



Feidhmeannacht na Seirbhíse Sláinte  
Health Service Executive

PAC-R-593

Correspondence 3A.7  
Meeting – 20/09/2012

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19<sup>th</sup> July 2012



Ms. Fiona Cashin,  
Committee Secretariat,  
Committee of Public Accounts,  
Leinster House,  
Dublin 2

Dear Ms. Cashin,

I refer to your letter regarding our attendance at the recent Public Accounts Committee meeting with the HSE and a request for information on a number of follow up issues that arose during the course of the Committee's examination.

Please find here under for the attention of the Committee the HSE responses to the matters raised. We are gathering information for the remaining issues and will respond to you shortly.

I trust this information is of assistance.

Yours Sincerely,

Ray Mitchell  
Assistant National Director  
Parliamentary & Regulatory Affairs

**1. A note providing a comparison in costs between employing a nurse directly as against engaging an agency Nurse (see also 7 below).**

**Response:**

**Background -**

In March 2011 the HSE introduced agency contracts for the provision of HealthCare staff in the following Categories:

- Nursing
- Medical (NCHDs and Consultants)
- HealthCare Assistants
- Allied Health Professionals
- Social Care Workers.

The tender process resulted in significant savings on the cost of agency staff as follows:

Category	Savings from Pre -Tender Prices
Nursing	24.41%
Medical	18.94%
Allied Health Professional	19.96%
Social Care Workers	20.97%
Health Care Assistants	19.29%

The Protection of Employees (Temporary Agency Work) Act 2012 was enacted in May 2012. The implementation of this act requires that Agency Staff are treated 'as if' they were hired directly meaning that they must receive equal pay and other listed benefits in the same manner as directly employed staff members. The full impact of this act is not fully known as of yet, however it is expected that it will result in a significant increase in the cost of agency staff to the HSE.

- Agency Staff are only entitled to annual and public holiday leave, directly employed staff figure includes other statutory leave e.g. Maternity leave.
- Superannuation Figure is as per DOHC guideline.

**Comparison in Costs between employing a nurse directly against employing an agency Nurse.**

The Cost of employing agency staff is as follows:

Salary to Agency Staff member + Annual Leave/Public Holiday Leave + Employers PRSI (10.75%) + Agency Fee + VAT (23%)

Salary and Annual Leave are now in line with what a direct employee is paid as is employers PRSI. The additional Cost is now the VAT @ 23% plus the agency fee which ranges from 5.5% - 8%. It is important to note that agency staff are not in receipt of allowances or superannuation payments, so this will offset the overall cost.

As agency nurses will not generally work a full 39 hour week it is difficult to compare the actual salary of an agency nurse against a directly employed nurse, please see below in relation to Cost Components for analytical purposes.

Cost Component	Agency Nurse	Directly employed Nurse
Pay	DOHC Salary Scale	DOHC Salary Scale
Premium Pay	DOHC Salary Scale	DOHC Salary Scale
Employers PRSI	10.75%	10.75%
Superannuation	0%	25%
Leave Factor*	16.09%	20%
VAT	23%	0%
Average Agency Fee	5.60%	0%
Total % increase on Salary	55.44%	55.75%

- Agency Staff are only entitled to annual and public holiday leave, directly employed staff figure includes other statutory leave e.g. Maternity leave.
- Superannuation Figure is as per DOHC guideline.

***4. A note outlining whether staff are now complying with guidelines and filling out administrative forms in relation to child protection.***

**Response:**

We understand this to refer to the implementation of original version of Children First (1999). A revised version was issued in September 2011. There is no industrial relations issue in relation to its full implementation and staff are complying fully with all aspects of the guidelines.

***5. A breakdown of the HSE payroll giving the number in receipt of increments and the total cost of increments in 2012; and the cost of increments for those earning in excess of €70,000.***

**Response:**

The HSE operates 9 separate payroll systems. The main Voluntary Agencies funded by the HSE also operate their own individual payroll systems. The different payroll systems vary in sophistication in determining both the number of employees in receipt of an increment and associated cost of increments being paid. Estimates have been used where systems cannot report on the number of employees in receipt of increments and the associated cost of same. Also, as we do not have access to Voluntary Agencies systems, we have estimated the associated figures also.

- The estimated cost of increments in 2010 is €49.153m: The Estimated No. of Employees 36,596



- The estimated cost of increments in 2011 is €42.938m: The Estimated No. of Employees 30,599
- The estimated cost of increments for 2012 is €40.823m: The Estimated No. of Employees 29,032

The HSE systems are not sophisticated enough to determine with reasonable accuracy, the number of individuals in receipt of increments who earn above €70,000 per annum.

***6. A breakdown of the amount of the €96 million provided for in the estimates for State Claims that has been paid to date and what the incidents relate to.***

**Response:**

The Clinical Indemnity Scheme (CIS) was established in 2002, in order to rationalise pre-existing medical indemnity arrangements by transferring to the State, via the Health Service Executive (HSE), hospitals and other health agencies, responsibility for managing clinical negligence claims and associated risks.

On 1 January 2010 the management of HSE personal injury and third party property damage claims was delegated to the SCA under the National Treasury Management Agency (State Authority) Order 2009.

The amount provided in the 2012 REV for the State Claims Agency is €96m. The HSE does not have a specific breakdown of the amount provided between claims settlements and associated legal and other costs. On review of settlements over the past few years, legal costs average around 33% of the total costs in relation to the CIS and between 5% and 14% in relation to personal injury and property damage.

The amount paid to date in 2012 {May} is €36.320m for CIS and €0.776m for personal injury and property damage.

***7. A note outlining the number of agency staff employed that are former employees who have retired, the additional cost to the HSE of employing these people through an agency as opposed to directly employing them and the extra cost of the agency worker per hour, per week and per month (see also 1 above).***

**Response:**

Retired Staff Working through Agency –

It is not possible to determine the exact number of retired staff working through third party agencies in the HSE at present. A small number (7 in total) were identified from the cohort who retired in February 2012. These were mainly in the nursing area and were in response to specific service needs for a short period of time e.g. Maternity and Pediatric ICU.

***8. A note outlining the revised up-to-date costs of care in all of the nursing homes.***

**Response:**

The cost of care for all nursing homes is currently being reviewed and it is anticipated that it will be completed within a few weeks.

***9. A breakdown of the number of delayed discharges on a hospital by hospital basis and a copy of the report on delayed discharges.***

**Response:**

Please see accompanying report attached regarding Delayed Discharges.

***10. A note outlining the reason allowances in excess of €10,000 were paid to 9,500 HSE staff.***

**Response:**

Allowances are paid to public and civil servants for the performance of duties / responsibilities undertaken in addition to their normal duties. In many cases these allowances are in place to reflect the arduous nature or unsocial hours associated with the duties of posts or the work of additional value that is valid, appropriate and cost effective. The values of allowances vary to reflect the nature of the additional responsibilities undertaken. A full list of the approved allowances for the HSE are available on the Department of Health's Consolidated Payscales and can be view on the HSE's website on :

[http://www.hse.ie/eng/staff/Benefits\\_Services/pay/salary\\_scales\\_new entrant2011.pdf](http://www.hse.ie/eng/staff/Benefits_Services/pay/salary_scales_new entrant2011.pdf)

Due to the challenges experienced in extrapolating information from the many different legacy financial systems in operation in the HSE it is not possible within a short time frame to get the detail in respect of the payment of the allowances paid to the 9,500 staff as detailed in the 2010 Annual Report of the Comptroller and Auditor General.

However, a recent exercise has been conducted under the Government wide Review of Allowances currently being undertaken by the Department of Public Expenditure and Reform that has identified allowances currently being paid; the amounts paid and the total estimated annual cost for 2011. The terms of the Review includes the withdrawal of sanction / delegated sanction for the payment of allowances to new beneficiaries with effect from 1<sup>st</sup> February 2012 i.e. a new entrant or existing member of staff not in receipt of an allowance as at 31<sup>st</sup> January 2012. The HSE's submission is currently being considered by DPER in their deliberations and the outcome of the DPER Review is awaited.



## Delayed Discharges

### National Report



Feidhmeannacht na Seirbhíse Sláinte  
Health Service Executive

2nd July 2012

Report produced on 4th July 2012

#### 1. Definition of a delayed discharge

The operational definition of a delayed discharge in this monitoring system is:

*Patients who have completed the Acute Phase of their care and are medically fit for discharge. Patients are counted from the first day of the delayed discharge.*



## 2. Delayed discharges – Summary

On the 25<sup>th</sup> June 2012 the number of delayed discharges nationally was 680  
Please note no return from Roscommon

**Table 1: Weekly number of delayed discharges**

Week of	Nationally	DATHs hospitals	Under 65's	New delayed discharges	Removed delayed discharges	Difference
2 <sup>nd</sup> July 2012	680	367	90	150	167	-17
25 <sup>th</sup> June 2012	703	373	84	150	155	-5
18 <sup>th</sup> June 2012	708	366	91	162	168	-6
11 <sup>th</sup> June 2012	714	383	91	179	151	28
4 <sup>th</sup> June 2012	686	368	91	166	152	14
28 <sup>th</sup> May 2012	672	366	91	154	175	-21
21 <sup>st</sup> May 2012	693	381	93	166	152	14
14 <sup>th</sup> May 2012	679	368	91	126	135	-9
7 <sup>th</sup> May 2012	688	391	90	180	178	2
30 <sup>th</sup> April 2012	686	382	97	166	163	3
23 <sup>rd</sup> April 2012	683	378	98	171	137	34
16 <sup>th</sup> April 2012	649	361	94	120	145	-25
9 <sup>th</sup> April 2012	674	365	101	131	161	-30

**Table 2: Average number of delayed discharges nationally each month**

Monthly average	Nationally	DATHs hospitals
June 2012	703	373
May 2012	683	377
April 2012	679	372
March 2012	717	387

The average number of delayed discharges for the month of June was 703. Comparing this week's return of 680 to the average for June of 703 shows an increase of 3.27%. In addition to the numbers above, a number of acute hospitals are funding continuing care beds off campus. Table 3 below shows the volume of these patients nationally. The numbers are listed by Hospital later in this report.

**Table 3: Patients in a continuing care bed off campus (that are currently funded by the hospital)**

Return Date	Grand Total
2 <sup>nd</sup> July 2012	29
25 <sup>th</sup> June 2012	29
18 <sup>th</sup> June 2012	29
11 <sup>th</sup> June 2012	29
4 <sup>th</sup> June 2012	30
28 <sup>th</sup> May 2012	30
21 <sup>st</sup> May 2012	30



# **Delayed discharges profile by hospital group**

	Last Week	This Week	Change
<b>South Eastern Hospitals Group</b>			
South Tipperary General Hospital	10	7	-3
Waterford Regional Hospital	28	29	1
Wexford General Hospital	23	21	-2
St. Luke's Hospital Kilkenny	14	13	-1
<b>Southern Hospitals Group</b>			
Cork University Hospital	23	23	0
Mallow General Hospital	3	2	-1
Bantry General Hospital	9	5	-4
Kerry General Hospital	3	5	2
Mercy University Hospital Cork	5	3	-2
South Infirmity University Hospital Cork	6	5	-1
<b>North Eastern Hospitals Group</b>			
Cavan General Hospital	5	5	0
Our Ladys Hospital - Navan	4	9	5
Our Lady of Lourdes Hospital Drogheda	16	16	0
<b>Dublin North Hospitals Group</b>			
Beaumont Hospital	87	89	2
Connolly Hospital - Blanchardstown	58	63	5
Cappagh National Orthopaedic Hospital	4	1	-3
Mater Misericordiae University Hospital	98	95	-3
<b>Western Hospitals Group</b>			
Letterkenny General Hospital	7	2	-5
Mayo General Hospital	11	7	-4
Sligo General Hospital	8	9	1
Galway University Hospitals	1	2	1
Portiuncula Hospital General & Maternity Balinasloe	3	5	2
<b>Mid Western Hospitals Group</b>			
Mid Western Regional Hospital Dooradoyle	12	12	0
Mid Western Regional Hospital Nenagh	7	7	0
Mid Western Regional Hospital Ennis	3	2	-1
St. John's Hospital Limerick	3	4	1
<b>Dublin / Midlands Hospital Group</b>			
Midland Regional Hospital - Portlaoise	0	5	5
Midland Regional Hospital - Tullamore	15	11	-4
Naas General Hospital	8	5	-3
Midland Regional Hospital Mullingar	8	9	1
Tallaght Hospital	34	32	-2
<b>Dublin South Hospitals Group</b>			
St. James's Hospital	104	98	-6
St. Vincent's University Hospital Elm Park	50	53	3
St. Michael's Hospital Dun Laoghaire	6	5	-1
St. Columcille's Hospital Loughlinstown	21	21	0

#### 4. Delayed discharges profile by reason for delay

Table 5 outlines the main reasons associated with delays in patients being discharged from hospital.

Category	Over 65's	Under 65's	National Category Total	% of Total
Awaiting Community Services to be available e.g. home help, minor adaptations/equipment (HSE Primary Care Services)	12	5	17	2.5
Awaiting re-housing and or adaptations to home (Co Council)	4	6	10	1.5
Home Care Package work in progress	33	4	37	5.4
Home Care Package finalized and are on the waiting list for funding	13	1	14	2.1
Awaiting External Rehabilitation	36	20	56	8.2
Awaiting External Convalescent Care	12	2	14	2.1
Awaiting External Palliative/Hospice Care	6	1	7	1.0
Ward of Court	19	0	19	3
<b>NHSS PRE APPLICATION</b>				
NHSS application not yet submitted - S53A charges do not apply	111	11	122	17.9
NHSS application not yet submitted - S53A charges apply	4	0	4	0.6
<b>NHSS POST APPLICATION</b>				
HSE determinations in Process - awaiting outcome: S53A charges do not apply	257	20	277	40.7
Funding has been exhausted and the person is on a waiting list for financial support - S53A charges do not apply	10	4	14	2.1
Patient awaiting bed due to particular care requirements - S53A charges do not apply	45	14	59	8.7
Patient awaiting bed within reasonable proximity to their home and family - S53A charges do not apply	25	2	27	4.0
'Other' compelling reason - S53A charges do not apply	1	0	1	0.1
HSE determinations complete - S53A charges apply	2	0	2	0.3
<b>GRAND TOTAL</b>			680	



## 5. Profile by Hospital Group

### HSE Dublin Mid Leinster Area

Category	Tallaght Hospital	St. Columcille's Hospital Loughlinstown	St. Vincent's University Hospital Elm Park	St. James's Hospital	St. Michael's Hospital Dun Laoghaire	Midland Regional Hospital Mullingar	Naas General Hospital	Midland Regional Hospital - Portlaoise	Midland Regional Hospital - Tullamore
Awaiting Community Services to be available e.g. home help, minor adaptations/equipment (HSE Primary Care Services)	5	0	2	0	0	0	0	0	0
Awaiting re-housing and or adaptations to home (Co Council)	2	0	0	0	0	0	0	0	1
Home Care Package work in progress	2	1	1	8	0	0	0	0	0
Home Care Package finalized and are on the waiting list for funding	0	2	0	0	0	0	0	0	0
Awaiting External Rehabilitation	1	0	8	0	0	0	0	0	0
Awaiting External Convalescent Care	0	0	0	0	0	0	0	1	0
Awaiting External Palliative/Hospice Care	0	0	2	0	0	0	1	1	0
Ward of Court	2	1	3	0	0	0	1	0	0
<b>NHSS PRE APPLICATION</b>									
NHSS application not yet submitted - \$53A charges do not apply	7	7	12	0	2	3	0	0	0
NHSS application not yet submitted - \$53A charges apply	0	0	0	2	0	0	0	0	0
<b>NHSS POST APPLICATION</b>									
HSE determinations in Process - awaiting outcome: \$53A charges do not apply	6	10	22	79	3	6	2	0	10
Funding has been exhausted and the person is on a waiting list for financial support - \$53A charges do not apply	0	0	0	0	0	0	0	2	0
Patient awaiting bed due to particular care requirements - \$53A charges do not apply	5	0	1	9	0	0	1	0	0
Patient awaiting bed within reasonable proximity to their home and family - \$53A charges do not apply	1	0	2	0	0	0	0	1	0
Other compelling reason - \$53A charges do not apply	0	0	0	0	0	0	0	0	0
HSE determinations complete - \$53A charges apply	1	0	0	0	0	0	0	0	0
<b>Grand Total</b>	<b>32</b>	<b>21</b>	<b>53</b>	<b>98</b>	<b>5</b>	<b>9</b>	<b>5</b>	<b>5</b>	<b>11</b>





# HSE Dublin/ North East Area

	Mater Misericordiae University Hospital	Our Lady of Lourdes Hospital Drogheda	Cappagh National Orthopaedic Hospital	Connolly Hospital - Blanchardstown	Beaumont Hospital	Our Ladys Hospital - Navan	Cavan General Hospital
Category							
Awaiting Community Services to be available e.g. home help, minor adaptations/equipment (HSE Primary Care Services)	0	5		0	0	0	0
Awaiting re-housing and or adaptations to home (Co Council)	2	1		0	1	0	0
Home Care Package work in progress	4	0		0	12	5	0
Home Care Package finalized and are on the waiting list for funding	3	0		0	0	9	0
Awaiting External Rehabilitation	19	0		1	0	3	0
Awaiting External Convalescent Care	0	0		0	0	0	0
Awaiting External Palliative/Hospice Care	1	0		0	0	0	0
Ward of Court	3	1		0	4	3	0
<b>NHSS PRE APPLICATION</b>							
NHSS application not yet submitted - \$53A charges do not apply	22	0		0	14	15	3
NHSS application not yet submitted - \$53A charges apply	0	0		0	0	1	0
<b>NHSS POST APPLICATION</b>							
HSE determinations in Process - awaiting outcome: \$53A charges do not apply	25	9		0	22	29	2
Funding has been exhausted and the person is on a waiting list for financial support - \$53A charges do not apply	0	0		0	0	0	0
Patient awaiting bed due to particular care requirements - \$53A charges do not apply	14	0		0	0	24	0
Patient awaiting bed within reasonable proximity to their home and family - \$53A charges do not apply	0	0		0	10	0	0
Other compelling reason - \$53A charges do not apply	1	0		0	0	0	0
HSE determinations complete - \$53A charges apply	1	0		0	0	0	0

Grand Total	95	16	1	63	89	9	5
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**6. Patients in a continuing care bed off campus (that are currently funded by the hospital)**

	Last Week	New This Week	No.Discharges	Grand Total This Week
Waterford Regional Hospital	0	0	0	0
Beaumont Hospital	1	0	0	1
South Infirmary University Hospital Co	1	1	1	1
St. James's Hospital	27	0	0	27
Portiuncula Hospital General & Mater	0	0	0	0
St. Vincent's University Hospital Elm I	0	0	0	0
St. Michael's Hospital Dun Laoghaire	0	0	0	0

## 7. Delayed discharges by time band by Hospital

HSE Dublin Mid Leinster Area	0-2 Weeks	2-4 Weeks	4-26 Weeks	26 Weeks +	Total
Midland Regional Hospital Mullingar	8		1		9
Midland Regional Hospital - Portlaoise	5				5
Midland Regional Hospital - Tullamore	1	10	0	0	11
Naas General Hospital	2	3			5
St. Columcille's Hospital Loughlinstown	1	5	11	4	21
St. James's Hospital	11	33	44	10	98
St. Michael's Hospital Dun Laoghaire	1	4	0	0	5
St. Vincent's University Hospital Elm Park	13	13	24	3	53
Tallaght Hospital	13	4	12	3	32
<b>Total:</b>	<b>55</b>	<b>72</b>	<b>92</b>	<b>20</b>	<b>239</b>

HSE Dublin/ North East Area	0-2 Weeks	2-4 Weeks	4-26 Weeks	26 Weeks +	Total
Beaumont Hospital	7	13	45	11	89
Cappagh National Orthopaedic Hospital	1				1
Cavan General Hospital	1	1	3		5
Connolly Hospital - Blanchardstown	13	18	32		63
Mater Misericordiae University Hospital	26	13	50	6	95
Our Lady of Lourdes Hospital Drogheda	8	7		1	16
Our Ladys Hospital - Navan	5		4		9
<b>Total:</b>	<b>61</b>	<b>52</b>	<b>134</b>	<b>18</b>	<b>278</b>

HSE Southern Area	0-2 Weeks	2-4 Weeks	4-26 Weeks	26 Weeks +	Total
Bantry General Hospital	4	0	1	0	5
Cork University Hospital	11	3	5	4	23
Kerry General Hospital	4	1	0	0	5
Mallow General Hospital		2			2
Mercy University Hospital Cork	0	1	2		3
South Infirmary University Hospital Cork	2	0	2	1	5
South Tipperary General Hospital	5	0	2	0	7
St. Luke's Hospital Kilkenny	7	4	1	1	13
Waterford Regional Hospital	13	9	7	0	29
Wexford General Hospital	9	9	3		21
<b>Total:</b>	<b>55</b>	<b>29</b>	<b>23</b>	<b>6</b>	<b>113</b>

HSE Western Area	0-2 Weeks	2-4 Weeks	4-26 Weeks	26 Weeks +	Total
Letterkenny General Hospital	2				2
Mayo General Hospital	5	2			7
Mid Western Regional Hospital Dooradoyle	12				12
Mid Western Regional Hospital Ennis	2	0	0		2
Mid Western Regional Hospital Nenagh	2	1	4		7
Portiuncula Hospital General & Maternity Balinasloe	3	1	1		5
Sligo General Hospital	8		1		9
St. John's Hospital Limerick	1	3	0		4
University Hospital Galway	1		1		2
<b>Total:</b>	<b>36</b>	<b>7</b>	<b>7</b>		<b>50</b>

<b>Grand Total: (Note Beaumont unable to break o</b>	<b>207</b>	<b>160</b>	<b>256</b>	<b>44</b>	<b>680</b>
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## 8. Delayed discharges by time band by Category

Category Description	0-2 Weeks	2-4 Weeks	4-26 Weeks	26 Weeks +	Total
Awaiting Community Services to be available e.g. home help, minor adaptations/equipment (PCCC)	13	2	1	1	17
Awaiting External Convalescent Care	12	2	0	0	14
Awaiting External Rehabilitation	24	15	13	1	56
Awaiting Hospice Care	5	0	2	0	7
Awaiting re-housing and or adaptations to home (Co Council)	4	1	4	1	10
Funding has been exhausted and the person is on a waiting list for financial support - S53A charges do not apply	13	0	1	0	14
Home Care Package finalized and are on the waiting list for funding	1	2	2	0	14
Home Care Package work in progress	12	9	10	1	37
HSE determinations complete - S53A charges apply	0	0	1	1	2
HSE determinations in Process - awaiting outcome: S53A charges do not apply	48	83	104	13	277
NHSS application not yet submitted - S53A charges apply	0	0	2	1	4
NHSS application not yet submitted - S53A charges do not apply	53	28	23	3	122
Other compelling reason (if >5, provide additional information) - S53A charges do not apply	7	13	45	12	1
Patient awaiting bed due to particular care requirements - S53A charges do not apply	3	1	23	8	59
Patient awaiting bed within reasonable proximity to their home and family - S53A charges do not apply	11	4	12	0	27
Ward of Court	1	0	13	2	19
<b>Sum:</b>	<b>207</b>	<b>160</b>	<b>256</b>	<b>44</b>	<b>680</b>



