



**FOR ANSWER MAY 2020**

<b>Number</b>	<b>Deputy</b>	<b>Question</b>	<b>Answers</b>
4512	Louise O'Reilly	To ask the Minister for Health if the use of laboratories capacity to test for COVID19 is creating delays for labs testing cervical smears.	<p>The laboratories which provide services to CervicalCheck are Quest and the Coombe. Testing for COVID-19 did not impact the service provision to CervicalCheck. Quest has not processed any COVID-19 tests and the Coombe has processed 74 tests out of a total of 322,231 COVID-19 tests.</p> <p>The HSE are currently developing capacity planning for the ongoing delivery of COVID-19 and non -COVID-19 care and services side by side. Since the COVID-19 pandemic started, the National Screening Service (NSS) has monitored the feasibility of restarting their screening programmes and assessing the associated risks. The NSS is participating in a national process, led jointly by the Chief Clinical Officer and the Chief Operations Officer in the HSE to restore services safely across all parts of the healthcare service.</p>



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4487	Louise O'Reilly	<p>To ask the Minister for Health how many HSE staff have been seconded to the nursing home sector and residential care facilities, the grade, group, and category of the staff, and the name of the nursinghome or residential care facilities have they been seconded to.</p>	<p>Each CHO Area Crisis Management Team (ACMT) is prioritising the needs of long term care residents within their areas across public, voluntary and private facilities and has offered very significant support to the nursing homes in their areas. This has included management support, PPE, other supplies, Public Health inputs, other clinical inputs, support with sourcing staffing and, in some cases, the reassignment of HSE staff to support to LTRCFs. The HSE will continue to work with all providers to support them in their obligations of providing residential care services to their residents and to work with them through the critical stages of outbreaks in their centres as is required.</p> <p>Clinical advice has been developed and provided to LTRC facilities. This includes expertise from Public Health, Infection Prevention and Control and Gerontology, and targeted specialist support where necessary and onsite as appropriate.</p> <p>The staffing resources redeployed supporting service and staffing challenges in LTRCFs as at the 1st May 2020. The figures change from day to day and from shift to shift depending on individual need. It should be noted that, in addition to HSE staff, agency staff for deployment are also being sourced.</p> <p>As at 12 May, there are, overall, approximately 394 staff redeployed directly in to LTRCFs from Community services (with nearly 100 of these (both nursing and healthcare assistants) redeployed directly into private Nursing Homes). This also includes 74 Home Support Workers from private home care agencies, where 35 of these are already deployed to private nursing homes. There are also approximately 57 staff from acute hospitals redeployed to private nursing homes (both nursing and healthcare assistants).</p> <p>To date, 146 Home Support Staff (56 HSE staff and 90 home support workers from external home support providers) have been redeployed to support residential units/nursing homes. Of the 56 HSE directly employed HCSAs, 5 have been redeployed to private residential units/nursing homes and 51 redeployed HSE Community Nursing Units (CNU). 48 of the 90 home support staff employed by external providers have been redeployed to CNU and 42 to private nursing homes.</p>
5.407	Louise O'Reilly	<p>To ask the Minister for Health the number of patients transferred to nursing homes in the months of March and April who were not tested for covid19, and if he will make a statement on the matter</p>	<p>As this is an operational matter I have referred the question to the HSE for direct reply to you.</p>



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5.402	Louise O'Reilly	To ask the Minister for Health the number of patients per hospital transferred to nursing homes in each week of March and April and the number of tests carried out on each patient prior to transfer	As this is an operational matter I have referred the question to the HSE for direct reply to you.
5.409	Louise O'Reilly	To ask the Minister for Health if he will provide details of the WTE number of workers (all grades, groups, and categories of agency workers in nursing homes or long-term residential care facilities) providing hours via agencies and if he will make a statement on the matter	As this is an operational matter I have referred the question to the HSE for direct reply to you.
5.403	Louise O'Reilly	To ask the Minister for Health the number of patients selected for transfer who had their transfer delayed because of a positive test	As this is an operational matter I have referred the question to the HSE for direct reply to you.
4498	Louise O'Reilly	To ask the Minister for Health can a geographic breakdown of affected residential centres for people with intellectual disabilities be provided?	As this is an operational matter I have referred your question to the HSE for direct reply to you.
4501	Louise O'Reilly	To ask the Minister for Health how many people in residential disability homes have died and how many of these died without being hospitalised?	As this is an operational matter I have referred your question to the HSE for direct reply to you.



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5.005 same as 5.488	Catherine Connolly	To ask the Minister for Health the number of HSE staff redeployed to nursing homes and in what capacity and location; the period of time for which they have been redeployed; and if he will make a statement on the matter.	As of 17th May, the HSE advised that 444 staff have been redeployed to Long Term Nursing Facilities (LTRFs) across public and private. This includes: <ul style="list-style-type: none"><li>• 56 HSE Home Support Staff (5 to private nursing residential units/nursing homes, 51 to Community Nursing Units {CNU's})</li><li>• 90 home support workers from external home support providers (48 to CNU's and 42 to private nursing homes). It is anticipated that these are temporary redeployments.</li></ul>
5.004	Catherine Connolly	To ask the Minister for Health the number of applications received from student nurses to work as health care assistants; the number of those now working as health care assistants; the locations in which they are working; and if he will make a statement on the matter.	As of 5th May, 1097 1st, 2nd and 3rd year students have taken up a 3 month HCA contract (722 appointed to the Acutes and 375 appointed to CHO's). Fourth year nursing and midwifery students shall continue with their paid intern placement, though shall be temporarily paid at point one on the Health Care Assistant pay scale. The HSE has implemented this measure across Acutes Division and CHOs, effective April 14th with 641 contracts offered to the Community and 3,425 offered to Acutes Division. Final numbers of students who take up these roles will be available shortly.
5.522	Catherine Connolly	To ask the Minister for Health the breakdown by nursing home, public and private, of the number of confirmed cases of COVID-19 in each nursing home in Galway city and county; the number of tests carried out in each of those nursing homes; the number of results issued; the number of deaths in each; and if he will make a statement on the matter	Testing has now been completed in all 577 nursing homes. As at 19 May, the HPSC data indicates 258 clusters of cases in nursing homes with 4,859 cases. As at 19 May there were 849 deaths in nursing homes. As the question refers to specific data I have referred it to the HSE for direct reply to you.
5.496	Catherine Connolly	To ask the Minister for Health to clarify the location of the clusters of Covid-19 in both public and private Nursing Homes in Galway City and County; and if he will make a statement on the matter.	Testing has now been completed in all 577 nursing homes. As at 19 May, the HPSC data indicates 258 clusters of cases in nursing homes with 4,859 cases. As at 19 May there were 849 deaths in nursing homes. As the question refers to specific data I have referred it to the HSE for direct reply to you



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4051 same as 5.478	Catherine Connolly	To ask the Minister for Health to clarify the nature of the contract/agreement with the private hospital sector and to furnish a copy of the contracts/agreements; and if he will make a statement on the matter.	Following negotiations between the HSE, supported by my Department, and the private hospitals, an overarching agreement with the 18 private acute hospitals was agreed at the end of March. The details of the arrangement are contained in the Heads of Terms, which I laid before the Oireachtas on 16th April. In summary, under the agreement, the HSE has secured 100% of the capacity of the private hospitals. They will be linked to the Hospital Groups within their region and effectively operate as public hospitals for the duration of the arrangement. All patients treated in private hospitals will be public patients and neither the private hospitals nor medical consultants, carrying out work in them, will be entitled to private fees. The terms of the arrangement reflected the expected Covid-19 pandemic at time of signing, and therefore is for a 3-month period, with an option for the HSE to extend it for a further month, and by mutual agreement thereafter. Under the agreement payment to the private hospitals will be on a cost only Open Book model whereby the hospitals will be reimbursed only for the operating costs properly incurred during the period. The costs that will be covered will be limited to normal costs of operating the hospital. While the private hospitals are paid a monthly sum equal to 80% of estimated monthly costs, the hospitals will only receive their actual operating costs when these have been verified. The final cost will be verified by independent firms of accountants appointed by the HSE and the private hospitals and there will be an arbitration mechanism in place in the event of any disagreement. Since the purpose of the arrangement is to provide additional capacity to deal with the impact of the COVID-19 pandemic for which there is no definitive time horizon it is not possible to indicate a precise cost estimate attaching to the arrangement. The cost only open book model is therefore the most effective way of ensuring the arrangement is value for money for the State.
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4043 same as 5.485	Catherine Connolly	To ask the Minister for Health to outline the financial accountability procedures in place with private hospitals in light of the proposed exemption from the provision of 38(3) of the Health Act, 2004; and if he will make a statement on the matter.	Following negotiations between the HSE, supported by my Department, and the private hospitals, an overarching agreement with the 18 private acute hospitals was agreed at the end of March. The details of the arrangement are contained in the Heads of Terms, which I laid before the Oireachtas on 16th April. In summary, under the agreement, the HSE has secured 100% of the capacity of the private hospitals. They will be linked to the Hospital Groups within their region and effectively operate as public hospitals for the duration of the arrangement. All patients treated in private hospitals will be public patients and neither the private hospitals nor medical consultants, carrying out work in them, will be entitled to private fees. The terms of the arrangement reflected the expected Covid-19 pandemic at time of signing, and therefore is for a 3-month period, with an option for the HSE to extend it for a further month, and by mutual agreement thereafter. Under the agreement payment to the private hospitals will be on a cost only Open Book model whereby the hospitals will be reimbursed only for the operating costs properly incurred during the period. The costs that will be covered will be limited to normal costs of operating the hospital. While the private hospitals are paid a monthly sum equal to 80% of estimated monthly costs, the hospitals will only receive their actual operating costs when these have been verified. The final cost will be verified by independent firms of accountants appointed by the HSE and the private hospitals and there will be an arbitration mechanism in place in the event of any disagreement. Since the purpose of the arrangement is to provide additional capacity to deal with the impact of the COVID-19 pandemic for which there is no definitive time horizon it is not possible to indicate a precise cost estimate attaching to the arrangement. The cost only open book model is therefore the most effective way of ensuring the arrangement is value for money for the State.
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5.008 same as 5.491	Catherine Connolly	To ask the Minister for Health the number of healthcare professionals employed by the HSE as a result of 'Be on call for Ireland'; and if he will make a statement on the matter.	<p>The purpose of the 'Be on Call for Ireland' initiative is to create reserve pools of “job ready” new health care professionals for the services to use 'as and when' they are needed in response to the COVID 19. The COVID-19 crisis is on-going, however to date the staffing needs have been largely met through other recruitment channels. There continues to be a 'job ready' pool available through the “Be on Call for Ireland” initiative and this will be utilised as and when required. The HSE reported the number of applicants for the Be on call for Ireland initiative as approximately 73,000 which includes some nursing, medical, dental, support, health and social care professionals and ambulance staff, however of this number, approximately 27,000 self- identified as being in relevant healthcare work areas, however on further online screening to ascertain who is qualified and not already working in healthcare and available to work this number reduces to 14,000.</p> <p>It is vitally important that only healthcare workers who are not already providing a healthcare service to public or private healthcare facilities are used. The HSE does not want to deplete any health services in the private or public sector so can only recruit staff who are not already working in healthcare. As of 11th May, 1,689 candidates have been successful at interview. There are 1086 candidates who are in clearance, and 68 candidates have started in roles.</p>
5.519	Catherine Connolly	To ask the Minister for Health the steps that have been taken in relation to the serious concerns raised by the dentistry profession; particularly with regard to the viability of the service; the interaction he has had with the profession in relation to these concerns; and if he will make a statement on the matter.	<p>I met with the Irish Dental Association (IDA) on 8 May 2020 and again on 15 May. A number of issues relating to return to work were discussed including the updated advice which my Department has sought from the Expert Advisory Group to NPHET, the provision of PPE for dentists contracted by the HSE and the measures to support businesses impacted by Covid-19. On 15 May the HSPC published guidelines (COVID-19: Guidance on Managing Infection Related Risks in Dental Services, <a href="https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/guidance/infectionpreventionandcontrolguidance/dentalservices/Guidance-ManagingInfectionRisk-DentalServices-COVID19.pdf">https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/guidance/infectionpreventionandcontrolguidance/dentalservices/Guidance-ManagingInfectionRisk-DentalServices-COVID19.pdf</a>) for dental services. The guidance document includes information and recommendations for dentists on managing infection related risks in dental services.</p>
5.520	Catherine Connolly	To ask the Minister for Health when it is proposed to allow routine dentistry to resume; the contingency plan in place to allow adults with no medical card to be provided with emergency care and treatment;	<p>On 15 May the HSPC published guidelines (COVID-19: Guidance on Managing Infection Related Risks in Dental Services, <a href="https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/guidance/infectionpreventionandcontrolguidance/dentalservices/Guidance-ManagingInfectionRisk-DentalServices-COVID19.pdf">https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/guidance/infectionpreventionandcontrolguidance/dentalservices/Guidance-ManagingInfectionRisk-DentalServices-COVID19.pdf</a>) for dental services. The guidance document includes information and recommendations for dentists on managing infection related risks in dental services.</p>



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		and if he will make a statement on the matter.	
5.521	Catherine Connolly	To ask the Minister for Health in view of the concerns raised by the dentistry profession about the lack of PPE the steps taken to ensure that the profession has sufficient supplies of PPE; and if he will make a statement on the matter.	I met with the Irish Dental Association (IDA) on 8 May 2020 and again on 15 May. A number of issues relating to return to work were discussed including the updated advice which my Department has sought from the Expert Advisory Group to NPHE, the provision of PPE for dentists contracted by the HSE and the measures to support businesses impacted by Covid-19. On 15 May the HSPC published guidelines (COVID-19: Guidance on Managing Infection Related Risks in Dental Services, <a href="https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/guidance/infectionpreventionandcontrolguidance/dentalservices/Guidance-ManagingInfectionRisk-DentalServices-COVID19.pdf">https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/guidance/infectionpreventionandcontrolguidance/dentalservices/Guidance-ManagingInfectionRisk-DentalServices-COVID19.pdf</a> ) for dental services. The guidance document includes information and recommendations for dentists on managing infection related risks in dental services.
4044 same as 5.483	Catherine Connolly	To ask the Minister for Health to furnish a copy of the subsequent supporting guidance documents produced by Saolta and communicated to its five intensive care units following the publication on April 3rd, 2020 by the Department of Health of 'Ethical Considerations Relating to Critical Care in the context of Covid 19'; and if he will make a statement on the matter.	As this question refers to a specific hospital group I have referred it to the HSE for direct reply to you.





**FOR ANSWER MAY 2020**

5.473	Catherine Connolly	<p>To ask the Minister for Health to make a statement in relation to the DoH guidelines drawn up in response to Covid-19 from the perspective of what, if any, attempt was made to take into account Article 2 of the ECHR.</p>	<p>The Department of Health recently published ethical guidance entitled “Ethical Considerations Relating to Critical Care in the Context of COVID-19” (3rd April 2020). Supplementary Information to “Ethical Considerations Relating to Critical Care in the Context of COVID-19” that specifically relates to people with disabilities was published on the Department of Health website on 29th April and is available at <a href="https://www.gov.ie/en/publication/13ead5-ethical-considerations-relating-to-critical-care-in-the-context-of-c/">https://www.gov.ie/en/publication/13ead5-ethical-considerations-relating-to-critical-care-in-the-context-of-c/</a>.</p> <p>The aim of these documents is to support clinicians in their challenging roles and to ensure that, in the event of a surge in demand for ICU care, decisions regarding the allocation of finite ICU resources are made in a consistent and fair way. One of the key messages is that safeguards against unfair discrimination are required to ensure that there will be no systematic de-prioritisation of any group including those with a disability. The documents state that each patient is unique and that all clinical judgements regarding the provision of critical care will and should ultimately be made on a case-by-case basis. They state that no single factor should be taken, in isolation, as a determining factor. Age is given as one example; however, the statement equally extends to other factors including disability.</p> <p>Frailty is one of a number of measures used to help assess the severity of a person’s current illness in conjunction with several other interconnected clinical factors, such as the burden of chronic health problems, and the likelihood that a person will benefit from intensive care.</p> <p>While the terms disability, frailty and comorbidity are inter-related, they are, in fact, distinct and should not be conflated. Each patient is different; their clinical status and care needs should be evaluated holistically, and interventions should be provided on a rational, evidence-based and ethical basis.</p>
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4057 same as 5.472	Catherine Connolly	To ask the Minister for Health to make a statement in relation to the oversight that exists to monitor the decisions of the resuscitation committees set up in response to Covid-19.	<p>The Department of Health recently published ethical guidance entitled “Ethical Considerations Relating to Critical Care in the Context of COVID-19” (3rd April 2020). Supplementary Information to “Ethical Considerations Relating to Critical Care in the Context of COVID-19” that specifically relates to people with disabilities was published on the Department of Health website on 29th April and is available at <a href="https://www.gov.ie/en/publication/13ead5-ethical-considerations-relating-to-critical-care-in-the-context-of-c/">https://www.gov.ie/en/publication/13ead5-ethical-considerations-relating-to-critical-care-in-the-context-of-c/</a>.</p> <p>The aim of these documents is to support clinicians in their challenging roles and to ensure that, in the event of a surge in demand for ICU care, decisions regarding the allocation of finite ICU resources are made in a consistent and fair way. One of the key messages is that safeguards against unfair discrimination are required to ensure that there will be no systematic de-prioritisation of any group including those with a disability. The documents state that each patient is unique and that all clinical judgements regarding the provision of critical care will and should ultimately be made on a case-by-case basis. They state that no single factor should be taken, in isolation, as a determining factor. Age is given as one example; however, the statement equally extends to other factors including disability.</p> <p>Frailty is one of a number of measures used to help assess the severity of a person’s current illness in conjunction with several other interconnected clinical factors, such as the burden of chronic health problems, and the likelihood that a person will benefit from intensive care.</p> <p>While the terms disability, frailty and comorbidity are inter-related, they are, in fact, distinct and should not be conflated. Each patient is different; their clinical status and care needs should be evaluated holistically, and interventions should be provided on a rational, evidence-based and ethical basis.</p>
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4056	Catherine Connolly	To ask the Minister for Health to make a statement in relation to the DoH guidelines drawn up in response to Covid-19 from the perspective of what, if any, attempt was made to take into account Article 2 of the ECHR.	<p>The Department of Health recently published ethical guidance entitled “Ethical Considerations Relating to Critical Care in the Context of COVID-19” (3rd April 2020). Supplementary Information to “Ethical Considerations Relating to Critical Care in the Context of COVID-19” that specifically relates to people with disabilities was published on the Department of Health website on 29th April and is available at <a href="https://www.gov.ie/en/publication/13ead5-ethical-considerations-relating-to-critical-care-in-the-context-of-c/">https://www.gov.ie/en/publication/13ead5-ethical-considerations-relating-to-critical-care-in-the-context-of-c/</a>.</p> <p>The aim of these documents is to support clinicians in their challenging roles and to ensure that, in the event of a surge in demand for ICU care, decisions regarding the allocation of finite ICU resources are made in a consistent and fair way. One of the key messages is that safeguards against unfair discrimination are required to ensure that there will be no systematic de-prioritisation of any group including those with a disability. The documents state that each patient is unique and that all clinical judgements regarding the provision of critical care will and should ultimately be made on a case-by-case basis. They state that no single factor should be taken, in isolation, as a determining factor. Age is given as one example; however, the statement equally extends to other factors including disability.</p> <p>Frailty is one of a number of measures used to help assess the severity of a person’s current illness in conjunction with several other interconnected clinical factors, such as the burden of chronic health problems, and the likelihood that a person will benefit from intensive care.</p> <p>While the terms disability, frailty and comorbidity are inter-related, they are, in fact, distinct and should not be conflated. Each patient is different; their clinical status and care needs should be evaluated holistically, and interventions should be provided on a rational, evidence-based and ethical basis.</p>
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4058 same as 5.471	Catherine Connolly	To ask the Minister for Health to make a statement in relation to the role of a resuscitation committee, primarily, is it being established to treat people's care needs or to deal the circumstances facing the hospital during the Covid pandemic.	<p>The Department of Health recently published ethical guidance entitled "Ethical Considerations Relating to Critical Care in the Context of COVID-19" (3rd April 2020). Supplementary Information to "Ethical Considerations Relating to Critical Care in the Context of COVID-19" that specifically relates to people with disabilities was published on the Department of Health website on 29th April and is available at <a href="https://www.gov.ie/en/publication/13ead5-ethical-considerations-relating-to-critical-care-in-the-context-of-c/">https://www.gov.ie/en/publication/13ead5-ethical-considerations-relating-to-critical-care-in-the-context-of-c/</a>.</p> <p>The aim of these documents is to support clinicians in their challenging roles and to ensure that, in the event of a surge in demand for ICU care, decisions regarding the allocation of finite ICU resources are made in a consistent and fair way. One of the key messages is that safeguards against unfair discrimination are required to ensure that there will be no systematic de-prioritisation of any group including those with a disability. The documents state that each patient is unique and that all clinical judgements regarding the provision of critical care will and should ultimately be made on a case-by-case basis. They state that no single factor should be taken, in isolation, as a determining factor. Age is given as one example; however, the statement equally extends to other factors including disability.</p> <p>Frailty is one of a number of measures used to help assess the severity of a person's current illness in conjunction with several other interconnected clinical factors, such as the burden of chronic health problems, and the likelihood that a person will benefit from intensive care.</p> <p>While the terms disability, frailty and comorbidity are inter-related, they are, in fact, distinct and should not be conflated. Each patient is different; their clinical status and care needs should be evaluated holistically, and interventions should be provided on a rational, evidence-based and ethical basis.</p>
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4059 same as 5.470	Catherine Connolly	To ask the Minister for Health to outline the number of hospitals which have set up 'resuscitation committees', in response to Covid-19 with particular reference to the membership of the committees and how the membership was determined; and if he will make a statement on the matter.	<p>The Department of Health recently published ethical guidance entitled "Ethical Considerations Relating to Critical Care in the Context of COVID-19" (3rd April 2020). Supplementary Information to "Ethical Considerations Relating to Critical Care in the Context of COVID-19" that specifically relates to people with disabilities was published on the Department of Health website on 29th April and is available at <a href="https://www.gov.ie/en/publication/13ead5-ethical-considerations-relating-to-critical-care-in-the-context-of-c/">https://www.gov.ie/en/publication/13ead5-ethical-considerations-relating-to-critical-care-in-the-context-of-c/</a>.</p> <p>The aim of these documents is to support clinicians in their challenging roles and to ensure that, in the event of a surge in demand for ICU care, decisions regarding the allocation of finite ICU resources are made in a consistent and fair way. One of the key messages is that safeguards against unfair discrimination are required to ensure that there will be no systematic de-prioritisation of any group including those with a disability. The documents state that each patient is unique and that all clinical judgements regarding the provision of critical care will and should ultimately be made on a case-by-case basis. They state that no single factor should be taken, in isolation, as a determining factor. Age is given as one example; however, the statement equally extends to other factors including disability.</p> <p>Frailty is one of a number of measures used to help assess the severity of a person's current illness in conjunction with several other interconnected clinical factors, such as the burden of chronic health problems, and the likelihood that a person will benefit from intensive care.</p> <p>While the terms disability, frailty and comorbidity are inter-related, they are, in fact, distinct and should not be conflated. Each patient is different; their clinical status and care needs should be evaluated holistically, and interventions should be provided on a rational, evidence-based and ethical basis.</p>
5.007 same as 5.490	Catherine Connolly	To ask the Minister for Health to clarify the position in relation to time-sensitive surgeries in Galway University Hospital; the number of operations that have not gone ahead in each of the surgical categories; and if he will make a statement on the matter.	As this question relates to a specific facility I have referred it to the HSE for direct reply to you.



**FOR ANSWER MAY 2020**

5.477	Catherine Connolly	To ask the Minister for Health to make a statement in relation to the number of patients awaiting emergency surgical interventions in gynecology in Galway city and county consequent on the failure to finalise the agreement with the private hospital.	As this question relates to specific facility I have referred it to the HSE for direct reply to you.
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**FOR ANSWER MAY 2020**

4088	Catherine Connolly	<p>To ask the Minister for Health the reason residential facilities were not prioritised from the outset and particularly from the declaration of a pandemic; and if he will make a statement on the matter.</p>	<p>Since COVID-19 first emerged in China in December 2019, the Government has taken decisive actions in response to this virus, advised by the National Public Health Emergency Team (NPHET). People living in Long-term Residential Care facilities are particularly vulnerable populations in the context of Covid-19 and have been identified by the World Health Organisation (WHO) to be at a higher risk of being susceptible to infection from this disease and for subsequent adverse outcomes. The actions and measures we have taken in Ireland to support nursing homes and their residents have been taken and have evolved on foot of epidemiological data and guidance from the WHO and the European Centre for Disease Prevention and Control (ECDC). As the disease has progressed, a range of enhanced measures for nursing homes recommended by NPHET on 31st March and 3rd April are being implemented. The enhanced measures build on actions already adopted for nursing homes, including general and specific infection prevention measures, specific public health and clinical nursing home guidance published March 17th and subsequently updated, social distancing measures, visitor restrictions and cocooning. A number of webinars were delivered in March and April to provide support and advice to nursing homes including in relation to infection prevention and control. A significant programme of testing across Long Term Residential Care Facilities commenced on 17 April following a NPHET recommendation. This is part of a range of measures and supports that have been put in place for this sector. Since the onset of this pandemic, HIQA has in place a quality assessment process whereby all designated centres and children's residential centres are formally contacted on a regular basis by an inspector of social services to assess how they are coping, the welfare of the resident, any concerns they have, and any deficits identified in their ability to sustain a safe, high-quality service. HIQA, as regulator for the nursing home sector has completed a risk assessment of all nursing homes. On 6th April, it commenced a focused COVID-19 Infection Prevention and Control Hub to provide nursing home providers with guidance and supports; including an escalation pathway where required to the HSE.</p> <p>In addition, a HIQA COVID-19 regulatory assessment framework, in line with the Health Act 2007, was published and is now operational.</p>
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5.476	Catherine Connolly	To ask the Minister for Health the number of nursing homes where staff screening twice a day has commenced; the number where staff screening has not commenced; as a result of such screening, the number of tests that have taken place; the results of such tests; and if he will make a statement on the matter.	As this is an operational matter I have referred the question to the HSE for direct reply .
5.480 same ast 4048	Catherine Connolly	To ask the Minister for Health following the initial and subsequent notifications by nursing homes to HIQA in relation to a person or persons infected with Corona virus, what action was taken by HIQA in this regard.	<p>Since the onset of this pandemic, HIQA has in place a quality assessment process whereby all designated centres and children's residential centres are formally contacted on a regular basis by an inspector of social services to assess how they are coping, the welfare of the resident, any concerns they have, and any deficits identified in their ability to sustain a safe, high-quality service. HIQA, as regulator for the nursing home sector has completed a risk assessment of all nursing homes. On 6th April, it commenced a focused COVID-19 Infection Prevention and Control Hub to provide nursing home providers with guidance and supports; including an escalation pathway where required to the HSE.</p> <p>In addition, a HIQA COVID-19 regulatory assessment framework, in line with the Health Act 2007, was published and is now operational.</p> <p>Extensive testing of staff and residents has been occurring over the past couple of weeks. The HSE is providing staffing, PPE, Oxygen, training and other supports to nursing homes. It has also established 23 HSE COVID Response Teams across the CHOs, to provide support and expert guidance to all long-term care residential settings. These teams comprise of a Director of Nursing as well as clinical and public health expertise and links to acute hospitals.</p>





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4086	Catherine Connolly	To ask the Minister for Health the number of Covid-19 outbreaks in residential care facilities reported to regional medical officers of health; the date of the first report and to which regional officer; the number of subsequent reports by region and date; the number of tests carried out on foot of such reports; and if he will make a statement on the matter.	As this question refers to specific data I have referred it to the HSE for direct reply to you.
5.485 same as 5.207, 5.493 & 5.159	Catherine Connolly	To ask the Minister for Health to clarify the position in relation to testing in residential settings; the number of residential settings where testing has happened, results issued and a treatment plan in place; when it is envisaged that this process will be completed for all residential settings; and if he will make a statement on the matter.	<p>A significant programme of testing across Long Term Residential Care Facilities commenced on 17 April following a NPHEH recommendation. This is part of a range of measures and supports that have been put in place for this sector. Testing has now been completed in all 577 nursing homes, the vast majority of which are private entities. In response to outbreaks within the sector, and has tested 42,380 individuals comprising staff and residents.</p> <p>As of 15 May, the HSE has now also completed testing across the 352 mental health residential service locations and is well advanced in completing testing in 1,269 residential care facilities for people with disabilities.</p>



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4053	Catherine Connolly	To ask the Minister for Health the number of nursing homes where staff screening twice a day has commenced; the number where staff screening has not commenced; as a result of such screening, the number of tests that have taken place; the results of such tests; and if he will make a statement on the matter.	<p>A significant programme of testing across Long Term Residential Care Facilities commenced on 17 April following a NPHEP recommendation. This is part of a range of measures and supports that have been put in place for this sector. It involves:</p> <ul style="list-style-type: none"><li>• The testing of all staff and residents in facilities where there is an outbreak</li><li>• The testing of all staff and residents in facilities where there is a new case</li><li>• The testing of all staff in facilities that have no cases.</li></ul> <p>Testing has now been completed in all 577 nursing homes, the vast majority of which are private entities. The total number of tests carried out was 42,380, comprising staff and residents. The HSE through the Health Protection Surveillance Centres has developed an extensive body of guidance and support tools to assist staff in residential care facilities, including nursing homes, in their management of COVID-19 cases, including in relation to decisions on transfer of residents, to hospitals, where appropriate. The current relevant guidelines are the: "Interim Public Health and Infection Prevention Control Guidelines on the Prevention and Management of COVID-19 Cases and Outbreaks in Residential Care Facilities and Similar Units" under the residential care facilities mass testing programme. Testing has now completed in nursing homes (577 sites) and the overall positivity rate is low (5.5%).</p>
5.475 same as 4054	Catherine Connolly	To ask the Minister for Health the number of persons in Galway city and county referred for a test and who have not yet been tested in Galway city and county; the length of time such persons have been waiting for a test by number of days; and if he will make a statement on the matter.	As this is an operational matter I have referred the question to the HSE for direct reply
5.474 same as 4055	Catherine Connolly	To ask the Minister for Health the number of tests carried out in each of the testing centres in Galway city and county; of those, the number of results issues; the length of time from referral for a test to testing; the length of time from testing to	As this is an operational matter I have referred the question to the HSE for direct reply



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		receiving a result; and if he will make a statement on the matter.	
4281	Kathleen Funchion	To ask the Minister what provisions are in place for St Luke's Hospital in Kilkenny, which services both Carlow and Kilkenny to ensure adequate PPE is in place, particularly following the tragic death of 2 health care workers in St Luke's in Kilkenny	<p>The HSE has expanded the span of its PPE coverage to cover the all health services including nursing homes, both public and private.</p> <p>PPE is distributed by the HSE via a centralised request management system that services all of the State's healthcare settings, including hospitals, nursing homes (public and private), National Ambulance Service, GPs, and all Section 38 and 39 service providers. In line with NPHET recommendations all nursing homes have equality of access to PPE with all other services in line with clinical guidance. This centralised approach is in line with WHO guidance on coordinating PPE supply; WHO guidance also emphasises the need to ensure rational and appropriate use of PPE in view of the global shortage of such equipment</p> <p>For the week 6 May - 12 May, over 11m PPE items were delivered across the health service. As the question refers to an individual facility I have referred the question to the HSE for direct reply.</p>
4811	Martin Kenny	To ask the Minister for Health has his department made PPE (personal protection equipment) available to home care and home help providers and will the minister make a statement on the matter	<p>The HSE has expanded the span of its PPE coverage to cover the all health services including nursing homes, both public and private.</p> <p>PPE is distributed by the HSE via a centralised request management system that services all of the State's healthcare settings, including hospitals, nursing homes (public and private), National Ambulance Service, GPs, and all Section 38 and 39 service providers. In line with NPHET recommendations all nursing homes have equality of access to PPE with all other services in line with clinical guidance. This centralised approach is in line with WHO guidance on coordinating PPE supply; WHO guidance also emphasises the need to ensure rational and appropriate use of PPE in view of the global shortage of such equipment</p> <p>For the week 6 May - 12 May, over 11m PPE items were delivered across the health service, with 35% delivered to home care.</p>



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4065	Mattie McGrath	<p>I am writing to you seeking an urgent commitment that PPE will be provided to all Nursing Homes regardless of whether there has been an outbreak of Covid 19.</p> <p>I would be grateful if you could comment on the HSE's policy of rationing PPE and only supplying PPE to Nursing Homes where there is a confirmed outbreak. Surely every effort should be in place to protect elderly and vulnerable residents in all of our nursing homes and PPE should be delivered as a preventative measure rather than continuing with this reactionary measure of only supplying PPE following an outbreak.</p> <p>I would be grateful if you could confirm the numbers of Nursing Homes who have yet to receive any PPE from the HSE and the numbers of Nursing Homes who have been supplied with PPE to date.</p>	<p>The HSE has expanded the span of its PPE coverage to cover the all health services including nursing homes, both public and private.</p> <p>PPE is distributed by the HSE via a centralised request management system that services all of the State's healthcare settings, including hospitals, nursing homes (public and private), National Ambulance Service, GPs, and all Section 38 and 39 service providers. . In line with NPHET recommendations all nursing homes have equality of access to PPE with all other services in line with clinical guidance. This centralised approach is in line with WHO guidance on coordinating PPE supply; WHO guidance also emphasises the need to ensure rational and appropriate use of PPE in view of the global shortage of such equipment</p> <p>For the week 6 May - 12 May, over 11m PPE items were delivered across the health service, with 35% delivered to community residential settings.</p>
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4074	Paul Murphy	Will the Minister provide an explanation for the evident delay in the distribution of appropriate PPE by the HSE to residential care facilities around the country and especially in north County Dublin; and will he instruct the HSE to ensure residential care facilities have adequate supplies of PPE?	<p>The HSE has expanded the span of its PPE coverage to cover the all health services including nursing homes, both public and private.</p> <p>PPE is distributed by the HSE via a centralised request management system that services all of the State's healthcare settings, including hospitals, nursing homes (public and private), National Ambulance Service, GPs, and all Section 38 and 39 service providers. . In line with NPHET recommendations all nursing homes have equality of access to PPE with all other services in line with clinical guidance. This centralised approach is in line with WHO guidance on coordinating PPE supply; WHO guidance also emphasises the need to ensure rational and appropriate use of PPE in view of the global shortage of such equipment</p> <p>For the week 6 May - 12 May, over 11m PPE items were delivered across the health service, with 35% delivered to community residential settings.</p>
4171	Roderic O'Gorman	To ask the Minister for Health whether 3 days supply of PPE been distributed to all nursing homes, as requested by Nursing Home's Ireland, and can he make a statement on the matter.	<p>The HSE has expanded the span of its PPE coverage to cover the all health services including nursing homes, both public and private.</p> <p>PPE is distributed by the HSE via a centralised request management system that services all of the State's healthcare settings, including hospitals, nursing homes (public and private), National Ambulance Service, GPs, and all Section 38 and 39 service providers. . In line with NPHET recommendations all nursing homes have equality of access to PPE with all other services in line with clinical guidance. This centralised approach is in line with WHO guidance on coordinating PPE supply; WHO guidance also emphasises the need to ensure rational and appropriate use of PPE in view of the global shortage of such equipment</p> <p>For the week ending 14 May, over 11m PPE items were delivered across the health service, with 35% delivered to community residential settings.</p>



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4400	Ruairí Ó Murchú	To ask the Minister for Health if he is aware what categories of Personal Protective Equipment and exactly how much of each category has been supplied to private nursing homes by the State and if he will make a statement on the matter?	<p>The HSE has expanded the span of its PPE coverage to cover the all health services including nursing homes, both public and private.</p> <p>PPE is distributed by the HSE via a centralised request management system that services all of the State’s healthcare settings, including hospitals, nursing homes (public and private), National Ambulance Service, GPs, and all Section 38 and 39 service providers. In line with NPHET recommendations all nursing homes have equality of access to PPE with all other services in line with clinical guidance. This centralised approach is in line with WHO guidance on coordinating PPE supply; WHO guidance also emphasises the need to ensure rational and appropriate use of PPE in view of the global shortage of such equipment</p> <p>For the week ending 14 May, over 11m PPE items were delivered across the health service, with 35% delivered to community residential settings.</p>
4870	Ruairí Ó Murchú	To ask the Minister for Health if he is confident that the RCSI Hospital Group has sufficient quantities and future supplies of surgical masks in order to ensure that staff at these acute hospitals are able to properly implement the ‘Guidance on the Use of Surgical Masks in the Healthcare Setting in the Context of the COVID-19 Pandemic’ issued on April 22 2020	<p>The HSE distribute PPE via a centralised request management system that services all of the State’s healthcare settings, including hospitals, nursing homes (public and private), National Ambulance Service, GPs, and all Section 38 and 39 service providers. In line with NPHET recommendations all nursing homes have equality of access to PPE with all other services in line with clinical guidance. This centralised approach is in line with WHO guidance on coordinating PPE supply; WHO guidance also emphasises the need to ensure rational and appropriate use of PPE in view of the global shortage of such equipment</p> <p>For the week ending 14 May, over 11m PPE items were delivered across the health services.</p>



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4265	Sean Crowe	To ask the Minister for Health can he outline if the challenges around PPE has been resolved or are some health facilities still relying on goodwill and public support to access supports and equipment during the COVID 19 Pandemic	The HSE has expanded the span of its PPE coverage to cover the all health services including nursing homes, both public and private. PPE is distributed by the HSE via a centralised request management system that services all of the State's healthcare settings, including hospitals, nursing homes (public and private), National Ambulance Service, GPs, and all Section 38 and 39 service providers. . In line with NPHET recommendations all nursing homes have equality of access to PPE with all other services in line with clinical guidance. This centralised approach is in line with WHO guidance on coordinating PPE supply; WHO guidance also emphasises the need to ensure rational and appropriate use of PPE in view of the global shortage of such equipment For the week ending 14, over 11m PPE items were delivered across the health service.
5.368	Darragh O'Brien	Dear Minister, Please see below that I have received regarding a constituent of mine who was sent by his GP to the... <b>(Further details supplied)</b>	As this is question refers to an individual case I have referred the question to the HSE for direct reply to you.
5.661	Dessie Ellis	To ask the Minister for Health to list in tabular form for each public and private nursing home, the number of residents of both. Public and private nursing homes who have tested positive for the Covid-19virus and the number of those who have died from contracting the Corvid-19 virus.	As this is an operational matter I have referred the question to the HSE for direct reply to you.



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5.662	Dessie Ellis	To ask the Minister for Health to list in tabular form the institutions for which the state has a responsibility for, such as, prisons, mental health institutions etc and the number of those who havetested positive for the Covid-19 virus or the number of those who have died from the Covid-19 in such institutions.	As this is an operational matter I have referred the question to the HSE for direct reply to you.
5.317	Eamon O'Cuiv	To ask the Minister for Health the number of people who died in residential facilities for people with disabilities between the 1st of January this year and the 30th of April; the number of these who died from Covid-19; the number of deaths in such facilities between the same dates in 2019; and if he will make a statement on the matter.	As this is an operational matter I have referred the question to the HSE for direct reply to you.
5.316	Eamon O'Cuiv	To ask the Minister for Health the number of people who died in nursing homes between 1st of January 2020 and the 30th of April this year; the number of these who died from Covid-19; the number of deaths in Nursing Homes between the same dates in 2019; and if he will make a statement on the matter	As this is an operational matter I have referred the question to the HSE for direct reply to you.
5.028	Gary Gannon	To ask the minister for Health to provide a breakdown by profession of those of working	As this is an operational matter I have referred the question to the HSE for direct reply to you.





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		age who have been diagnosed with Covid-19?	
5.022	Gerald Nash	To ask the Minister for Health why residents of a nursing home (details supplied) were not tested for COVID-19 as planned on Friday the 24th April; when the residents will be tested and if he will make a statement on the matter. <b><u>Details Supplied /</u></b>	As this is an operational matter I have referred the question to the HSE for direct reply to you.
5.517	Mary Lou McDonald	To ask the Minister for Health the number of persons tested for Covid 19 in each residential centre for people with a disability in CHO 9; the number of persons who have tested positive for Covid 19 in each of these settings and the new measures in place to reduce infection and protect staff and residents	As this is an operational matter I have referred the question to the HSE for direct reply to you.
5.650	Matt Carthy	To ask the Minister for Health, in tabular form, the numbers of Covid19 tests that have been undertaken in each testing centre across the state, to date.	As this is an operational matter I have referred the question to the HSE for direct reply to you.
5.248	Michael McGrath	To ask the Minister for Health if the services of a qualified practice nurse who responded to the 'Ireland on Call' initiative are required.... <b><u>Details Supplied.</u></b>	As this is an operational matter I have referred the question to the HSE for direct reply to you.



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5.108	Padraig O'Sullivan	To ask the Minister for Health for the daily occupancy rates for each public and private hospital since March 12th; and if he will make a statement on the matter.	As this is an operational matter I have referred the question to the HSE for direct reply to you.
5.582	Pauline Tully	To ask the Minister for Health to list the number of residents and staff of Esker Lodge Nursing Home in Cavan who have tested positive for the Covid-19 virus since the start of the pandemic; the number of fatalities, if any, that have impacted on staff and residents that can be directly attributed to the virus and what measures are being put in place to protect staff and residents from contracting Covid-19.	As this is an operational matter I have referred the question to the HSE for direct reply to you.
5.103	Sean Sherlock	To ask the Minister for Health to report on recent visits by the Public Health Team to Mallow General Hospital and to outline in detail what recommendations were made arising from such visits and whether capital investment will arise at the Hospital arising from any recommendations	As this is an operational matter I have referred the question to the HSE for direct reply to you.
5.174	Sean Sherlock	To ask the Minister for Health to report on recent visits by the Public Health Team to Mallow General Hospital and to outline in detail what recommendations were made arising from such visits and whether capital	As this is an operational matter I have referred the question to the HSE for direct reply to you.



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		investment will arise at the Hospitalising from any recommendations.	
5.091	Sean Sherlock	To ask the Minister for Health the total number of patients currently admitted to Mallow General Hospital at present, the breakdown and status of each individual ward, including the number of patients and staff on each individual ward, whether or not staff have been redeployed from Mallow to another Hospital or LT Care facility, including the number of staff redeployed and to what hospital or facility; further To ask the status of the Outpatient Department and the MAU, whether the OPD has been moved to Mallow Primary Health Centre and whether the Outpatient Building is to be closed and if it is the intention of the HSE to close Mallow General Hospital.	I am advised that you also submitted the question to the CEO of the HSE and that an answer has issued to you”
4653	Brendan Smith	To ask the Minister for Health if additional resources will be provided to the Health Sector, both public and private, in the Cavan/Monaghan area due to the incidence of Covid-19 in both counties and if he will	As your question refers to a specific geographical area I have referred it to the HSE for direct reply to you.



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		make a statement on the matter.	
4654	Brendan Smith	To ask the Minister for Health if any investigation or study has been undertaken in relation to the incidence of Covid-19 in Co Cavan and in Co Monaghan, if so, is it proposed to implement additional measures to support public health in those counties and if he will make a statement on the matter.	As your question refers to a specific geographical area I have referred it to the HSE for direct reply to you.
4858	Brid Smith	To detail the numbers of those who passed from Covid 19 in nursing homes who had first been referred to community palliative care (CPC).	As this is an operational matter I have referred your question to the HSE for direct reply to you.
4859	Brid Smith	To detail the numbers of those who passed from Covid 19 in nursing homes who were treated in their residency with IV fluids and IV antibiotics.	As this is an operational matter I have referred your question to the HSE for direct reply to you.



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4288	Dessie Ellis	To ask the Minister for Health the numbers of residents sent from the following nursing homes (details supplied) who have died from the Covid-19 virus, having been sent from the nursing home to a hospital; additionally, to ask how the number of deaths of residents in nursing homes (details supplied) or the numbers of residents in the nursing homes (details supplied) who have tested positive are both compiled and if any residents who have been sent to any hospital and who have subsequently died from the Covid-19 virus in the Hospital are excluded from the numbers of deaths of residents in nursing homes and included in the HSE figures only.	As this is an operational matter I have referred your question to the HSE for direct reply to you.
4316	Duncan Smith	To ask the minister for Health are his department and the HSE working to ensure there is no cross contamination in the health service due to frontlineworkers doing shifts in two or more different facilities? Potentially operating between a facility with high exposure to COVID19 and another facility where at risk patients are being cared for	As this is an operational matter I have referred your question to the HSE for direct reply to you.



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4177	Ged Nash	To ask the Minister for Health to provide an update on the number of people at the Covid-19 assessment hub in Drogheda, Co. Louth; and if he will make a statement on the matter.	As this is an operational matter I have referred your question to the HSE for direct reply to you.
4179	Ged Nash	To ask the Minister for Health if he will provide information on the number of people who have received treatment for Covid-19 in the HSE assessment hub in Drogheda, Co. Louth since the opening of the facility and if he will make a statement on the matter.	As this is an operational matter I have referred your question to the HSE for direct reply to you.
4263	Mary Lou McDonald	To ask the Minister for Health to provide in tabular form the number of confirmed Covid-19 cases; the number of deaths and the number of tests carried out to date in each nursing home in the Community Health Organisation (CHO) Area 9.	As this is an operational matter I have referred your question to the HSE for direct reply to you.
4283	Maurice Quinlavin	To ask the Minister for Health for an update on the COVID-19 testing facility at the Gaelic Grounds in Limerick City; what date the facility opened; how many days has the testing facility been operational; how many people have used the facility to date; how much has been spent to date on it; and will he make a statement on the matter?	As this is an operational matter I have referred your question to the HSE for direct reply to you.



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4701	Roisin Shorthall	To ask the Minister for Health to provide details of the number of Covid 19 deaths which have taken place in residential homes for persons with intellectual disability and the reason why these are not reported separately.	As this is an operational matter I have referred your question to the HSE for direct reply to you.
4569	Stephen Donnelly	How many Covid-19 fatalities have there been in each county, by permanent address of each person?	As this is an operational matter I have referred your question to the HSE for direct reply to you.