

PNIS/CC

9th July 2019

Mr Paul Reid
HSE Director General
Dr. Steevens' Hospital
Dublin 8

By email to: CEO.Office@hse.ie

Re: INMO Meeting with HSE Senior Management team Friday 6th July

Dear Paul

Thank you for meeting INMO on Friday the 6th July to discuss matters raised in our letter to you of 28th June 2019.

We welcome and appreciate your detailed briefing in respect of your approach to Health Service funding and your strategy to build confidence with Government and the DPER. We accept and are encouraged by your conviction that quality care and front-line services are your priority, but we have concerns that the controls recently introduced will militate against that objective. Experience has demonstrated to us that in practice elevating employment control to a point where nurse or midwife vacancies must be signed off by a National Director slows down the recruitment process in Nursing and Midwifery. At the meeting we provided first-hand evidence of the difficulty experienced by Directors of Nursing where such procedures are imposed prior to replacing staff in front line services. Delayed offers of starting dates often mean the applicant moves on and the replacement, through necessity, must be filled through Agency. Indeed, this has already been recognised by the Ministerial Order under Section 10 of the Health Act which delegated the recruitment of Nurses and Midwives to Directors of Nursing and Midwifery.

Frontline services are human resource dependant and we believe we have demonstrated some of the difficulties encountered by nurse managers in relation to authority to recruit essential posts. We strongly asserted our belief that the derogation, via Section 10 of the Health Act for Recruitment, is being rendered secondary to financial constraint outside of the nursing budget and we urge you to reinstate the authority to the Directors of Nursing and Midwifery in accordance with our agreement.

The objective of prioritising quality care and front-line services to deliver it requires that HSE positively discriminate towards nursing and midwifery posts which are in short supply. Delays in processing nurses who were interviewed and deemed suitable for employment has, in some cases, led to those individuals being offered alternative employment in the private sector or, in the case of new graduates, the UK. This forces a higher dependency on agency and instead of the cost savings intended, costs increase and lead to the necessity to seek overseas recruitment later in the year.

We set out our concerns regarding clinical risks associated with the current employment control instructions. We advised that nurse managers are not in a position, in circumstances where they do not have authority to recruit to mitigate this risk. The point being emphasised is that recruitment of Nurses and Midwives takes place within a very competitive global market,

any pause to the process in Ireland will negatively affect our struggle to compete in this market and reverse small gains made over the past six months. The single edge we have is the number of graduates we can potentially offer permanent jobs to, unfortunately we have not taken this advantage this year as the process has been very slow and unclear in respect of appointment dates and locations.

We emphasised the importance of an immediate implementation of the recently brokered agreement to increase staff nurse salaries, to encourage retention of this year's graduates. The delay in the release of circulars has already impacted negatively as UK and other overseas recruiters are offering contracts to Irish graduates and the uncertainty of date of implementation, combined with delays in offering permanent posts has led to them accepting the UK offers. This is really worrying as the lowest costs are associated with directly hiring new graduates and all efforts should and must be made to encourage their direct employment in the Irish public services.

We agree with your observations and indeed have, over several years, highlighted the spiralling costs of state claims agency awards, PCRS, medical inflation and such which increase the spend without reflecting an increase to the allocated budget. We will be making these points again this year as part of our pre budget submission.

On the specific issue of the recruitment of the agreed 160 student public health nurses, which was raised as requiring urgent attention, my colleague Tony Fitzpatrick has written to the Director of HR separately, as she made a commitment to fulfil the agreement at the meeting.

You confirmed that the €5m additional funding for the roll out of the Medical and Surgical Staffing Framework has been agreed between DPER and HSE.

We concur and want to work with you in achieving the objective of building trust in the HSE and we believe that protecting frontline staff and ensuring that their employment and replacement is given the highest priority will assist in this respect. We also agree and would support an approach that determines priority for posts and systems that add value in the areas of quality of service to patients. We believe this is long overdue and concur that this assessment must take place immediately and will complement the implementation of the wider re-configuration of services as set out in *Slaínte Care*.

Thank you for the early and constructive engagement. I would like to continue this dialogue by setting up a similar meeting in mid-September and again post budget and before the service plan is prepared in early November.

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PHIL NI SHEAGHDHA
General Secretary