



Irish Nurses and Midwives Organisation



**Joint Statement from the Irish Nurses and Midwives Organisation
and
the Irish Association for Emergency Medicine**

As healthcare professionals, we have been to the forefront of providing expert care at the frontline of the fight against the COVID-19 virus.

The healthcare service will gradually return to providing more non-COVID-19 services. We are concerned that, without action, conditions may worsen, and the problems of the past may be return. We share four essential aims:

1. Emergency Departments and hospital wards must not become reservoirs of healthcare-acquired infection for patients
2. Emergency Departments and hospitals must not become crowded again
3. Emergency care must be designed and resourced to look after vulnerable patients safely
4. Emergency Departments and hospitals must be safe workplaces for all staff

To achieve to these four aims, the INMO and IAEM jointly call for the following:

- A. A permanent increase in bed capacity: in the short term this will involve retention of access to **private acute hospitals** and their services until (a) the majority of the population is immune to COVID-19 and (b) the health services have the capacity to deliver “COVID” and “non-COVID” care. A maximum occupancy rate of 85% across hospitals will be necessary for patient safety.
- B. Adequate staffing to ensure good patient care despite staff sickness and the reduced productivity related to use of PPE. This should include prioritised **immigration** and travel arrangements for nurses and doctors, a renewed recruitment campaign and terms and conditions that would make the HSE an employer of choice. No further recruitment embargoes should apply to nurses or doctors.
- C. A **high-level working group**, to report within one month of the formation of a new government, to examine and set the nursing, midwifery, and medical workforce priorities for the health service over the coming year. This would examine the staffing deficits experienced by these essential front-line workers, set out where additional staff are needed and prioritise services to fully return to work.
- D. That **staff health and safety** is not compromised, ensuring the ongoing provision of adequate PPE and intensive mental health supports.
- E. Universal provision of supports needed for decision-making by **clinical teams** in the community to ensure care is delivered as close to the patient as possible and that unnecessary referrals to Emergency Departments are avoided.
- F. Investment in expanding **Community Intervention Teams** and maximising care in the community to ensure adequate capacity for step-down, recovery and rehabilitation allowing acute hospitals return to their core purpose

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PHIL NÍ SHEAGHDHA
INMO General Secretary

Yours Sincerely

DR EMILY O'CONNOR
**President, Irish Association for Emergency
Medicine**