

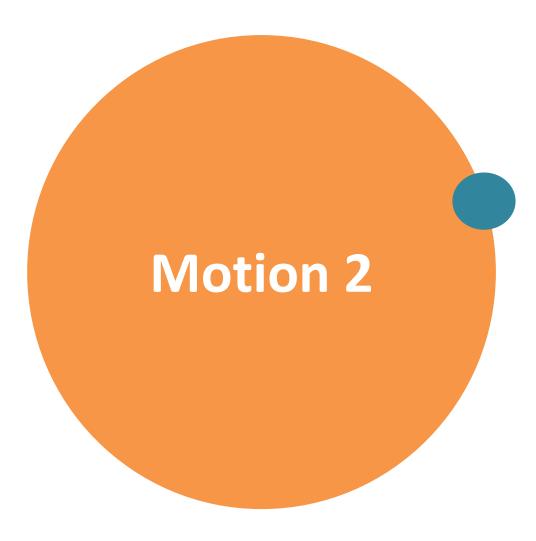
## 1. Capital Investments

"This Meeting calls on the Government to commit the estimated €4 billion in capital funding in October's Budget to build and open essential additional hospital beds, theatres, diagnostics and other facilities already announced by the Minister for Health in order to reduce bed occupancy rates, address the increased numbers of admitted patients being treated on trolleys, and reduce the cancellation of appointments and waiting lists. This would be a fraction of the Government's forecast budget surpluses of €26 billion this year and next."

**Proposer:** Prof Gabrielle Colleran, Consultant Paediatric Radiologist, CHI Temple St/National Maternity Hospital

**Seconder:** Prof Clare Fallon, Consultant Geriatrician, Midland Regional Hospital, Mullingar





## 2. Acute Hospital Capacity Deficits

"That the Government proposes credible, funded, time-bound plans to rapidly increase acute hospital capacity. An estimated 5,000 additional public hospital beds should be funded by 2030 – or 700 extra hospital beds each year for the next seven years. This must start with the rapid delivery of the 1,500 additional public hospital beds across 15 acute hospital sites the Minister for Health committed to open in 2023 and 2024.

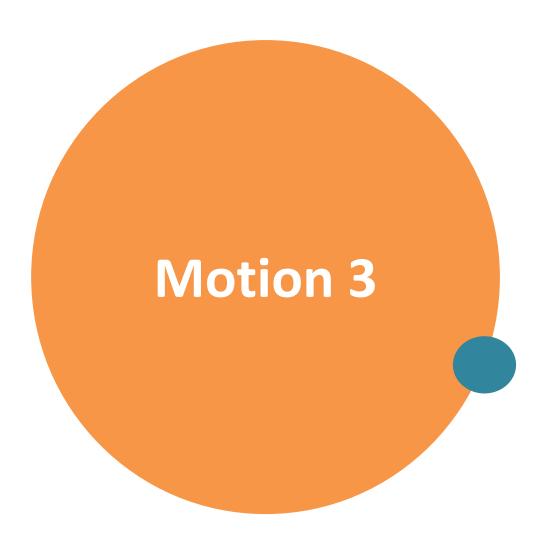
The Government also needs to urgently expand ICU bed numbers to the minimum 579 recommended a decade ago, and further increase critical care capacity to over 720 beds to reach the OECD average on a population basis. Increased dedicated theatres and other facilities are also required across the country to deliver essential scheduled care, not just in the proposed six surgical hubs and four elective hospitals."

**Proposer:** Mr Greg Fulton, Consultant Vascular Surgeon, Cork University Hospital

**Seconder:** Mr John Kelly, Consultant Orthopaedic Surgeon, Sligo University Hospital

33





### 3. Consultant Vacancies

"This Meeting calls on the Government to address the very obvious shortages of Consultants in our public hospital and mental health services, given that a record 933 permanent Consultant posts are vacant or filled on a temporary basis, and the fact that Ireland continues to have the lowest number of medical specialists on a population basis in Europe, 34% below the EU average.

The Government must restore trust to fill the 22% of permanent Consultant posts that are not filled as needed and fund and appoint 2,000 additional Consultants by 2030 – around an extra 300 annually."

**Proposer:** Dr Mike Staunton, Consultant Anaesthesiologist, Our Lady of Lourdes, Drogheda

**Seconder:** Dr Angus Burns, Consultant Orthodontist, Dublin Dental University Hospital





# 4. Waiting List Reduction

"With 896,000 people on some form of NTPF waiting list, including 100,000 children, and an additional 250,000 waiting for essential hospital diagnostic scans, this Meeting calls on the Government and health service management to engage with the IHCA and agree realistic and properly funded Plans. This can only be achieved by addressing the overwhelming shortage of consultants, public hospital beds, theatre and other frontline resources.

This is essential to effectively provide care to the 1.1 million people – equivalent to a fifth of the population – currently on waiting lists and address the growing delays in treatment and the resulting poorer patient outcomes."

**Proposer:** Dr Áine Burke, Consultant Haematologist, Sligo University Hospital

**Seconder:** Dr Patricia Walsh, Consultant Psychiatrist, Naas General Hospital





#### 5. Mental Health

"That the Government increase the Mental Health Budget from 5.7% of the total Health Budget to at least 10%, as recommended in Sláintecare. This funding should be targeted at increasing adult psychiatric inpatient bed capacity by at least an additional 300 beds, a doubling of CAMHS beds, along with the filling of the estimated 32% of Consultant Psychiatry posts not filled as needed plus the appointment of additional Consultant Psychiatry posts.

Extreme deficits in Mental Health Community Team staffing levels, particular in Child & Adolescent Mental Health Services, are restricting the services' capacity to deliver care to patients and needs to be addressed urgently."

**Proposer:** Prof Elizabeth Barrett, Consultant Liaison Child & Adolescent Psychiatrist, CHI Temple Street

**Seconder:** Dr Rachel Cullivan, Consultant Adult Psychiatrist, Cavan General Hospital