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Our Ref: BG/NF
CEO Ref: 11890

All Health Sector Unions

By Email to: All Health Sector Unions

Re: Pay and Numbers July 2024

Dear Colleagues

You are all aware of the detailed discussions underway in recent months as we work towards the development of a comprehensive Pay and Numbers Strategy for the HSE – the largest employer in the state.

We all recognise the unprecedented growth in the number of staff employed by the HSE and its Section 38 agencies in recent years. This very significant increase in staff has enabled us to deliver high quality health and social care to an increasing population.

It is important to note that disability services on which we now report to the Department of Children, Equality, Disability, Integration and Youth (DCEDIY) are not part of this Pay and Numbers Strategy and will have their own Strategy.

The number of dedicated and professional staff delivering care on behalf of the HSE is now at a level not previously seen and continues to grow. As of May 31st this year, there were 127,325 WTE (whole-time equivalents) working in HSE and section 38 agencies. This is an overall increase of 25% when compared to 2019 – and when adjusted to exclude the growth attributing to pre-registration nursing and midwifery students and S39 agencies (Hospices) incorporated as S38 status equates to a net additional growth of 24,200 WTE.

It is also important to highlight that included in our overall staffing figure are 2,000 posts for which we were not funded, and a further 2,000 posts recruited temporarily to support services during the COVID-19 pandemic and still in place.

By any standards this increase in staffing demonstrates the HSE and the Government's commitment to meet the growing and changing needs of the people who depend on us to provide their care.

As outlined in previous updates to you, it was our view that the only sustainable means forward for the HSE was to pause our recruitment over the last year, to enable us reset and develop a new Pay and Numbers strategy. In May last year we introduced a pause on the further recruitment of staff in the more senior management and administration grades, which was then extended to all staff grades in November. While there have been certain exemptions and derogations to this pause, it was necessary, because the number of staff being recruited was running ahead not only of what we had projected, but also of what we could afford. While we know that this recruitment pause has presented many challenges, it is important to acknowledge that we continued to experience net growth in our staff numbers every month until April this year.

Over the last number of months, we have worked closely with our colleagues in the Department of Health and the Department of Public Expenditure, NDP Delivery and Reform, and, with the support of the wider Government, we are pleased to say that we have now concluded our Pay and Numbers Strategy. This will enable us to move forward with greater certainty for the remainder of this year and next year. Included in this Strategy is approval and funding to retain those additional 4,000 posts.

There are a number of critical principles which are core to the revised Pay and Numbers Strategy:

- Each of the six HSE Health Regions and each national service will be provided with its own specified number of WTEs and can within that approved number, replace, recruit and prioritise.
- The allocation will include a spend limit on agency and overtime to accompany the WTE allocation. This will allow each Health Region and national service be responsive within the overall funding allocation available to them.
- Given that each Health Region and national service will have the authority to manage its own staff allocation within the approved ceiling, they will not be affected by challenges should they occur in other parts of the organisation. This removes the need for nation-wide interventions.
- A Health Region or national service will be able to prioritise filling vacancies that may arise within the allocation. They can also re-prioritise should they wish and remain adaptive, within overall national policy and guidance.
- A control mechanism will be in place to ensure that the allocation is not breached in any area, and should this occur, the Regional Executive Officer will be clear on the steps for correction.
- Additional new developments are being included within the allocation to ensure we fulfil the requirements outlined in the National Service Plan 2024.

To determine overall allocation of staffing under the Pay and Numbers Strategy and ensure that it is maintained, the following principles apply:

The approved ceiling is the closing census (occupied paid positions) on December 31st, 2023, which overall is 125,420 WTE in addition to each of the following:

- 1,850 posts new developments 2024
- 500 posts new developments to be announced (i.e., to be allocated)
- 418 agency conversions towards safe staffing levels, 542 agency conversions to reduce costs and increase stability to be announced (i.e., to be allocated)
- 1,023 posts to accommodate S 39 Hospice change to S 38.

A new overall employment control figure of 129,753 WTE is therefore set as the maximum WTE for the organisation. This excludes pre-registration nursing and midwifery students (at the end of May) and 76 special assignment temporary posts.

Over the coming days, each region and national service will receive a detailed notification of their respective allocations for 2024 under the new Pay and Numbers Strategy. An assessment will take place in the background as to any internal rebalancing of allocations for 2025 to deal with any particular anomalies arising that may have unintentionally disadvantaged a location. However, given the geography and scale of the regions, any corrections necessary should, in the main be managed within the regions.

It is welcome that we now have our Pay and Numbers Strategy agreed as part of an overall funding arrangement, which includes 2024 and 2025. It will require us to be mindful of how we use the resource we have, address efficiencies, and achieve savings to meet budget targets and demonstrate control in both pay and non-pay expenditure. To do this in the context of unprecedented growth in demand for services we will need to further stretch ourselves in the public interest and focus critically on reform, productivity, performance, and accountability.

Our PNS is now set, and we will advise Health Regions and national services in the coming days of their details. We want to thank you all for your work and input and we will be working to support you to ensure that these positive and definite decisions will now bring more certainty for the remainder of 2024 and as we plan for 2025.

Kind Regards,



Bernard Gloster
Chief Executive Officer



Anne Marie Hoey
Chief People Officer