, the Owenacurra Centre is currently c. 1,050m<sup>2</sup>. Based on existing standards of accommodation for the client profile in the Centre, a new facility with the same number of bedrooms would need to be approximately twice the size of the current Centre in the order of c. 1,800m<sup>2</sup> – c. 2,000m<sup>2</sup> would be required. This does not include other essential requirements necessary on-site such as secure, external recreational and therapeutic spaces, appropriate parking spaces, as well as creating an independent day Centre.
- The age and type of construction of the building (a Roh-fab building with a useful lifespan of approximately 40 years currently in operation for circa 50 years) meaning the ability to comply with current building regulations and Government energy performance requirements would not be capable of being met;
- Notwithstanding the above, a further significant factor regarding any potential refurbishment options is that the existing structural design is not capable of facilitating such major renovation works without requiring a very complex and extremely costly engineering solution to maintain its integrity while any works would advance.
- In addition, it would be impractical and inappropriate to undertake works of such significance, on a phased basis, with residents in place, due to issues including Health & Safety, the overall welfare of residents and staff, Fire Control, Asbestos and Aspergillosis risks due to the nature of the works involved.

As there was no way to bring the centre to a standard where it would be fit for purpose at a realistic cost, HSE Cork Kerry Community Health were left with no choice but to close the centre.

The replacement of the building is now proposed as the most effective way of ensuring a facility that meets with resident's needs, meets with best practice guidelines for such accommodation, meets current building standards and will meet with the Government's energy target requirements for public buildings in a cost effective manner.

### **3. A table breaking down the uptake of the second booster for the COVID-19 vaccine.**

Please see attached **Appendix 1** with the latest information on COVID booster cohort uptake.

### **4. The number of people on the waiting list for the Linn Dara facilities.**

In May 2022, the HSE made the difficult decision to temporarily reduce the inpatient capacity at Linn Dara Child and Adolescent Inpatient facility to 13 beds. This is due to challenges in hiring and retaining nursing staff at levels necessary to operate Linn Dara at full capacity while maintaining the necessary standards of care and safety for patients.

Linn Dara Child and Adolescent Inpatient Facility continues to process referrals for inpatient admissions. There are currently seven referrals for Linn Dara being triaged with no accepted referrals awaiting admission.

The reduction in bed capacity is reviewed on a constant basis, with the intention to return to full capacity at the earliest opportunity. Healthcare settings continue to face a challenging recruitment environment. The HSE is actively engaged in comprehensive national and international recruitment campaigns for Psychiatric Nursing staff as well as recruitment from graduate programmes. The HSE continues to explore all avenues to recruit and hire Psychiatric Nursing staff. As recruitment is ongoing, it is not possible to give a specific date when capacity will increase.

### **5. A tabular breakdown of recruitment in the HSE since January 2020 by discipline, including but not limited to occupational therapists, and a separate breakdown of same for 2022 to date.**

Given the size and complexity of the health services, staff are recruited by local services, through national recruitment initiatives and through external agencies by the HSE and Section 38 Voluntary Hospitals and agencies. In addition, the HSE also has on-going international recruitment campaigns, which take place in a competitive environment against global shortages of health professionals. Recruitment activities are undertaken to fill both vacancies and new service development posts.

In order for the HSE to maintain employment levels, recruitment activity must take account of the requirement to replace staff who leave (resign or retire etc.). In normal circumstances this equates to circa 9,500 per annum but so far this year, this is running at a significantly higher level with a combined total for quarter 1, quarter 2 and quarter 3 of 10,500. However, the HSE does not centrally track all this recruitment activity, undertaken by a variety of stakeholders across the organisation. Instead, through our planning process, we utilise the staff turnover rate, which is in the order of 7% overall, to plan for the replacement of these staff across our services, incorporated into our overall planning for recruitment of not only replacement posts, but equally our new service development posts.

Employment levels at the end of October 2022, show there were 136,092 WTE (equating to 154,625 personnel) directly employed in the provision of Health & Social Care Services by the HSE and the various Section 38 hospitals & agencies. This figure represents net year-to-date increase of 3,722 personnel (+3,769 WTE) and a 6,790 (+6,149 WTE) in 2021 when the impacts of turnover are accounted for.

Details by discipline are as set out in the following table:

Staff Group/ Discipline	WTE Dec 2020	WTE Dec 2021	WTE Oct 2022	WTE change 2021	WTE change YTD 2022	No. Dec 2020	No. Dec 2021	No. Oct 2022	No. change 2021	No. change YTD 2022
<b>Total Health Service</b>	<b>126,174</b>	<b>132,323</b>	<b>136,092</b>	<b>+6,149</b>	<b>+3,769</b>	<b>144,113</b>	<b>150,903</b>	<b>154,625</b>	<b>+6,790</b>	<b>+3,722</b>
<b>Medical &amp; Dental</b>	<b>11,762</b>	<b>12,113</b>	<b>12,615</b>	<b>+352</b>	<b>+501</b>	<b>12,545</b>	<b>12,975</b>	<b>13,585</b>	<b>+430</b>	<b>+610</b>
Consultants	3,458	3,608	3,837	+150	+229	3,770	3,945	4,181	+175	+236
Registrars	3,876	4,104	4,344	+229	+240	3,991	4,248	4,485	+257	+237
SHO/ Interns	3,594	3,587	3,634	-8	+47	3,651	3,654	3,809	+3	+155
Medical/ Dental, other	833	814	800	-19	-14	1,133	1,128	1,110	-5	-18
<b>Nursing &amp; Midwifery</b>	<b>39,917</b>	<b>41,576</b>	<b>42,797</b>	<b>+1,660</b>	<b>+1,220</b>	<b>45,603</b>	<b>47,375</b>	<b>48,627</b>	<b>+1,772</b>	<b>+1,252</b>
Nurse/ Midwife Manager	8,344	8,852	9,227	+508	+375	9,142	9,727	10,038	+585	+311
Nurse/ Midwife Specialist & AN/MP	2,299	2,481	2,850	+183	+369	2,582	2,791	3,157	+209	+366
Staff Nurse/ Staff Midwife	26,763	27,850	28,041	+1,087	+192	30,960	31,982	31,886	+1,022	-96
Public Health Nurse	1,557	1,523	1,496	-34	-27	1,865	1,835	1,798	-30	-37
Pre-registration Nurse/ Midwife Intern	28	124	235	+96	+111	54	224	637	+170	+413
Pre-registration Nurse Intern (COVID-19)	230	1	-	-229	-1	255	2	-	-253	-2
Post-registration Nurse/ Midwife Student	258	277	265	+19	-11	259	292	282	+33	-10
Nursing/ Midwifery awaiting registration	76	124	356	+49	+232	79	132	460	+53	+328
Nursing/ Midwifery Student	592	526	856	-65	+330	647	650	1,379	+3	+729
Nursing/ Midwifery other	362	344	326	-18	-18	407	390	369	-17	-21

## 6. The timeframe for the appointment of a whole-time equivalent dietician in CAMHS South in Wexford.

In broad terms the desired turnaround time for any post is 6 – 12 weeks. However, reaching this target is dependent upon a number of factors:

- Supply of candidate pool.
- The level of clearances required for candidates.
- Occupational Health clearance for fitness to work.
- Garda vetting – are there residences outside of Ireland.
- CORU registration
- Reference checks – internal and external to Ireland
- Work permits

Two x 0.5 WTE Senior Dietician posts were approved for CAMHS in Wexford and are currently being combined to create 1 WTE. There is a senior panel (primary panel) in the National Recruitment Service (NRS). A supplementary panel is currently at shortlisting stage with expected interviews to take place 13<sup>th</sup> or 14<sup>th</sup> December.

The Senior Dietician post will be offered out to the primary panel initially. If the post is not filled from the primary panel it can be offered to the supplementary panel once established. Depending on the candidate and the level of clearances this can take anything from 2 weeks to 6 weeks.

It is important to note that there is a labour shortage with Allied Health Professionals and therefore we may not be successful in filling the post nationally.

If we are unsuccessful with the NRS campaigns, we will explore international candidates, however this process can take 7-9 months from identification of candidates, shortlisting, interview, clearances and CORU registration.

## **7. The number of people on the current waiting lists nationwide for CAMHS, and the times taken to see patients on the general waiting lists.**

The table below provides information on the number of children and adolescents who are on the waiting lists for CAMHS services by CHO area. Please be advised that this data is at September 2022 (most recent data) and is subject to change due to ongoing review and validation. Please note data is not captured by age range.

	<b>Total</b>	<b>&lt;= 12 weeks No.</b>	<b>&gt; 12 &lt;= 26 weeks No</b>	<b>&gt;26 &lt;=39 weeks No</b>	<b>&gt;39 &lt;=52 Weeks No</b>	<b>&gt;52 Weeks No</b>
National Total	<b>3,818</b>	1,320	942	696	453	407
CHO 1	<b>406</b>	175	102	69	35	25
CHO 2	<b>287</b>	101	77	67	37	5
CHO 3	<b>371</b>	110	59	39	60	103
CHO 4	<b>629</b>	105	159	124	108	133
CHO 5	<b>335</b>	72	78	97	63	25
CHO 6	<b>597</b>	307	160	86	32	12
CHO 7	<b>272</b>	125	60	43	17	27
CHO 8	<b>652</b>	248	156	113	58	77
CHO 9	<b>269</b>	77	91	58	43	0

Waiting lists vary across Community Healthcare Organisation (CHO) Areas, where although some areas have relatively short waiting lists, regrettably waiting times are longer in other CHO's. There has been an increase in demand for CAMHS and an increase in complexity of cases referred to CAMHS since COVID-19, this has had a significant impact on waiting times. Factors such as availability of specialist CAMHS clinicians, current vacancies and difficulties in recruiting in an international context can impact on waiting times also. The HSE continues to run recruitment campaigns to fill posts and a renewed focus on waiting list initiatives and improving capacity and throughput is in place in a number of the CHO Areas.

## **8. A note outlining any nursing homes, privately-owned or owned by religious institutions, that have been bought or taken over by the HSE in the last five years.**

The HSE has not bought or taken over any registered Nursing Home funded under the Nursing Homes Support Scheme and owned by a third party in the last five years.

To note, The HSE may be required to act as a provider of last resort under the Health Act 2007 on occasion, this may involve applying short term arrangements to allow for the safe transfer of clients to other appropriate settings. These measures are temporary as happened for example in a few cases during COVID 19 and the HSE will have only take operational control for a short period of time.

**9. The number of people moved from Owenacurra that went into nursing homes or mental health facilities, and the number thereof that went into facilities in which they shared accommodation.**

We have been advised that out of the 11 residents who have transferred from Owenacurra, at present,

- 9 are being accommodated in a single room
- 1 has moved to a shared room
- 1 has been transferred to a community setting

These decisions have been made based on the assessed needs and will of preference of the residents. All residents transferred were /are being supported and monitored by members of the multi-disciplinary team.

Please note, the HSE cannot comment on the relocation of individual patients when to do so might reveal information, breaching the ethical requirement on us to observe our duty of confidentiality. The safety and wellbeing of current and former residents of Owenacurra remains our utmost priority and concern at this time.

**10. A note outlining issues experienced by the HSE in recruiting for chaplaincy services in St. Brigid's Hospice.**

In respect of the **therapy post**, it is one whole time Medical Social Worker. There is a live panel in place with the HBS National Recruitment Service and the post has been offered to this live panel. This will remove the need for a separate campaign to fill the post, which would extend the timeframe for filling.

The **Chaplaincy Post** is approved as two half time posts as this is viewed by the service as the best opportunity to ensure filling same based on the profile of residents' needs and faiths. The posts were identified to fill the roles previously held by a bereavement support worker and a social worker, and to optimise the support to patients in St Brigid's Hospice and their families.

These posts are identified as priority posts and are funded and recruitment is in progress.

Pending the filling of the posts, the following measures are in place.

- Nursing, medical and health and social care staff provide support to patients and families within their scope of practice.
- Where clinically indicated referrals are made to appropriate support services.
- Residents are facilitated to attend other support services such as Cuisle, Portlaoise, and Newbridge cancer support groups where appropriate.

**11. An information note detailing the community psychologist vacancies in Crosslanes psychiatric unit and Singleton House in Drogheda.**

The following table sets out the position re vacant psychology posts at singleton house, Drogheda.

As outlined in the table we continue to work to fill these posts

Posts vacant	Current status
Senior Psychologist South Louth/East Meath General Adult Team	Permanent Senior Psychologist appointed in July 2022
Senior Psychologist South Louth /East Meath General Adult Team	Temporary vacancy from January 2022 due to permanent post holder on temporary leave. We have and continue to seek to fill it on a temporary basis.
Staff Grade Psychologist South Louth General Adult Team	Temporary vacancy from December 2021 due to permanent post holder on temporary leave. We have and continue to seek to fill it on a temporary basis.
Senior Psychologist Louth Meath Older Adult Team	Permanent Vacant Post from February 2022. We sought to fill this post from the National live panel of candidates but no candidate on the list expressed an interest in taking up the post. Subsequently CHO 8 commenced on 19 <sup>th</sup> September a local recruitment campaign to fill Senior Psychology posts in the CHO area.

**12. Whether the Office of Public Works were on site or carried out any work at the Owenacurra centre.**

The question relates to a query in relation to any visit or activity by the OPW at the Owencurra Centre. Having checked extensively with estates and services, we are not aware of any such visit nor are we aware of any approach by the OPW to view the property at this time.

**13. The capital expenditure on the hospital in Abbeyleigh in 2021.**

The capital expenditure on the hospital in Abbeyleigh in 2021 amounted to €1,951,266 including VAT.

**14. The independent architectural firm's report on the cost of the refurbishment of Erkina House.**

As requested, please find attached **Appendix 2** the independent costing for the refurbishment of Erkina House.



We would point out that any plan regarding the future of Erkina House has been put on hold pending the completion of an options appraisal exercise that is currently being concluded by an independent professional company with extensive experience working with charities in the area of community development and who has also done extensive work with TUSLA and the HSE. The company is a charity, deriving all their funding from contract work with the state and charity sectors. All the personnel involved have Masters Degrees in business, sociology, social care and associated fields, as well as experience in establishing and managing innovative programmes and services. This company has held focus groups with all key stakeholders and has met with all of the residents individually. It is expected that recommendations will be made by the end of the year.

**15. The date on which the day care centre at Abbeyleix nursing unit will reopen.**

The day care service in Abbeyleix will recommence week starting the 5th December on a phased basis operating three days per week initially with a view to be fully operational in the new year. Prior to the suspension of Day Services during the COVID-19 pandemic the service operated 4 days a week. It is our aim to fully operate on a 5 day a week basis in the new year.

**16. The expenditure to date on the car park facility at St. Fintan's campus in Portlaoise.**

The cost to provide the additional 140 spaces was ca. €595k incl VAT, which included the cost associated with a new drainage system for the carpark.

**17. The current status of the project to deliver a primary centre in Youghal.**

A master plan has been finalised for the St Raphael's site in Youghal and which establishes the location for the Primary Care Centre as well as the other significant development of a public residential care facility for older persons, to replace existing services in the town. The on-going development process for the Primary Care Centre will continue now to move through the necessary stages of approval.

**18. A detailed note providing information in relation to:**

- 1) speech and language therapy,**
- 2) occupational therapy,**
- 3) psychology,**
- 4) physiotherapy, and**
- 5) social work**

**on each of the following questions regarding recruitment across these five therapies in CHO 8:**

**(a) What is being done to fill these positions?**

**(b) Is there workforce planning?**

**(c) What interaction is there with third-level institutions?**

**(d) Are people being encouraged to take up study for these positions?**

**(e) Are graduates being offered a career path and/or a one/two year contract with the HSE?**

**(f) Are the pay grades similar to what is being offered in other English-speaking countries?****(a) What is being done to fill these positions?**

All positions have been advertised and are progressing for filling. Senior OT, Physio and S&L are at competition stage with OT and Physio panels becoming available in November 2022. Interviews are ongoing for Senior S&L Therapy posts. Basic level posts are at various stages of the recruitment process with OT for example at eligibility Stage.

**Live Job Orders/Post for Filling**

	<b>Total</b>	<b>Basic Grade</b>	<b>Senior/Manager Grade</b>
Occupational Therapy	88	42	46
Psychology	38	20	18
Physiotherapy	63	27	36
Social Work	40	16	24
Speech & Language	52	22	30
<b>Total</b>	<b>281</b>	<b>127</b>	<b>154</b>

**Job Order Filled 2022**

	<b>Total</b>	<b>Basic Grade</b>	<b>Senior/Manager Grade</b>
Occupational Therapy	13	9	4
Psychology	17	12	5
Physiotherapy	10	1	9
Social Work	18	10	8
Speech & Language	28	10	18
<b>Total</b>	<b>86</b>	<b>42</b>	<b>45</b>

**(b) Is there workforce planning?**

Yes, projections are based on Sláintecare and other service developments and attrition rates. In addition, there is strategic workforce planning undertaken at national level that sets out the workforce requirements, based both on research evidence and allied to the National Service Plan. To meet these needs both in the short, medium and longer term, there is a dedicated Workforce Planning and Resourcing Governance Committee, and Taskforce, that identifies key actions to support recruitment and retention in the short term. In addition there is a Recruitment and Resourcing Programme, recently established that dovetails with strategic workforce planning to identify a suite of targeted initiatives and actions to resource the necessary workforce both in the short, medium and longer-term.

**(c) What interaction is there with third-level institutions?**

There is ongoing engagement with third level institutions looking at developing courses and placements in line with service needs.

Participation in employment awareness days at third level institutes is part of the ongoing recruitment initiatives. Recent events include stands at AIT and Drogheda where HR staff engaged with students around career opportunities in the HSE.

**(d) Are people being encouraged to take up study for these positions?**

There is some access to secondary schools in local areas where HSE HR representatives take part in career guidance days. This is limited and at the discretion of local schools.

**(e) Are graduates being offered a career path and/or a one/two year contract with the HSE?**

Graduates are encouraged to participate in interview process and offers are made in order of merit to successful applicants. In general, contracts offered would be in excess of 6 months and generally extended. Graduates are well supported by their management to develop in areas of interest. The National Recruitment Service (NRS) will be engaging with Colleges early Q1 2023 and inviting all 2023 Graduates for interview in Q2 2023, with the aim of offering successful applicants Therapy Assistant roles until they graduate later in the year, at which time they will be offered permanent contracts in order of merit. The NRS invited all 2022 graduates to submit applications for staff grade positions and panels went live at the beginning of November 2022. Candidates will be offered permanent positions in order of merit from these panels.

Furthermore, the HSE is developing the Clinical Infrastructure to facilitate additional students and accommodate overseas candidates gaining registration.

The newly established Recruitment Reform & Resourcing Programme is working with Expert Groups for each profession to create and execute short, medium and long-term action plans. Although at an early stage, the development of structured Career Development Frameworks and Career Guidance and Support have been identified as key themes across all professions. Action plans to address these are currently being developed.

**(f) Are the pay grades similar to what is being offered in other English-speaking countries?**

Pay is in line with the Consolidated Salary scales issued by the Department of Health.

The salary scale for Staff Grade Physiotherapists is as follows:

Ireland	€37,522 - €54,569
NHS	€31,231 - €38,017 (*UK: €1 : £0.87)
Australia	€42,541 - €63,193 (*AUS: €1 : AUS\$ 1.65)

***19. A note outlining the budget nationally, for CHO 8, and specifically in Laois-Offaly for the following three schemes in 2021 and 2022:***

***(a) public dental health services,***

***(b) orthodontics, and***

***(c) the dental treatment services scheme (pg. 52).***

The DTSS National Budget for this year is €66m. This is made up of previous year's budget of €56m plus an additional €10m allocated in budget 2022.

The CHO8 budget and Laois / Offaly budget for Dental and Orthodontic Services is as follows:

<b>CHO8</b>	<b>€'000</b>
Dental	7,945
Orth	3,192
<b>Total CHO8 2022</b>	<b>11,136</b>
<b>Laois/Offaly</b>	<b>€'000</b>
Dental	2,446
Orth	815
<b>Total Laois/Offaly 2022</b>	<b>3,261</b>

We do not record budget expenditure in the detail that has been requested such as school dental scheme and the Dental Treatment Services Scheme.

## Other issues

### 1. Southdoc Out of Hours

Out of hours, GP services are provided across Cork and Kerry by Southdoc, which provides an extensive level of service and coverage across the challenging geography of the two counties. The HSE works closely with Southdoc in relation to monitoring trends of activity, demands for service, as well as having an understanding of the availability of out of hour's personnel to provide the services. This trend changed significantly during Covid, but has reverted to a high level of demand for the service. The HSE is aware of the request by Deputy O'Connor and other public representatives in relation to the provision of a service in Youghal specifically, currently out of hours services are provided in Midleton. The HSE will continue to work with Southdoc in relation to this request and in light of the significant demands on the service, which is apparent at this point in time.

### 2. Counselling Therapy posts

#### Background

The 2 posts in question were associated with the National Counselling Service. They were offered in the normal manner and proceeded through the initial stages of the recruitment process via the Counselling Service and HBS National Recruitment Service.

A clinical governance review had been initiated within the Counselling service, which identified gaps in clinical governance and supervision.

Subsequently development posts were approved for the service and a decision was taken to reconfigure all approved vacant posts with the development posts to provide for enhanced clinical governance in the service.

This involved the provision of relevant Grades to ensure appropriate line management, clinical supervision, and staff development to ultimately provide an enhanced service to the user.

This was a review of existing structures in line with best practice in such instances and this was not a financial review. It resulted in a proposal for a better use of all of the available resources.

As the original posts had not moved to contracting stage, the service requested HBS National Recruitment Service to withdraw the original posts. It is important to note that no start date had been agreed, no contract of employment had been offered and no person has lost their place on an existing panel.

#### Updated position

The service has now, as part of additional reviews, identified alternative ways to provide the enhanced governance as outlined above. Consequently, HBS National Recruitment have now re offered the two original posts to the relevant panel in place for the grade for uptake by those on that panel.

### **3. A breakdown of the relocation packages being offered.**

The relocation package includes allowances paid to candidates to meet initial costs for relocating, for example an accommodation and flight allowance.

Additional 'other costs' such as registration fees to Regulatory Bodies, Visa fees, aptitude test fees, etc. are also included.

The exact Cost is dependent on where the candidate is relocating from and the specialty of the post. See table below which sets out the various relocation packages:

<b>Relocation Package</b>	<b>EU/UK Candidate</b>	<b>Non-EU candidate</b>
Accommodation Allowance paid to candidate	€ 3,910.20	€ 3,910.20
Flight Allowance paid to candidate	€ 250.00	€ 800.00
Return Flight *	€ -	€ 800.00
<b>Total Allowances paid to candidates</b>	<b>€ 4,160.20</b>	<b>€ 5,510.20</b>
<b>Nursing and Midwives Other Costs-</b> registration fees to Regulatory Bodies, Visa fees, aptitude test fees, etc	<b>€ 495.00</b>	<b>€ 3,625.00</b>
<b>HSCP Other Costs-</b> registration fees to Regulatory Bodies, Visa fees, aptitude test fees, etc	<b>€ 2,405.00</b>	<b>€ 3,545.00</b>

\*An allowance for a return flight to the value of €800 is payable to Candidates relocating from outside the EU on a Specified Purpose Contract of 2 year duration.

#### 4. Recruitment of Occupational Therapists

Since 2020, HR Shared Services (through its National Recruitment Service) has recruited 656 Occupational Therapists of various grades, of which 423 were Staff Grade (full breakdown of grades in table below).

An additional 329 posts are currently in active recruitment, 208 of which are for Staff Grade Occupational Therapists. In the coming days when the panel is finalised these posts will be offered to the new panel which contains this year's successful graduate applicants.

Row Labels	Recruitment Complete	Current Active posts
Occupational Therapist	423	208
Occupational Therapist Manager	7	2
Occupational Therapist, Clinical Specialist	7	1
Occupational Therapist, Senior	175	101
Occupational Therapist-in-charge III	11	1
Occupational Therapy Assistant	30	16
Occupational Therapy, Practice Tutor	3	0
<b>Grand Total</b>	<b>656</b>	<b>329</b>

Campaigns are managed on an annual basis to capture graduates from Irish colleges. Given projected workforce demand, international recruitment will also be required to supplement the applicant pool and there is activity already underway to source eligible candidates from the international market.

In addition to recruitment activity, the Recruitment Reform and Resourcing Programme is working with the DoH and other relevant government departments, regulatory and statutory bodies to support a resourcing strategy to increase the supply of Occupational Therapists available to the HSE.

**Health Service Executive**  
**November 2022**

## Booster Cohort Analysis

Booster 1, Booster 2 and Booster 3 calculated over Fully vaccinated

Cohort Groups	Fully Vaccinated	Booster 1	Booster 2	Booster 3	% Fully Vaccinated with Booster 1	% Fully Vaccinated with Booster 2	% Fully Vaccinated with Booster 3
65+	682,722	657,163	502,776	157,032	96%	74%	23%
Immunocompromised	140,515	102,312	46,297	6,820	73%	33%	5%
HCW	291,175	253,209	37,769	679	87%	13%	0%
Clinically Vulnerable	376,143	327,568	64,126	6,285	87%	17%	2%
LTRCF	42,836	34,474	22,175	6,159	80%	52%	14%
50 - 64	629,848	560,239	176,282	1,281	89%	28%	0%
30 - 49	963,152	685,055	16,026	210	71%	2%	0%
18 - 29	515,331	297,332	2,462	18	58%	0%	0%
12 - 17	296,397	104,171	487	6	35%	0%	0%
05 - 11	115,453	47	1		0%	0%	

All % uptake is calculated over the fully vaccinated population. CSO do not provide figures for HCW, LTRCF etc and so is not displayed in this table.

