

Oifig an Stiúrthóra Náisiúnta, Acmhainní Daonna Feidhmeannacht na Seirbhísí Sláinte Ospidéal Dr. Steevens' Baile Átha Cliath 8

Office of the National Director of Human Resources
Health Service Executive
Dr. Steevens' Hospital
Dublin 8

Memorandum

To:

Each Member HSE Leadership Team;

Each ISA Manager, HSE;

Each Assistant National Director of Human Resources, HSE;

Each Employee Relations Manager, HSE;

Each CEO Hospital Group, HSE; Each CEO Section 38 Agency.

From:

Barry O'Brien, National Director of Human Resources

Date:

13th October 2014

Re:

Reduction and control of medical and nursing agency expenditure in

Mental Health Services

The measures set out in this memo have been approved for action across HSE and HSE funded Social Care Services

1. Context

Our primary purpose is to provide effective, safe, high quality health and personal social services to the population of Ireland. In this context the HSE National Service Plan 2014 sets out the range of services that will be delivered across the full range of settings, the approved funding framework and the staffing levels to deliver these services.

The HSE Service Plan reflected the need to maximise efficiencies and ensure that we maintain sustainable levels of service with quality and patient care at the heart of everything we do.

There is a common understanding across HSE and HSE-funded agencies of the need to control and reduce expenditure on agency staff while acknowledging our requirement to meet our overall service targets. The effective management of agency costs forms a major element of cost-containment plans.

Taking the above into account, the HSE is now putting in place processes to contain and control the frequency and cost of agency staffing across both HSE and HSE-funded agencies.



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2. Measures to reduce agency costs

The measures set out at Appendices I below for implementation from 3rd November 2014 are key to achieving necessary savings. It should be noted that these initiatives are being introduced without prejudice to on-going work in various Service Divisions to determine appropriate skill mix and staffing levels for 2015 which will continue.

Separately, Managers across the system must continue to use all of the relevant levers within the Haddington Road Agreement to maximise the benefits of the agreement in relation to reducing the Public Pay bill including, where possible, moving hours from "productivity" to cash saving measures.

Barry O'Brien

National Director Human Resources

On behalf of the National Director for Social Care



Appendix I - Reducing usage of agency Nursing staff and Healthcare Assistants/Multitask Attendants – Social Care Division

a) Introduction

The Public Service Stability Agreement (Haddington Road Agreement or HRA) facilitated the Graduate Nurse Programme and other initiatives, the primary focus of which was to support reduction in levels of agency staffing across the health system. While the Programme has had some success the level of agency continues to rise.

Since November 2013, the Social Care Division has undertaken a comprehensive range of work in maximising the potential that can be achieved through the implementation of the Haddington Road Agreement across Services for Older People and Disability Services. The process of engagement for Services for Older People has included:

- A large scale data collection exercise to support an analysis of the benefits, to assess the implementation of the agreement and also asked for planned savings to be incorporated in the service plans for 2014.
- The deployment of a Service Improvement Team across Services for Older People and Disability to measure performance against defined criteria and in particular how the HRA was being deployed in each unit to make savings and/or avoid further additional costs.
- The identification of a suite of options, target savings and action plans to maximise the benefits from the agreement.
- Focused engagement with unions across "learning sites" which could facilitate translation of learning across the whole system.

Taking all of the above into account, the following measures have been approved to be initiated from Monday 3rd November 2014:

b) Measures

- Each hospital/community organisation which currently has a reliance on agency nursing and agency HCA/MTA will identify the number of posts which could be directly replaced by a two year contract of employment. In the Social Care Division, Services for Older People have identified norms regarding skill mix and direct care staffing levels across residential care services and these norms must be used when considering the direct care staff requirements for each unit.
- Two year contracts of employment will be offered to nurses currently on the Nurse Graduate Programme to directly replace agency staff. It is recognised that this programme has had a limited appeal to Nurse Graduates working in the area of Social care and in particular in Older Persons services. Where the programme cannot provide the opportunity to replace agency staff local measures will be identified in conjunction with the Area Assistant National Director of HR to fill such vacancies appropriately.
- The replacement agency HCA should be achieved through the employment of intern HCAs.



- Formal sign-off will be required prior to contract offer from the CEO/ISA Manager, The Head of Operations & Service Improvement and by the Area Assistant National Director of Human Resources.
- The Graduate Nurse Programme will continue to be available to the Graduate Class of 2014 and the focus will continue to be to further reduce reliance on agency and overtime.
- As the above contracts will be for a two year duration the primary purpose of same is to reduce overall dependency on agency.

c) Implementation

- The above measures must result in reduction of existing costs and there must be 100% compliance from all HSE and HSE-funded service providers. The achievement of cost savings is the direct responsibility of the relevant service manager. The full support of ISA managers and in particular Directors of Nursing is fundamental to the success of this initiative in order to maximise the savings to be achieved.
- The National Director of Social Care will oversee the implementation of this initiative and will be accountable for the delivery of identifiable savings.



