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Mr Kevin Duffy

Chairman
Public Service Pay Commission
C/O David Denny
Department Public Expenditure and Reform
Government Buildings
Merrion Street
Dublin 2.

Re: SIPTU MEMBERS ALL GRADES HSE NATIONAL AMBULANCE SERVICE

Dear Mr Duffy,

Please see attached a formal outline of issues pertaining to the recruitment and retention of Ambulance Professionals employed in the HSE National Ambulance Service.

The main focus of our contribution centres on our members operating in frontline services all of whom SIPTU have national negotiation rights to represent.

Our members in Officer Grades are subject to an ongoing review of management structures. However that said the issue of making Officer Posts attractive both in retaining skilled and experienced personnel is a feature of our position that a Job Evaluation system is required for the all ranks operating in the National Ambulance Service.

I ask for the Commission's consideration of our formal submission and respectfully request an opportunity to elaborate at an oral session if possible.

Yours Fraternally,

PAUL P. BELL
DIVISIONAL HEAD

**SUBMISSION TO THE PUBLIC SERVICE
PAY COMMISSION ON BEHALF OF
AMBULANCE PROFESSIONALS
EMPLOYED BY THE HSE NATIONAL
AMBULANCE SERVICE & REPRESENTED
BY SIPTU HEALTH DIVISION**



NATIONAL AMBULANCE SERVICE OVERVIEW

This submission is made on behalf of Ambulance Professionals committed to direct patient care either through the HSE National Ambulance Service deployment in control and dispatch services or direct intervention through the services of an advanced paramedic, paramedic or emergency medical technicians.

Since the economic collapse the HSE National Ambulance Services, like all other areas of the health service, suffered serious reductions in their budget that negatively impacted on the effectiveness of the service to effectively deliver on the range of services offered by the HSE National Ambulance Service.

Services such as emergency ambulance service and patient transport services in both urban and rural settings.

The HSE National Ambulance Service also came into public focus having been criticised by the services regulator HIQA. Much the of the criticism levelled against the service did not explain that underinvestment had made a significant contribution in the alleged under performance of the HSE National Ambulance Service.

This period of attrition which we are only recently beginning to emerge from, impacted extremely negatively on the morale of those employed and committed to the National Ambulance Service in all ranks.



SIPTU HEALTH DIVISION CAMPAIGN TO RESOURCE THE NATIONAL AMBULANCE SERVICE

From the Autumn period of 2013, SIPTU Health Division launched a campaign to *"Save our Ambulance Service"* aiming to rebuild public trust and to improve staff morale, as the HSE National Ambulance Service was slipping down the ranks as an employer of choice. Having initiated and brought our concerns for the HSE National Ambulance Service to the Joint Oireachtas Committee on Health our demands for an independent capacity review to be undertaken of the service was undertaken.

Surprisingly this was the first time ever that a capacity review was undertaken of the service despite the demands been placed upon it by HIQA and the Department of Health. Eventually the capacity review undertaken by Lightfoot was published following a threat of strike action in mid 2016.

The report which is attached for your information identified that the service was significantly under resourced in personnel and equipment. The requirement for the recruitment of additional ambulance professionals stands at approximately 600. It is important to note that the HSE National Ambulance Service can only recruit and train 100 Ambulance Professionals per year.

In 2016, on foot of a notice been served on the HSE for strike action the Department of Health and the HSE committed to invest in excess of 25 million euro in the HSE National Ambulance Service in the areas of recruitment and fleet in order to bring the service to the capacity required to meet the total range of services offered to the public in both urban and rural settings.

This is a five year project which our members are working through on a daily basis to maintain and develop the service.



RECRUITMENT AND RETENTION

While the case for recruitment and retention issues in frontline services throughout the health service is well made. The HSE National Ambulance Service has advanced over a twenty year period from being a “patient transport service operated by the ambulance driver and nurse” to a service being provided by a range of qualified ambulance professionals from the second the public make contact with the service mainly in times of great distress and trauma.

Frontline ambulance professionals are all qualified (registered with PHECC) advance paramedics and paramedics trained and educated in the delivery of emergency medicine.

Command and control room are also trained and qualified in emergency medicine to the same level thereby equipped to guide and advise the call maker on steps to support a patient while the ambulance is on route to location or scene.

The issues of recruitment and retention are not new to the Commission and probably display a common theme in a competitive labour market undermined through lack of resource and in many cases vision for the strategic development of a service. The HSE National Ambulance Service is no different and we believe that the points outlined below all of which require investment will go some way in developing the service and making it an employer of choice for young men and women who want to make a difference in their community and society.

One fact which needs to be made that the HSE National Ambulance Service employs approximately 1,600 personnel with approximately 1,100 delivering frontline ambulance services in the community through emergency ambulance service and dedicated patient transport provision.



INCENTIVES

Like other medical professionals, ambulance professionals view their occupation as one which must attract and retain committed professionals and in a competitive labour market, remuneration, career progression and the opportunity for career development are key components to achieve same.

REMUNERATION

In the area of pay, it needs to be strongly pointed out that ambulance professionals were identified in the benchmarking process as the lowest paid frontline medical professional in the HSE and were awarded an initial increase to bring them into contact with other grades.

However in “Benchmarking 2” an additional 5% pay increase was awarded was never paid to our members. Our members see this issue as unfair and unfinished business as the award was made in recognition of the huge advancements in service provision and indeed the huge advancement in their skills thereby giving better patient outcomes especially in the “Golden Hour” period as our members are licensed to give direct medical intervention as well as drug administration to patients. In order to commence an appropriate correction of our members pay we believe that this award should be applied.

ENTRY POINTS ON PAYSCALE

The entry point on the existing pay-scale is as adjusted in 2010 is not sustainable and unattractive for potential candidates considering a career in the HSE National Ambulance Service.



Especially when considering the onerous responsibility placed on the shoulders of all ambulance professionals from emergency medical technician, paramedic through to advanced paramedic whether they operate in the community or in command and control.

The entry points on the pay-scale must be eliminated in order to attract candidates, and retain new employees who find it extremely difficult to manage on a low basic salary which is not commensurate with the position of Ambulance Professional.

CAREER PATH

It is essential that all candidates and existing ambulance in the HSE National Ambulance Service be afforded the opportunity of education and career development through investment in CPD. This is essential as demands on the service for higher levels of skills and public demands will continue to grow at accelerated rate.

Priority should also be given to those employed in the HSE National Ambulance Service who wish to change and advance their career path in meeting the evolving challenges placed on the service.

RECRUITMENT OF AMBULANCE PROFESSIONALS

As the demands on the HSE National Ambulance Service have evolved and developed over a twenty year period from driver to medical professional, candidates to fulfil the full range of duties now demanded by the public has become extremely challenging.



With the HSE NAS clearly identified as not have sufficient ambulance professionals available in the labour market the pressure to recruit is made even more difficult by the facts that only 100 applicants can be trained per year which is not sufficient in addressing the 600 ambulance professional deficit.

This situation is tempered by the fact that a minimum of 30 ambulance professionals vacate through retirement and exit from the service per annum.

It is also important to note that attempts to recruit fully qualified ambulance professionals from abroad has been limited in success.

The main reason for this lack of success in recruiting from abroad relates to shortages of Ambulance Professionals in many part of the developed world, for example London Ambulance Service has approximately 600 vacancies.

Remuneration and conditions are also a consideration as Ambulance Professionals employed in countries such as Canada, USA, Australia, New Zealand and United Kingdom which are targeted jurisdictions for overseas recruitment are recognised as Health Professionals and attract employment terms commensurate with other Allied Health Professional grades.

Educational development and opportunities also vary with some Ambulance Services actively encouraging and resourcing academic qualifications at Masters level in emergency medicine thereby allowing for career progression.

It is also necessary to point out that successful candidates have no rights to select a location close to home. This recruitment model is discouraging prospective candidates from making application or accepting a post when offered. Our submission goes into greater detail on the incentives required to both recruit and retain Ambulance Professionals in a Health Service where the National Ambulance Service is key community medical service.



We also believe that necessary steps and initiatives must be introduced to attract candidates from abroad which is in its infancy and to encourage and support workers in the health service who would consider changing their career path into the HSE National Ambulance Service.

QUALIFICATIONS AND REGULATION

All members of the HSE National Ambulance require academic qualification to perform their roles :

- Emergency Medical Technician:
- Paramedic:
- Advanced Paramedic:

All members are also registered with the Pre Hospital Emergency Care Council (PHECC) and must commit to continuous training and education in order to maintain the highest standards.

Our member's profession is also regulated by HIQA and subject to ongoing review and assessment comparing with best international practice.

EDUCATION

To get into training you need 6 leaving cert subjects including a science subject
EMT course for five weeks.

Paramedic Diploma course 1 year internship and 8 months approx. training.

You qualify from UCD with diploma in emergency science. Advanced Paramedic - you must work for two years as a paramedic and then seek entry to a course go on panel AP course 7/8 months' work, 1 year as an advanced paramedic you then graduate in emergency science.



OFFICER STATUS

Despite the responsibilities, qualifications, and regulation our members are not considered to be part of the health professional family and believe this is having a negative impact on attracting potential candidates considering a career in the Ambulance Service.

We believe that granting Officer status to ambulance professionals in frontline services would be just recognition for the role our members play in health service delivery.

Officer status would also put our member's role in the in the Allied Health Professional family.

JOB EVALUATION

Ambulance Professionals have no mechanism for evaluating their role as compared to their colleagues abroad and as compared to other health professionals working within the Irish public health service.

In order to address this situation and to ensure their role is appropriately recognised we are to request that a Job Evaluation process be designed and agreed between the SIPTU Health Division and the HSE.



CLOSING STATEMENT

Chairman and members of the Commission, our submission to you on behalf of SIPTU Ambulance Professionals is aimed at primarily to inform of the challenges faced in competing in the labour market.

Our submission also clearly demonstrates how the service and those employed in it have advanced in a very short space of time. And is understandably expected to advance even further as public demand grows for the National Ambulance Service reach higher and higher levels.

SIPTU Health Division representing ambulance professionals want the National Ambulance Service to be an employer of choice offering a fulfilling career in the service of the public and opportunity for self-development which will in turn give greater motivation to meet the expectations and requirements of a world class ambulance service.

As you can see our members have embraced the challenges despite serious cuts in resources to the service and this fact is borne out by the fact that the HSE have confirmed that a programme of investment totalling 277 million is required over the next ten years to bring the National Ambulance Service the desired space within the health service.

We thank you for your consideration of our submission and would welcome observations or questions you may have.

