

**Seventh meeting of the Public Service Pay Commission
7th February 2017 at 8.30 am, St. Stephen's Green House.**

In attendance

Mr. Kevin Duffy (Chairman)

Ms. Marian Corcoran

Mr. Ultan Courtney

Ms. Ruth Curran

Mr. Noel Dowling

Mr. Seán Lyons

Mr. David Denny (Secretary)

Ms. Susan McKiernan (Secretariat)

Ms. Karen Murphy (Secretariat)

Mr. Evan Coady (Secretariat)

Mr. Brian Cahill (Secretariat)

Mr. James Maher (Secretariat)

8.45 am- 9.25 am

Ms. Fiona Tierney, CEO Public Appointments Service

Ms. Michelle Noone, Public Appointments Service

9.25 am- 10.20 am

Mr. Liam Doran, General Secretary INMO

Mr. David Hughes, Deputy General Secretary INMO

Ms. Phil Ní Sheaghda, Director of Industrial Relations INMO

10.20 am- 11.00 am

Mr. Colin Menton, DPER

Mr. Peter Brazel, DPER

Mr. Tom Clarke, DPER

Ms. Teresa Cody, Department of Health

Ms. Rosarii Mannion, HSE

8.45 am- 9.25 am

The PAS delegation joined the meeting at 8.45 am. PAS clarified which specific areas of the public service they recruit for. PAS stated that there are particular problems recruiting in the health sector, especially consultants, and for senior managerial positions across the public service. PAS believe the policy that external appointments must start at the minimum point of the salary scale contributes to these difficulties, and suggested allowing greater flexibility in starting salary. PAS cited feedback from interview boards indicating that many private sector applicants for senior roles are not fully aware of the levels of responsibility expected for these grades.

PAS explained how there are also difficulties in retaining staff in senior specialist roles, acknowledging that while some churn is expected in these areas individuals are now leaving after 18 months where they may have remained for 3-5 years previously. PAS raised the possibility of waiving PRD or pension contributions to increase the attractiveness of senior

positions. PAS concluded their presentation by suggesting that candidates should be made aware of the net pay for the position when applying.

The Commission asked which other jurisdictions PAS had recruited from and PAS explained that while there are often requirements that applicants must be EU citizens it had also recruited from Canada, USA, Australia and New Zealand. The Commission suggested that it has always been the case that public sector cannot compete with private sector pay levels for senior positions. PAS clarified that there are no difficulties attracting candidates up to Principal Officer level or equivalent.

9.25 am- 10.20 am

The INMO delegation joined the meeting at 9.25 am. At the outset the Chairman clarified that a benchmarking type exercise for specific grades would not be part of the Commission's initial report. The INMO submitted that the Department of Health had acknowledged that there is a recruitment and retention problem for nurses and midwives. The INMO indicated that its submission was supplementary to the submission from the Public Services Committee of ICTU.

The INMO compared the pay of its members with pay levels available in the private sector and internationally, primarily other Anglophone countries. The INMO described how even if similar pay rates are offered in the private sector, working conditions are more favourable in the private sector. Regarding emigration of qualified nurses the INMO explained how Irish nurses do not require an adaptation period in other jurisdictions, which can be 10 weeks for nurses from other source countries such as India or the Philippines. The INMO submitted that their members are unique in that they are regulated by 2 statutory bodies (NMBI and HIQA).

The INMO stated that the biggest recruitment and retention problem is at the staff nurse grade. The INMO cited figures showing a reduction in the number of nursing staff from 39,000 in 2007 to 35,300 in 2015, despite an increase in the number of doctors over the same period. The INMO specified that these figures include final year nursing students, who require supervision and cannot practice independently. The INMO asserted that the shortage of staff was exacerbated by the policy not to replace staff on maternity leave during the moratorium and the number of staff retiring each year. Mr Lyons left the meeting at this point.

The INMO used the example of the HSE 'Bring Them Home' campaign which recruited 88 nurses, despite having a target of 500, to emphasise the recruitment and retention problem. The INMO stated that the UK have an undersupply of nursing staff and thus will continue to target other source countries. The INMO stated that Ireland has an advantage in that they currently train enough nurses and would have sufficient staffing levels if they were able to retain these nurses. The Commission enquired about the number of nurses working in the private sector and the INMO responded that there are approximately 7,500 (which might include an element of double counting).

The INMO stated that while gross pay is broadly similar between the public and private sector, net pay is lower in the public sector due to the Pension Related Deduction. The INMO are seeking parity of esteem with other technical grades in the health sector, as it submitted that the staff nurse grade is the lowest paid grade for which a degree is required. The INMO concluded that retention across the scale is also a difficulty, as experienced staff are leaving to work in the Gulf States where only experienced staff are hired.

10.20 am- 11 am

Officials from DPER, Department of Health and HSE joined the meeting at 10.20 am. DPER began by stating that there is no general recruitment and retention problem, citing the increases in numbers from 2013 to 2016 for doctors, nurses and other health staff. DPER outlined some of the recent measures taken to improve the attractiveness of pay for nurses, including the amelioration of pay for student nurses and restoration of the allowance for community nurses. DPER submitted that it is too simplistic to suggest increased pay is the solution, mentioning other factors such as pressurised work environments and global recruitment and retention difficulties.

The Department of Health confirmed that data on recruitment and retention in the health sector would be provided by the end of the week (10th Feb). The Department stated that there are recruitment and retention problems in certain areas including specialist nurses (e.g. staff in theatre and emergency departments) and consultant psychiatrists. The Department stated that there is a high degree of churn due to the pressurised work environment.

The HSE confirmed that they are offering permanent positions to all nursing graduates this year, as there are currently 1,200 vacancies. The HSE mentioned the feedback following their 'Bring Them Home' campaign from December 2016 that take home pay is higher in the UK. The HSE and Department of Health confirmed that they are in agreement with the factual information contained in the INMO's submission. The HSE mentioned a task force currently working to determine nursing staff requirements and correct staff mix ratios, with the results of a pilot study due in March.

11 am- 11.15 am

Members agreed the minutes of the last meeting. The Secretary provided an update on actions taken since the last meeting. Members requested that the Secretariat organise meetings for the next session with any remaining representative groups. Members agreed to change the date of the next session to 22nd February in order to accommodate these meetings. The Secretary clarified procedure regarding press queries, which should be referred to the Secretariat.

Action points

- Redraft recruitment and retention working paper to include health data, due to be received by 10th Feb.
- Arrange meetings with SIPTU Health Division (nurses, radiographers, EMTs), Association of Hospital Chief Executives and Irish Medical Organisation for 22nd Feb.
- Rearrange meetings with presenters from Pensions Authority, Irish Institute of Pensions Management and DPER following change in date.