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Re: Mental Health Services

Following a lengthy engagement under the chairmanship of the Workplace Relations Commission, the following proposal was agreed for recommendation by the parties in relation to the issues raised.

Recruitment issues

• <u>Timelines around the approval and recruitment process.</u>
Agreed wording to issue to the system in this regard.

<u>Nurse training places – Increase needed</u> Approval for additional 60 places for 2016 granted, with an additional 70 for 2017.

- Post Graduate Training To allow nursing disciplines convert to Psychiatric Nursing.

 This training scheduled to commence in UCD January 2017. The numbers involved will be 40. This number will be subject to review in respect of future years.
- Graduate Training Enable Graduates in health sciences qualify in Psychiatric Nursing through an accelerated process.

All parties are committed in principle to this proposal. By way of progressing the matter, a scoping exercise has commenced, including review of best practice internationally, and this will be concluded in the first quarter of 2017

Extension of service provision over a 7 day/24 period.

This proposal is agreed in principle by the parties. It has been put forward a general hypothesis that 24 hour services within the community will yield positive outcomes both qualitative and quantative. It is agreed that an exercise is required that in the first instance the hypothesis be fully scoped out with regard to questions that can be scientifically supported. This will include a review of international best practice and models of care in other jurisdictions. The review group will be established to complete the above work and report back within quarter 4 of 2016. Nominations to this group will be sought from all relevant parties, without delay.

Retention issues

- Temp Nurses Request to have a conversion process for existing temp staff. The Mental Health Division, in conjunction with HR, have issued letters which will ensure that all those entry grades currently on temporary contracts will either through legislation, panels or a local process, be made permanent. This will include 2016 graduates. Furthermore those on a panel will retain their panel place.
- <u>Facilitate part-time nurses requesting to increase their hours</u>
 The parties fully support this position, where budgets allow and particularly in areas where overtime and/or agency spend is a factor. Correspondence will be issued by management, in this regard.
- Payment recognising the role in the community:

Within the provisions of the Lansdowne Road Agreement, agreement in principal has been reached between the relevant management and union side on the application of an incremental salary scale for psychiatric nurses in the community, the introduction of which will be contingent on specific productivity measures to be discussed for the entire cohort of mental health nurses.

In keeping with this requirement, following an extensive process under the chair of the WRC, the following productivity measures have been identified as supporting the re-introduction of a payment, specifically:

The general body of mental health nurse agree to:

- Full co-operation with the continued roll out of Vision for Change.
- Full co-operation with movement of services from hospital based to the community, including movement of staff across the system subject to current agreed processes.
- Support the development of extended services.
- Full co-operation with the expansion of the ANP's and their role, including any initiatives
 which may be put forward.
- Commit to full engagement on the role out of revised structures in the Community Health Organisations.
- Support the role of the psychiatric nurse in the community, in discharging their functions under the Mental Health Act.

Incremental credit 36 week placement 2011-2015

Following significant engagement between the parties, under this process a submission was received by the DOH. A submission was made by DOH seeking an immediate review. No approval has been given for an early review to address the issue. The staff side reserve their position in this regard.

Development of ANP posts.

The Mental Health Division is committed to the development of ANP posts. Initially the HSE will commit to 3 ANP posts in each CHO area plus 1 in the National Forensic Mental Health Service. These are in addition to existing ANPS. Discussions will need to commence with key stakeholder, such as Area Directors of Nursing and Mental Health Division and staff representatives, to ensure that the appointment of the ANP's are in line with identified clinical need.

- Incremental recognition for retired staff returning to the service as staff nurses.
 The HSE will, from the date of any agreement, recognise previous service for this cohort of staff, up to the LSI of the Mental Health Staff Nurse grade. This sanction is only granted in the context of an overall agreement being reached.
- Consistency in the application of schemes which ensure that a staff member is given their entitlements without delay.

Corporate Employee Relations have issued a letter clarifying the provisions of the Revised Physical Assault Scheme. It is further agreed to examine a specific issue raised, regarding sick leave and revert directly prior to the 25th August 2016.

Consistency on overtime rates paid, with regard to point of scale.
 The HSE will, from the date of any agreement, issue direction that staff working overtime, should be paid in accordance with their own hourly rate, taking cognisance thereafter of the provisions of the LRA.

Education

The parties agree that the release of staff for education is necessary; however this will need to be balanced in the context of service provision. There is continued professional development in the HSE. Mandatory training will be prioritised, with post graduate courses supported, with time off managed in the best manner possible at local level. The Mental Health Division commit to ensuring that there is an equitable application of time and resources, across each specific area.

• The parties agree to an ongoing review process on the implementation of this agreement, at both local and national level. There will be regular ongoing engagement at local level to address the day to day roll out of the agreement. It is further proposed that in November 2016, the parties will reconvene under the WRC to look at overall status of implementation.

This document is a composite proposal in response to a range of issues raised by the staff representatives. If any part of this proposal is rejected by either party it is withdrawn in its entirety and deemed not to have been tabled.

Yours sincerely,

Damien Cannon Regional Manager