



HEALTH & WELFARE DIVISION

CONFERENCE
2023

AGENDA

24th-26th May 2023

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Conference timetable

Wednesday 24th May

13.00	Registration and issue of ballot papers
16.00	Opening of Conference
16.15	Cathaoirleach Clodagh Kavanagh opening address to conference
16.30	Appointment of tellers and scrutineers
16.40	Adoption of general standing orders
16.45	Adoption of Standing Orders Committee report
17.00	Election arrangements
17.05	Minutes of Conference 2021
17.10	Biennial divisional report for adoption
17.15	Privatisation: Motions 89, 90 and 91
17.35	Community and Voluntary Sector pay: Motions 30 and 31
17.50	Statutory regulation: Motions 94 and 95
18.00	4 day week: Motions 109 and 110
18.15	Strategic Change presentation
18.30	Conference adjourns

Thursday 25th May

9.30	Conference resumes
9.35	Address by Head of Division, Ashley Connolly
9.50	Regional Health Areas: Motions 1, 2, 3, 4, 5 and 6 (Motion 1 covers motion 2; motion 3 covers motion 4)
10.25	Address by Mr. Bernard Gloster, CEO, HSE
10.45	General terms and conditions: Motions 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78 and 79 (Motions 66, 67, 68 to be taken in common debate)
12.00	Dept of Health Expertise: Motions 96, 97, 98, 99, 100, 101, 102 and 103 (Motion 98 covers Motions 99, 100, 101, 102 and 103)
12.40	Public policy: Motions 104, 105, 106, 107 and 108
12.55	Video presentation: Rise of the Far Right
13.00	Lunch
	Fringe event " <i>Rise of the Far Right</i> " - Aoife Gallagher, Analyst, Institute of Strategic Dialogue
14.00	Conference resumes

Conference timetable

Thursday 25th May (continued)

- 14.00 Address by Fórsa President Michael Smyth
- 14.10 Presentation of distinguished service awards
- 14.20 Recruitment and retentions: Motions 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45 and 46
(Motions 34 and 35 to be taken in common debate)
(Motion 45 covers motion 46)
- 15.15 CDNT: Motions 87 and 88
- 15.30 Guest speaker Chief Commissioner Sinead Gibney of the Irish Human Rights and Equality Commission (IHREC) on the topic:
"Care – a core trade union issue"
- 15.45 CHN Model: Motions 80, 81, 82, 83, 84, 85 and 86
- 16.15 Career pathway review: Motions 50, 51, 52, 53, 54, 55, 56, 57 and 58
(Motions 50, 51, 52 to be taken in common debate)
(Motions 55 covers motion 56)
- 17.00 Job evaluation: Motions 47, 48 and 49
- 17.15 Conference adjourns

Friday 26th May

- 9.30 Conference resumes
- 9.35 Organisational and development: Motions 92 and 93
- 9.45 Address by Kevin Callinan, Fórsa General Secretary
- 10.15 Pay, pensions and related matters: Motions 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 25, 26, 27, 28 and 29
(Motion 7 and 8 to be taken in common debate,
Motions 10, 11, 12, 13 and 14 to be taken in common debate,
Motions 17, 18, 19, 20, 21 and 22 to be taken in common debate and
motions 28 and 29 to be taken in common debate)
- 11.30 Appendix 2: Motions advisory to the National Executive Committee 111, 112, 113, 114, 115, 116, 117, 118, 119, 120, 121 and 122
- 12.00 Conference closes

Standing Orders Committee

Civil Service Division

Siobhán Daly
Helen Lundy (Secretary)

Education Division

Eileen Coman
Niamh Jordan**

Health and Welfare Division

Gerry Foley (Vice-chairperson)
Don Meskill

Local Government and Local Services Division

Rose Marie Conroy (Chairperson)
Audrey Warren*

Municipal Employees' Division

Tom Kavanagh
Michael Ross

Services and Enterprises Division

Teresa Kearns (Returning officer)
Billy Gallagher

*Kathryn Collins resigned from SOC in 2022 and was replaced by Audrey Warren, who transferred from the Education Division to the Local Government and Local Services (LGLS) Division.

** Niamh Jordan was nominated by the Education Division Executive Committee to replace Audrey Warren on her transfer to LGLS Division.

General standing orders for conference

1. These standing orders shall be read in conjunction with the rulebook of the union. If there is conflict on meaning, then the rulebook shall prevail.
2. The Standing Orders Committee shall recommend the timetable for Conference and the order in which motions and amendments submitted shall be taken. When the time allotted to a group of motions has elapsed, the chairperson shall allow the debate in progress to finish. S/he shall then proceed to the next group of motions, thus guillotining any remaining motions in the current section. Such guillotined motions may be taken up by the chairperson later in Conference as time permits. Otherwise, they are automatically referred to the appropriate executive committee.
3. Unless otherwise decided by Conference, only one motion may be before Conference for discussion at any time.
4. Individual motions and amendments should be proposed by a speaker from the appropriate executive committee or from the branch which gave notice of the motion or amendment. Where no delegate of that branch is present, the motion may be proposed by any other member of Conference. In the case of motions in common debate, all motions and amendments shall be deemed to be formally proposed, unless the Conference has been given advance notice that the proposer of a motion or amendment does not wish it to be proposed. There is no requirement for any motion or amendment to be seconded. Once the agenda has been adopted, motions may only be withdrawn with the agreement of conference.
5. Only members of conference as defined by Rules 16(i) and 20(ii) or the equivalent grade committee representatives as defined in Rule 25(ii)(e) of the rulebook may address conference¹. This rule shall not preclude the Standing Orders Committee from making recommendations to conference, which shall be considered immediately by conference.
6. Unless otherwise agreed by conference, no member shall address conference unless s/he is proposing or speaking to a motion or amendment or:
 - (i) is raising a point of order; or
 - (ii) is raising a point of fact; or
 - (iii) is delivering the chairperson's address.
7. All speakers should address conference from the rostrum or microphone, and should announce her/his name and branch or committee. The proposer of a motion shall speak for not more than four (4) minutes, and all other speakers shall have not more than three (3) minutes. Members of the relevant Executive Committee and members of staff will be limited to three (3) minutes when clarifying points or answering questions.

¹ In accordance with rule 20(iv) and with the exception of the casting vote of the conference chairperson, only delegates and members of the National Executive Committee may vote at conference.

8. Where several motions and/or amendments submitted deal with the same topic, Standing Orders Committee may produce a composite or comprehensive motion. If it is not possible to do this, there may be a common debate on the issue covered by the group of motions and/or amendments. The first speaker on behalf of the proposing branch or the first speaker on behalf of the DEC in the case of motions proposed by the DEC shall be deemed to be the proposer of the motion. Each proposer shall have a maximum of four (4) minutes. In the subsequent debate, no-one may speak more than once, but each speaker may refer to any of the motion(s)/amendment(s) then before conference, up to a maximum of three (3) minutes. Proposers of motions taken in common debate shall, subject to the discretion of the conference chairperson, have the right of reply but only in respect of the motion proposed by her/him and the right of reply shall be strictly confined to answering previous speakers on that motion and/or where clarification has been sought and the proposer shall not introduce any new matter into the debate. When the chairperson is satisfied that sufficient time has been allowed for debate, each motion and/or amendment shall be voted on separately in accordance with the relevant Standing Orders Committee report.
9. Amendments to amendments may not be moved, even under the terms of Rules 17(ix) and 21(ix) of the rulebook.
10. Except as otherwise provided, no member of conference shall speak to a motion more than once. For the purpose of this standing order, an amendment to a motion and a motion which has been amended shall each be considered to be a new motion.
11. Subject to the discretion of the conference chairperson, the proposer of a substantive motion, not in common debate, shall have a right to reply immediately before the motion is put to conference, provided that opposition has been expressed or clarification has been requested. However, the right of reply shall be strictly confined to answering previous speakers on that motion and/or where clarification has been sought and the proposer shall not introduce any new matter into the debate. The proposer of an amendment shall not have a right of reply.
12. The following types of motion may be moved at any time:
 - (i) Motion to “refer to the National Executive Committee or Divisional Executive Committee.” The chairperson of conference will then ask the proposer of the motion or amendment if s/he agrees. If not, there will be a short debate on the motion to refer, before conference decides the issue by voting. If the motion to refer is defeated, the original debate will continue.
 - (ii) Motion “that the question be now put.” This motion may only be put to conference if the chairperson is satisfied that a reasonable amount of time for debate has been allowed. If the chairperson is so satisfied, the motion shall be put without discussion.
 - (iii) Motion “that conference proceeds to next business.” After this motion has been moved the proposer of the motion/amendment under discussion has the right to speak briefly against the procedural motion, which shall then be put without further discussion. If it is defeated, debate shall continue on the original motion/amendment.
 - (iv) Motion to “suspend standing orders.” Such a motion shall state the purpose and period of time for which standing orders shall be suspended. This procedural motion must be passed by three- quarters of the delegates present and voting to be adopted.
13. If two or more members of conference wish to speak, the chairperson will call on the members whom s/he first observes, except that when a member of the Standing Orders Committee rises, s/he shall be the next to speak.
14. If, in the opinion of the chairperson, grave disorder has arisen, s/he may at her/his discretion, adjourn the meeting for a specified time.
15. Mobile phones may not be used in the conference hall while conference is in session.
16. No literature, other than conference documents - agenda, minutes, and reports - may be circulated in the conference hall without the express advance approval of conference by a simple majority of delegates present and voting.
17. No smoking or vaping is permitted in the conference premises.

Brief outline of proportional representation system as used for Fórsa DEC elections

There are various electoral systems used in different countries and organisations to achieve what are considered in those areas to be democratic outcomes. In Ireland, we have multi-seat constituencies with a system of proportional representation (PR) with transferable votes. This applies if your first (or second etc.) choice is not elected or is elected with a surplus of votes. The 'left over' votes are then transferred to other candidates of your choice. There are some differences between the PR system used for Dáil elections and those used for Seanad elections – where the Panel elections and University Seat elections use further variations of the PR system.

Fórsa decided to adopt an electoral system aligned to the Seanad Panel election system where each vote is treated as being equal to 1,000 votes. While the Fórsa system is designed specifically for NEC and DEC elections, it can be used for elections at branch and other levels. Branches and equivalent grade committees/national professional committees are, of course, free to use any of the other Oireachtas models of PR should they wish.

Ballot paper

In any election it is important that the ballot paper is accurate, with candidates listed in alphabetical order (by surname, then first name).

While the ballot paper may give instructions as to how to vote (e.g. mark, 1, 2, 3 etc. opposite each candidate in order of your choice), the ballot paper may not contain any advice or recommendation as to who to vote for.

All ballot papers should have security features. This applies especially where postal ballots are used or when voters have possession of ballot papers for a period before the vote. Security features could include a 'punched' watermark, different coloured ink/paper, signatures of returning officers and/or other features that make them difficult to reproduce.

The system of distribution of ballot papers must also ensure that only those eligible to vote receive ballot papers, and that nobody can receive more than one ballot paper. The ballot papers should be placed in a sealed box, which is stored safely until the count. Postal ballots received should be placed on arrival in the count center in a sealed container. It is essential that the ballot paper cannot identify the voter.

Returning Officer

A Returning Officer, preferably agreed, should be appointed in every case as decisions may be required in relation to:

- The validity of ballots;
- The order of distribution of surpluses; or
- The elimination of candidates; or
- In relation to requests for re-counts.

While the Returning Officer may be assisted by various scrutineers (vote counters), only the Returning Officer can make decisions. Everyone else is there to assist only.

Valid ballot papers

One of the first jobs of the Returning Officer is to identify any spoiled or invalid ballot papers. The latter includes 'forgeries' or any ballot paper that does not carry the security marks. All photocopies of ballot papers are considered to be invalid.

Spoiled votes are those where the ballot paper either does not contain any votes (but might include uncomplimentary remarks) or does not clearly indicate a preference (e.g. more than one candidate with the same preference or 'X' etc. marked against them). A ballot paper may be deemed valid for the first or second preferences but invalid for subsequent counts (e.g. ballot paper marked 1, 2, 3, 3, 3. This identifies the first two preferences but not subsequent preferences).

First count

All of the valid ballot papers are sorted into parcels according to first preference vote. Each ballot paper is given a value of 1,000.

The quota

The quota is calculated by adding all of the valid first preference votes and dividing that number by the number of places to be filled plus one (ignoring any fractions), and then by adding one to the result. For example, if the number of valid votes was 100,000 (100 votes at value of 1,000 each) and the number of seats to be filled was 4, the quota is 20,001 i.e. $[100,000 \div (4+1) + 1]$.

Once a candidate reaches or exceeds the quota, on the first or subsequent counts, that candidate is elected. It is not possible, using this quota system, for more candidates to be elected than the number of places to be filled.

Distribute or eliminate?

The biggest causes of confusion in the PR system are:

- To decide whether to distribute one or more surpluses or to eliminate the lowest candidate(s); and
- If a surplus is to be distributed, how to calculate this and which votes, physically, are transferred.

In one-seat elections, (e.g. union president, treasurer, chairperson of division), this is easy. If one candidate exceeds the quota (50% plus 1 in this case) s/he is elected. If no candidate reaches the quota, then the candidate with the lowest number of votes is eliminated. More than one candidate may be eliminated at the same time; if for example, the total of the bottom two candidates does not exceed the votes of the next highest candidate.

In the single seat election, the lowest placed candidates are eliminated in order and their second preferences (or third preferences etc., if their second preference candidates are already eliminated) are transferred until one candidate either reaches the quota or only two candidates remain in the race. In the latter situation the candidate with the highest vote is deemed to be elected without reaching the quota. The ballot papers to be physically transferred in the case of eliminated candidates are the actual ballot papers showing the next highest preference. Where there is no remaining preference, then the vote is non-transferable.

However, where there is more than one position to be filled, the position becomes more complex.

In multi-seat elections (e.g. union vice president, 'ordinary' DEC members), the likelihood is that a number of candidates will exceed the quota on the first count. The surpluses in these cases may be very small in each case. The issue for the Returning Officer is to decide whether to eliminate one or more candidates or whether to distribute the surplus(es).

The Returning Officer will distribute the surplus(es) where the total value of all surpluses to be distributed exceeds the difference in votes between the lowest two candidates. This may alter the order of these lowest candidates and in particular the order in they might be eliminated or moved up the list. The Returning Officer will ordinarily distribute all surplus(es), (where available) before anybody is eliminated. When each surplus is distributed the lowest candidate will be eliminated.

The order in which surpluses are distributed is as follows:

- The greatest surplus is distributed first;
- If there are two or more surpluses that are equal the first to be distributed is the surplus that arose on the earliest count;
- Where this is also equal the surplus to be first distributed is that of the candidate with the highest first preferences;
- If all of these are still equal, the first surplus to be distributed is that of the candidate who was first ahead of the other candidate at the first count at which they were unequal;
- If there was no such count (e.g. first count surplus only to be distributed) then the Returning Officer shall decide by lot* which surplus to distribute first.

The order in which candidates are eliminated is as follows:

- The candidate with the lowest vote (total original and transferred) is first eliminated;
- Where two or more candidates equally have the lowest vote, the candidate who is first eliminated is that who received the lowest first preference votes;
- Where these are equal, the first candidate to be eliminated is that which was lowest at the first count at which they were unequal;
- Where these are equal (or cannot arise, as in the first count) the Returning Officer can exercise judgement based on a scrutiny of the preferences cast, however if the judgement of the Returning Officer is that they are still equal s/he shall decide by lot* which of them is to be eliminated first.

Where the votes of the lowest two or more candidates together with the total surpluses to be distributed does not exceed the votes of the next highest candidate, these may all be eliminated together.

*For the avoidance of any doubt "by lot" means a first preference paper of each equal candidate is placed in a hat and one is drawn out. The remaining paper (NOT the paper that has been drawn out) is the candidate to remain in the election.

Physical transfer of ballot papers

Where a surplus is to be distributed, the number of second preference (or next highest preference votes if the second preference is already elected or eliminated and so on) is calculated and the ballot papers are placed in bundles by reference to the second (or next highest preference vote as the case may be). Non-transferable votes (if such exists) are placed in a separate bundle. A ballot paper is non-transferable if it does not indicate a preference for a remaining candidate (e.g. there may not be any second or later preference indicated or any such candidate(s) may be already elected or eliminated).

The value of each bundle of votes is calculated by assigning a value to each vote by reference to the proportion of the surplus votes (of the elected candidate whose surplus is being distributed). These bundles (of ballot papers) with the 'adjusted' value written on the top are then physically transferred to the bundle of the appropriate candidate's first and any other transferred votes.

Where a candidate is eliminated their second preference votes (or remaining preferences as appropriate) are transferred to the remaining candidate who is named next highest on their list of preferences. Each of these transferred votes (if original votes or votes already valued at 1,000 from other eliminated candidates) is valued at 1,000 each, exactly the value as if they were first preference votes. This does not apply where the eliminated candidates' votes contain original and transferred "surplus" votes.

The value of each of the transferred “surplus” votes in this case is based on the value allocated at the time of the transfer. The other original votes and preference votes (but not those not containing “surplus” votes- see last paragraph) transferred from other eliminated candidates are valued at 1,000 each.

Elected without reaching the quota

Where at the end of any count the number of remaining candidates equals the number of vacancies remaining to be filled, they are deemed to be elected even if they have not reached the quota.

Where there is only one vacancy remaining and the highest placed candidate cannot be overtaken by any other remaining candidate (even if the next highest placed candidate were to receive the total value of any undistributed surpluses and the votes of all candidates to be eliminated) then that candidate is deemed to be elected.

Result sheet

The Returning Officer should complete the result sheet as the election proceeds showing:

- (1) The total number of votes cast;
- (2) The number of spoiled votes;
- (3) The total valid poll;
- (4) The number of seats to be filled;
- (5) The quota;
- (6) The list of candidates and their votes, showing transferred votes etc., at each count.

This result sheet should be made available to all candidates and everyone else with an interest in the outcome of the election e.g. a copy could be posted in the count center, conference hall, etc. The Returning Officer will make the result sheet available to the candidates, and respond to any queries they may have, prior to making it available to others with an interest in the election.

Re-count

The conference election procedures do not specifically provide for re-counts.

However, the Returning Officer may at any time during the count require a re-count or re-check of some or all of the ballot papers if s/he has any reason to be concerned that an error may have been made.

There is no specific provision for candidates to seek a re-count either in part or in total. However, a Returning Officer would be required to have regard to any points made by candidates as to why a full or partial re-count should take place when deciding whether to order such a re-count, e.g. if a clear error was spotted, where in the judgement of the Returning Officer the votes are close enough for any possible error to have a material effect on any outcome.

It would generally be useful to agree the timescale within which candidates could seek a re-count. This is required for very practical reasons, including that the conduct or outcome of later elections may be dependent on the outcome of the election in dispute, e.g. at union conference the vice president elections are not held until the presidential and treasurer election results are known. The security of the ballot papers is also an important factor if there were delays in holding a re-count. As such, any requests for re-counts should preferably be made before the declaration of the results.

Fórsa conference election procedures

Rule 19 covers the Divisional Executive and its officers.

The election of the Chairperson or Cathaoirleach is straightforward. A standard PR STV election is conducted, and the winner is elected.

Following that election, any candidates from the winner's constituency for the positions of Vice Chairperson or Leas-Cathaoirleach are excluded from the election and any preferences voted for any such candidate move to the next preference.

May 2023

Standing Orders Report No.2

This report is a consolidated report including Standing Orders Committee Report No. 1.

1. Conference timetable

The foregoing timetable for conference is recommended.

2. General standing orders

The foregoing General Standing Orders are recommended.

3. Motions received

One hundred and nine (109) of the motions that were received by the deadline appear on the agenda for debate. Three (3) motions are deemed out of order; twelve (12) motions are advisory, and one (1) motion is existing policy.

4. Motions considered as out of order

Three (3) motions are considered as out of order for the reasons set out below.

Motions 123, 124 and 125 are statements and do not give instruction to Conference.

5. Advisory motions

In accordance with the rule, and until otherwise determined by national conference, each divisional conference shall determine policy on pay, conditions and other matters affecting only the members in the division. However, divisional conferences may also consider other matters provided that they are not matters which are of sole concern to the members of another division or which conflict with policy as previously determined by the union conference.

Decisions of divisional conference in relation to such matters have the status of recommendations to the National Executive who shall decide on any action to be taken.

Where a motion covers a matter that has, or could have, both divisional and central (i.e. more than one division) dimensions, it is recommended that unless the substance or text of that motion clearly requires otherwise, it should be presumed that it is intended by the proposers as a matter for action at divisional and not at central level within the union. As such, motions in this category would not be deemed to fall into the category of advice to the NEC. However, such motions cannot be portrayed as deciding anything other than divisional policy on the issues covered.

It should be noted that there is not an automatic carry over of Advisory Motions to Biennial Conference 2024. If your Branch so desires, in order to have the said motion considered by the SOC for National Conference 2024, it may be re-submitted when invited to do so under Rule next year.

6. Amendments received

No amendments were received.

7. Composite motions

There are no composite motions included on the agenda.

8. Common debates/cover motions

In view of the large number of motions, the other conference business, and to ensure that the maximum number of motions are considered by conference, the SOC is proposing that the following motions be taken in common debate.

Motions 66, 67 and 68

Motions 34 and 35

Motions 50, 51 and 52

Motions 7 and 8

Motions 10, 11, 12, 13 and 14

Motions 17, 18, 19, 20, 21 and 22

Motions 28 and 29

In addition, the SOC is proposing that decisions on some motions will be taken to cover other motions. Where this is recommended the subsequent motions will not need to be proposed at the conference.

Motion 1 covers motion 2

Motion 3 covers motion 4

Motion 45 covers motion 46

Motion 55 covers motion 56

Motion 98 covers motions, 99, 100, 101, 102 and 103

9. Guillotined motions

These will be taken during conference at the end of other sections if time permits, with the balance, if any, of guillotined motions being taken at the end of conference.

It is recommended that guillotined motions be taken in the order they were guillotined, with all guillotined motions in a section being completed before moving to the next set of guillotined motions.

10. Emergency motions

Branches are asked to advise the SOC of any emergency motions as soon as possible so that these might be included in a Standing Orders Committee report to conference. The union rules provide that motions or amendments not included in the final agenda cannot be considered at conference other than where two-thirds of the delegates agree to add a motion of which timely notice could not have been given (i.e. where it refers to events that have occurred since the final date for receipt of motions, 11 weeks before conference).

11. Withdrawal of motions

Branches are asked to advise the SOC of any motions that they wish to withdraw so that these can be included in a Standing Orders Committee report to conference. Forms are appended to withdraw motions and nominations at the rear of this booklet.

12. Officer elections and votes

Elections will be announced by the SOC as conference progresses.

The SOC recommends that Eileen Coman, SOC, be appointed as returning officer. It is recommended that conference appoints two scrutineers from each of the union's divisions to count ballot papers.

13. Withdrawal of nominations

There has been no withdrawal of nominations to date. Please use the withdrawal form which appears at the back of the agenda.

14. Conference votes

It is recommended that conference appoints at least 8 tellers to count any votes at conference.

15. Distinguished service awards

The NEC has approved distinguished service awards which will be presented before the conference closing business session on Wednesday 24th May.

16. Standing Orders Committee

The Standing Orders Committee for the Health & Welfare Division are Gerry Foley (Vice Chairperson) and Don Meskill. Also in attendance from the National Standing Orders Committee will be Eileen Coman (Returning Officer), Niamh Jordan and Michael Ross.

The SOC will be available to deal with last minute conference issues between 2:00pm and 3:00pm in the conference venue on Wednesday the 24th May.

Where branches or the DEC have queries or wish to seek changes to General Standing Orders or to SOC Reports they are asked to raise these in writing (soc@forsa.ie) with the SOC as soon as possible and in any event not later than one week prior to conference.

17. Corrections

Correction – paragraph 4 of SOC Report No. 1. The deadline for nominations and motions is under Rule 17(v) being the correct Rule for Divisional Conferences.

Motion 24 appears in Appendix 3 as it re-iterates existing policy.

18. Legend of acronymns

In order to preserve the integrity of what was submitted, acronyms and abbreviations are not amended and have been left as was submitted. To assist delegates and branches, a legend of acronymns that may be unfamiliar to them, is submitted below.

AHP	Allied Health Professional
AON	Assessment of Needs
BEC	Branch Executive Committee
CAMHS	Child and Adolescent Mental Health Services
CDNT	Children's Disability Network Teams
CHN	Community Health Network
DEC	Divisional Executive Committee
HSCP	Health and Social Care Professional
HSE	Health Service Executive
ICPOP	Integrated Care Programme for Older Persons
LSI	Long Service Increment
NEC	National Executive Committee
NHO	National Health Office
NRS	National Recruitment Service
OT	Occupational Therapist
PDS	Progressing Disability Service
RHA	Regional Health Areas
SCW	Social Care Worker
SLT	Speech and Language Therapist

Rose Marie Conroy
Chairperson
Standing Orders Committee

May 2023

Motions

Regional Health Areas (RHAs)

Motion 1 – Health and Welfare Divisional Executive Committee

This Conference notes the government approval for the next steps for the implementation of Regional Health Areas (RHA's) last April. We recognise the impact this may have on our diverse membership across the HSE and Section 38's.

The establishment of Regional Health Area's will be fundamental to delivering Sláintecare reform which is in line with the Oireachtas Committee on the Future of Healthcare Sláintecare Report that regional bodies should be accountable for the planning and delivery of integrated health and social care services.

It is intended that Regional Health Area will plan, fund, manage and deliver integrated care for people in their region as geographically aligned, regional sub-divisions of the HSE. They will provide for the integration of hospital and community healthcare services, creating better access to services closer to home.

The objectives of regionalisation are aligned with Sláintecare's overall aims and objectives and are intended to:

1. Increase the integration of community and acute services
2. Introduce a population-based approach to service planning
3. Improve clinical governance
4. Improve corporate governance and accountability

Conference therefore instructs the incoming Health & Welfare Divisional Executive:

- To ensure we establish a comprehensive consultative structure which encompasses all members across the HSE and Section 38s.
- To protect our members terms and conditions of employment throughout the implementation of RHA's.
- To ensure that any new RHA structure operates to the highest standard of recruitment practices and adhere to all collective agreements.
- To protect against the outsourcing of our members core work to private agencies and consultant contracts.
- To ensure the provision of health care remains in the public domain and to protect against the privatisation of vital services.
- To build consensus with the other health unions around these priorities.
- To ensure that where senior clinical roles, are identified in the new structure, that our members are given equity with colleagues from medical and nursing.

Conference also calls on the Health & Welfare Divisional Executive:

- To commission research into the viability, or otherwise, of the establishment of the Regional Health Areas on a statutory legislative footing.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 2 – Clare Health and Local Government Branch

This Conference calls on Forsa's incoming Health & Welfare Divisional Executive to ensure that HSCPs are given equity of roles and representation of their disciplines with medical and nursing colleagues and at all management levels within the Regional Health Areas.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 3 – Boards and Voluntary Agencies Branch

This Conference calls on the incoming divisional executive committee to support the creation of a regional HSCP Senior Management role at Regional Health level as a necessity for the strategic planning and coordination of safe, person-centred care in recognition of the diversity of HSCP roles across health divisions and clinical care programmes and the wide-ranging nature of HSCP practices.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 4 – Offaly Health and Local Government Branch

That this Conference calls on the incoming DEC to support the creation of a Regional HSCP Senior Management role at Regional Health level in 2023/2024 as a necessity for the strategic planning and coordination of safe, person centred-care in recognition of the diversity of HSCP roles across health divisions and clinical care programmes and the wide-ranging nature of HSCP practices.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 5 – Limerick Health and Welfare Branch

This Conference calls on the incoming DEC to engage with the HSE through the Joint Consultation forum in each of the Regional Health Areas to manage the transition to the new organisational structures.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 6 – Limerick Health and Welfare Branch

This Conference calls on the incoming DEC to support the motion that Internal Audit and equivalent corporate service departments be part of the new Regional Health Area Structures.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Pay, pensions and related

Motion 7 – Limerick Health and Welfare Branch

This Conference requests the incoming Health and Welfare DEC to continue to fight for the rights of TUSLA front line staff who have not been awarded the €1,000 Pandemic Special Recognition Payment but who continued to work with throughout Covid in line with their colleagues.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 8 – Tipperary South Health and Community Branch

That this Conference directs the DEC to pursue the pandemic payment for frontline Social Care Staff in Tusla. If payment continues to be refused the DEC is to ballot affected members.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 9 – Offaly Health and Local Government Branch

That this Conference calls on the incoming Health & Welfare DEC to negotiate as a matter of urgency with the HSE to establish fortnightly pay for Clerical/Administration staff on a national basis.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 10 – Dublin Health and Welfare Branch

This Conference calls on the incoming Health & Welfare Divisional Council of Fórsa to lobby on behalf of Health Workers and retirees that clauses be included in future pay deals to ensure there is room for sanction and penalty if the HSE or other Health Employers do not implement and pay those increases within four weeks after those increases are due.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 11 – Health and Welfare Divisional Executive Committee

This Conference calls on the incoming Health and Welfare Divisional Executive of Forsa to ensure that the HSE drastically improve on the leading times members are waiting to receive their retirement benefits.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 12 – Boards and Voluntary Agencies Branch

Conference notes that continued delays by the Health Service Executive in our members receiving their full entitlement upon their retirement. These continued delays are unacceptable.

Therefore, this Conference calls on the incoming divisional executive committee to ensure that members receive their full pensions entitlements upon retirement and that payments due under public service agreements are paid simultaneously to those in employment.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 13 – Tipperary South Health and Community Branch

That this Conference directs the DEC to immediately raise the issue of the unacceptable delay in payment of national pay awards to retired members (pensioners). Payment of pay awards should be paid when they are paid to all members. The cost of living affects retired members equally as much as it does those working full time consequently the ageist approach of the HSE and Dept. of Health is a disgrace.

This Conference directs the DEC to bring this delay and discrimination to the attention of the HSE and Dept. of Health urgently. This practice has to cease.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 14 – Wicklow Health Branch

This Conference calls on the incoming health and welfare executive to hold the HSE accountable for delays in pension payment which members are experiencing when retiring and the finance problems this can cause.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 15 – Cork Health and Local Government Branch

This Conference calls on the Health & Welfare Divisional Executive of the union pursue the expansion of Single Public Service Pension Scheme (Fast Accrual) terms (i.e., currently available to uniformed and judiciary) to those grades of Social Care working in residential alternative care settings, in view of the additional challenges and physical demands of that work which curtail average career length. This will also be a crucial offering to improve the recruitment and retention of social care staff in tandem with the expansion of public provision of residential alternative care.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 16 – Tipperary South Health and Community Branch

That this Conference directs the DEC to support equal application of Professional Added Years calculation, for all our HSCP Grades, ensuring parity with other professions afforded this consideration.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 17 – Wexford Health and Local Government Branch

This Conference calls on Fórsa's incoming Health & Welfare Divisional Executive to negotiate the introduction of Long Service Increments to follow the current final point of Senior Grade Health & Social Care Professionals salary scale.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 18 – Clare Health and Local Government Branch

This Conference calls on the incoming Divisional Executive Committee to negotiate the introduction of Long Service Increments to the Senior Grade HSCP (Chiropodist/Podiatrist Senior, Dietician Senior, Occupational Therapist Senior, Orthoptist Senior, Optometrist Clinical, Physiotherapist Senior, Speech And Language Therapist Senior, Play Therapist Senior) to follow the current point of nine point pay scale.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 19 – Galway Health and Local Government

This Conference calls on the incoming Health and Welfare executive committee to negotiate the implementation of a minimum of two long service increments at staff and senior therapist level of the profession of SLT, OT, Physio, Dietetics, Podiatry and Social Work.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 20 – Louth Health and Local Government Branch

This Conference calls on the incoming DEC to negotiate the implementation of two Long Service Increments at Staff and Senior Therapist level for the professions of SLT, OT, Physio, Dietetics, Podiatry and Social Work.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 21 – Offaly Health and Local Government Branch

That this Conference calls on the incoming DEC to negotiate the addition of a LSI at Staff Grade level and the introduction of LSIs at Senior Therapist level for the health and social care professions of SLT, OT, Physio, Dietetics, Podiatry and Social Work.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 22 – Tipperary South Health and Community Branch

That this Conference directs the DEC to seek the application of long service increments across all Therapy grades. Currently there are no LSI applied to Senior, clinical specialist and Manager grades. LSI should be also applied to these grades.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 23 – Tipperary North Health and Community Branch

That Conference calls on the incoming D.E.C to engage with the H.S.E to align salary scales for all grades, to include a long service increment.

I ask Conference to support this motion.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 25 – Offaly Health and Local Government Branch

That this Conference instructs the Health & Welfare DEC to negotiate with the HSE fair application of overtime rates. As per HSE HR Circular 31/2021, Clinical Grades and Support Staff receive Time + ½. Clerical/Administrative/Management Grades and analogous grades up to Grade VII receive Time + ¼ for the first 3 hours. The Offaly Branch of Fórsa is seeking parity by eliminating time + ¼ and replacing it with time + ½ for Clerical/Administrative/Analogous Grades.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 26 – Tipperary North Health and Community Branch

That Conference calls on the incoming D.E.C to pursue the H.S.E to increase the sessional rate for Dental Nurses. The sessional rate introduced in 2004 for a three hour session, outside of normal working hours of €67.37 has not been increased since it was introduced.

I ask Conference to support this motion.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 27 – Tipperary South Health and Community Branch

That this Conference directs the DEC to seek the payment of unsocial hour pay/twilight hours/shift pay to all workers in the health care sector working eight hour shifts or more over 24-hour periods.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 28 – Tipperary North Health and Community Branch

That Conference calls on the incoming DEC to request the standardisation of flat rate expenses for all HSPC's that would bring them in line with other Health Care Workers i.e Nurses. It is noted that Nurses receive €733, Occupational Therapists receive €217 and Physiotherapists €381.

I ask Conference to support this motion.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 29 – Wexford Health and Local Government Branch

This Conference calls on the incoming DEC to advocate for equitable access to flat rate expenses for all HSCP grades.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Community and Voluntary Sector pay

Motion 30 – Health and Welfare Divisional Executive Committee

This Conference notes the vital services that continue to be delivered across the Section 39's, Section 56's and Section 10's. It further notes the continued industrial campaign by the divisional executive to secure sufficient funding to return and restore the pay linkage with the public service.

This Conference calls on the incoming divisional executive to ensure that they reach agreement that mirrors the terms of the public service agreement and restores pay in line with their colleagues in the public service. That any agreement reached will ensure the continue linkage for pay purposes between the public service and these agencies.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 31 – Galway Health and Local Government

This Conference commends the successful beginning of Fórsa’s campaign for pay parity for members in the Section 39s and community and voluntary sectors. Conference calls on the incoming Health and Welfare executive committee to continue to prioritize this campaign until it is successful in delivering pay parity for our members in this sector.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Recruitment and retention issues

Motion 32 – Limerick Health and Welfare Branch

This Conference instructs incoming Health and Welfare DEC to ensure all recruitment by HSE is overseen by HR and fair procedures are followed.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 33 – Dublin Hospitals Branch

This Conference calls on the incoming Health and Welfare Divisional Executive to actively campaign to ensure the HSE provide mandatory feedback following a competency-based interview from HR or Departmental Head, which should include applicant’s effectiveness during the interview.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 34 – Kildare Health Branch

This Conference calls on the Divisional Executive to request an urgent plan to address retention and burnout amongst Allied Health Professionals in our health services.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 35 – Offaly Health and Local Government

That this Conference calls on the incoming DEC to engage with the HSE on the immediate creation of a formal policy in relation to the retention of HSCP’s in community services.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 36 – Boards and Voluntary Agencies Branch

That this Conference calls on the incoming Divisional Executive Committee to request the NHO, as a priority, engage with the HSE on the creation of a formal policy in relation to the requirement of HSCP to cover posts vacant due to the HSE failure to retain and recruit HSCP in community services.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 37 – Cavan Health and Local Government Branch

That this Conference calls on the incoming Divisional Executive Committee to negotiate with Health and Welfare employers to seek revised terms of reference for promotional panels, so that a panel remains in place until all persons on the panel are offered a post.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 38 – Cavan Health and Local Government Branch

This Conference calls on the incoming Divisional Executive Committee to negotiate with Health and Welfare employer organisations to seek the re-establishment of Transfer Panels.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 39 – Wexford Health and Local Government Branch

This Conference calls on FORSA's incoming Health and Welfare Divisional Executive to engage with the HSE on the immediate creation of a formal policy in relation use of the transfer list for upcoming vacancies.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 40 – Clare Health and Local Government Branch

This Conference calls on Fórsa's incoming Health & Welfare Divisional Executive to seek Slaintecare Investment to increase staffing in Primary Care, both clinical and administrative, along with essential training, in order to effectively implement the National Access Policy across all community networks to meet the needs of children who are now to receive their care from Primary Care instead of Disability services following the introduction of the Progressing Disability Strategy.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 41 – Cork Health and Local Government Branch

This Conference calls on the Health & Welfare Divisional Executive of the union shall additionally engage with the Child & Family Agency around recruitment and retention of social work and social care staff with specific reference to the emerging crisis in the supply of residential and general fostering alternative care placements which is also driving elevated levels of staff turnover in the Agency.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 42 – Dublin South Health and Welfare Branch

The Dublin South Health and Welfare Branch notes that Unions and Government/public sector employers are due to negotiate a new public sector pay deal later this year. Conference notes the current levels of staff vacancy being experienced within Tusla – Child and Family Agency and believes that this needs to be addressed in those negotiations. The current crisis in recruitment and retention of front-line social workers and social care workers within Tusla – Child and Family Agency is leading to workers being expected to carry increased and unsustainable caseloads. The high number of vacant posts will also significantly increase the risk to children and families in the community as there will not be sufficient staff to address concerns about children or to meet the needs of children already in the care of the Agency. This Conference calls on the incoming Divisional Executive Committee to seek a full evaluation of the grade structure, roles and responsibilities of social work and social care work posts within Tusla – Child and Family Agency with the aim of separating the Tusla Child and Family Agency pay-scales from the HSE pay-scales in order to allow the complexity of the work undertaken by staff within Tusla – Child and Family Agency be recognised and appropriately recompensed.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 43 – Limerick Health and Welfare Branch

This Conference requests the incoming DEC to request that new entrants coming into the HSE, grades 3-7 serve a minimum of two years prior to being given the opportunity to go forward for promotion. This is to allow them sufficient time to learn the correct practice of the job and reduce the unfair practice of promotion of family members and friends who have just joined the establishment.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 44 – Boards and Voluntary Agencies Branch

That this Conference, calls on the incoming divisional executive committee, as a priority, request the NHO to mandate the provision of exit interviews by HSE HR HSCP staff leaving posts and careers across all health divisions, so as to obtain the feedback and insight vital to retaining these clinically experienced HSCP.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 45 – Offaly Health and Local Government Branch

That this Conference calls on the incoming DEC to immediately engage with the HSE for the provision of exit interviews by HSE HR for HSCP staff leaving posts and careers across all health divisions, so as to obtain the feedback and insight vital to retaining these clinically experienced HSCP.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 46 – Wexford Health and Local Government Branch

This Conference calls on Fórsa's incoming Health and Welfare Divisional Executive to immediately engage with the HSE for the provision of exit interviews by HSE HR for HSCP staff leaving posts and careers across all health divisions, so as to obtain the feedback and insight vital to retaining these clinically experienced HSCP's.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Job evaluation scheme

Motion 47 – Dublin Hospitals Branch

This Conference calls on the incoming Health and Welfare Divisional Executive to actively campaign the HSE on the job evaluation scheme and encourage provision of an accessible webpage with the aim to show each step of the process for the applicants online.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 48 – Dublin North Health and Welfare Branch

This Conference calls on the incoming Health & Welfare Divisional Council of FORSA to prioritise the job evaluation applications received from Members who are due to retire within five years after they have submitted their applications. These applications should then be prioritised and processed in the same manner as Clerical Officer applications. The job application form should then be amended to facilitate this.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 49 – Kildare Health Branch

This Conference calls on the DEC to take additional measures to end the current backlog in Job Evaluations in the Health Service as soon as possible.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Career pathway

Motion 50 – Tipperary South Health and Community Branch

That this Conference affirms its disappointment at the glacial progress of the Career Pathway Review initially agreed in 2020 and calls on the DEC to continue to priorities implementation of career pathway review. If necessary to ballot all affected members.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 51 – Louth Health and Local Government Branch

This Conference calls on the incoming DEC to implement the HSCP Expert Group Review (2021).

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 52 – Louth Health and Local Government Branch

This Conference calls on the incoming DEC to ensure the staff grade to senior conversion process is expanded beyond primary care.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 53 – Clare Health and Local Government Branch

This Conference calls on Fórsa's incoming Health & Welfare Divisional Executive to achieve a reasonable baseline of 15% Clinical Specialist/Advanced Practice positions across Health & Social Care Professions in order to address the crisis in retention issues and ensure effective, quality and evidences based practice across our health service.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 54 – Clare Health and Local Government Branch

This Conference calls on Fórsa's incoming Health & Welfare Divisional Executive to negotiate with the employer a mechanism such as job evaluation by which Health & Social Care Professionals who are functioning at the level of Clinical Specialist can be recognised for their specialist practice.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 55 – Kilkenny Health and Local Government Branch

That this Conference calls on the incoming Health and Welfare Divisional Executive of Fórsa to support the inclusion of HSE Dental Hygienists in the automatic progression to senior level after five years of full time service for health and social care professionals.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 56 – Tipperary South Health and Community Branch

That this Conference directs the DEC to seek for the inclusion of HSE Dental Hygienists in the automatic progression to senior level after five years of full-time service for Health and Social Care Professionals.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 57 – Tipperary North Health and Community Branch

This Conference calls on the incoming D.E.C to seek inclusion of all HSPC's in the career pathway process.

I ask Conference to support this motion.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 58 – Tipperary South Health and Community Branch

That this Conference direct the DEC to fully and immediately support the Workforce Review currently being undertaken by Clinical Measurement Physiologists with all powers available to them. Furthermore, that this Fórsa Executive Committee are on stand-by to act in the best interests of the Workforce Review when called upon by the National Professional Committee.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

General terms and conditions of employment

Motion 59 – Health and Welfare Divisional Executive Committee

On 1st January 2014, the functions of child protection and welfare services of the HSE, National Educational Welfare Board and Family Support Agency transferred to Tusla Child and Family Agency. The staff performing those functions also transferred to the employment of Tusla. They did so with the protection of existing terms and conditions of employment. In addition, all pre-existing HR policies, procedures, and agreements transferred to the Agency. This is enshrined in the 2013 “Framework Agreement” signed between IMPACT (Fórsa), Tusla, and the Department of Children and Youth Affairs (DCYA).

The job evaluation scheme for clerical administrative members in grade III to VI is one such agreement. In 2020, Tusla withdrew from the scheme under instruction from its parent department the Department Children, Equality, Disability, Integration and Youth (formerly DCYA). Conference notes that Fórsa continues to fight for its re-introduction through the Workplace Relations Commission and the Labour Court.

This Conference calls on the incoming Divisional Executive (DEC) to ensure that:

- All of terms of the “Framework Agreement” are maintained and honoured
- Any changes to policies and procedures will only be by consultation and agreement with Fórsa
- Any further attempts to unilaterally change the terms of the Framework Agreement or any of the existing policies, procedures, and agreements with Fórsa will be resisted and responded to in the strongest possible terms.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 60 – Health and Welfare Divisional Executive Committee

This Conference calls on the incoming Health and Welfare Divisional Executive to review all Civil Service Circulars and to ensure that they are transposed to the Health Sector in circumstances where the circular grants a more beneficial arrangement than what is currently in existence.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 61 – Ballinasloe Branch

This Conference calls on the incoming Divisional Executive Committee to request the HSE to develop a National policy recognising menopause as a legitimate contributor to ill health and the necessity for special commendation during this time in an individual's working time.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 62 – Kildare Health Branch

This Conference calls on the incoming DEC to seek an immediate review of sick leave and critical illness policies in the health sector, with cognisance of additional pressures experienced by health workers throughout the Covid crisis and beyond. This review should include consideration of a broadening of the grounds for granting extended paid critical illness sick leave on the basis of medical certification, while lessening a reliance on managerial discretion.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 63 – Limerick Health and Welfare Branch

This Conference calls on the incoming Health & Welfare Divisional Executive to secure an agreement with the Health Service Executive to ensure the maximum level of internal promotions, for our members Grade IV and above. This agreement should be equal to or above the ratios in operation across the wider civil and public service. This will ensure our members are given a fair and balanced opportunity for promotion.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 64 – Wexford Health and Local Government Branch

This Conference calls on the incoming DEC to support any applications to the HSE, for the creation of a grade code for Dietetic Assistant which is not currently recognised in the HSE consolidated pay scales.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 65 – Wexford Health and Local Government Branch

This Conference calls on the incoming DEC to pursue a bespoke workforce review and development of a National Roadmap (report) for Dietetics.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 66 – Galway Health and Local Government Branch

Conference calls on the incoming Health and Welfare divisional executive to secure safe staffing ratios for all HSCPs.

This Conference asks Fórsa to investigate whether there is a requirement to introduce these ratios on a statutory basis i.e through legislation.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 67 – Clare Health and Local Government Branch

This Conference calls on Fórsa's incoming Health & Welfare Divisional Executive to engage with the employer to establish a safe staffing ratio of clinician to caseload for Health & Social Care professions.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 68 – Wexford Health and Local Government Branch

This Conference calls on Fórsa's incoming Health & Welfare Divisional Executive to secure safe staffing ratios for all HSCPs. This conference asks Fórsa to investigate whether there is a requirement to introduce those ratios on a statutory basis, i.e. through legislation.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 69 – Louth Health and Local Government Branch

This Conference calls on the incoming DEC negotiate Continuous Professional Development (CPD) funding and training opportunities for HSCPs be allocated in line with the funding and opportunities available to nursing and medical colleagues.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 71 – Louth Health and Local Government Branch

This Conference calls on the incoming DEC ensures rotation of staff grade physiotherapists continues irrespective of changes to line management (in CDNTs and temporary structures in CHNs), and that this rotation of staff remains the sole responsibility of the Physiotherapy Manager. This rotation is essential for the development of staff grades across all clinical areas.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 71 – Tipperary North Health and Community Branch

That Conference calls on the incoming DEC to request the H.S.E to provide equal pay for Addiction Councillors to that of Councillors with the same qualifications as Addiction Councillors but who work in different roles in the H.S.E, but are on a higher wage scale.

I ask Conference to support this motion.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 72 – Tipperary South Health and Community Branch

That this Conference instructs the DEC to negotiate with immediate effect that Health Sector employees to get on par Bereavement Leave entitlements as those that the Civil Service have obtained. Specifically, we seek to have the arrangements under Circular Title-Bereavement Leave in the Civil Service Circular number - 01/2017, File Reference - DPE202-020-2016 applied to the Health Sector.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 73 – Tipperary South Health and Community Branch

That this Conference directs the DEC to work with management to clearly define the roles and responsibilities, of each grade of Care Assistant, Health Care assistant, SCW, in Section 38 organisations, and the HSE, and other organisations, etc to ensure an appropriate number of managers and grades of a higher responsibility, and so increase the promotional opportunities in social care, whilst also protecting members doing the work of a higher grade whilst not getting paid the rate for this work. If effected this will ensure a proper system of accountability whilst giving protection to service users.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 74 – Westmeath Health and Local Government Branch

This Conference calls on the Health divisional executive to protect the pay rights of all frontline Health and Welfare staff.

Currently, many TUSLA frontline staff who are injured at work are only supported by 5/8 of salary in their pay, which affects end of career pension, personal dignity and their wellbeing.

Currently, Tusla employees only receive full pay and have medical expenses reimbursed if the injury is covered by the serious physical assault scheme, which defines the injury as an intentional direct assault by the service user. Similar restrictions apply in other employments such as HSE and s.39 organisations

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 74 – Tipperary South Health and Community Branch

That this Conference directs the DEC to ensure that parity of pay and work conditions, between Social Care grades and nursing grades, which has been the operating system for establishing pay and working conditions for Social Care grades for decades, is maintained.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 76 – Kildare Health Branch

This Conference calls on the DEC to initiate a survey of workers in the Health Service in relation to workplace bullying, with a view to using the collected data to tackle the ongoing problem more vociferously.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 77 – Tipperary South Health and Community Branch

That this Conference direct the DEC to instruct all Forsa paid and voluntary representatives to do their utmost to ensure the Dignity at the Work Policy for the Public Service is fully adhered to in the HSE, and all health service agencies. The policy states that Mediation is the preferred method under the Dignity at Work policy for resolving complaints of bullying and harassment. Union representatives must be instructed to ensure that an option of accessing a Mediation Service by trained mediators is offered to employees participating in the Complaints procedure under this policy.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 78 – Limerick Health and Welfare Branch

This Conference calls on the incoming DEC to request that the Joint consultation forum review the French Employment Code with the objective of identifying the sections that would benefit Irish Health Care Workers.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 79 – Limerick Health and Welfare Branch

This Conference calls on the incoming DEC to request that the National Joint Union Forum raise the matter of a joint union campaign with the assistance of all healthcare unions to promote a positive working culture in the health service for all workers.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

CHN model and related

Motion 80 – Health and Welfare Divisional Executive Committee

This Conference notes the agreement reached between the HSE and Fórsa in 2018 under the auspices of the Workplace Relations Commission in relation to CHO Networks and Operating Model.

This Conference further notes that since 2018 there has been significant engagement between the HSE and Fórsa on the agreement guided by previous decisions of the 2019 and 2021 divisional conferences.

This Conference calls on the incoming Divisional Executive Committee to seek the full implementation of all aspects of the above-named agreement before the establishment of the Regional Health Areas.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 81 – Clare Health and Local Government Branch

This Conference calls on Fórsa's incoming Health & Welfare Divisional Executive to secure the retention of line management functions and responsibilities for both Health & Social Care Professionals within their discipline and Administration Grades beyond Grade 7 facilitating equity of career progression for these groups to Senior managerial roles within current Community Health Organisations & Acute Hospital groups and from 2024 in Regional Health Areas.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 82 – Louth Health and Local Government Branch

This Conference calls on the incoming DEC to ensure the continued line management function of HSCP grades be maintained within the discipline in new and developing services such as ICPOP and Chronic Disease.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 83 – Louth Health and Local Government Branch

This Conference calls on the incoming DEC to insist that no permanent agreements are made re line management of HSCP grades in CHN unless nursing grades are aligned to the CHN model along with HSCP colleagues, as an alternate line management structure for nurses cannot be accepted as a permanent arrangement as this is putting HSCP grades and the services they provide at a disadvantage.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 84 – Louth Health and Local Government Branch

This Conference calls on the incoming DEC to insist that all recruitment for HSCP grades remains the remit and responsibility of managers within the discipline to ensure staff recruited are of high standard and clinically trained in area being recruited to.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 85 – Tipperary South Health and Community Branch

That this Conference direct the DEC to immediately and effectively engage with the HSE to gain immediate and full consultation for Clinical Measurement Physiologists role in relation to Community Healthcare Networks, alias Community Hubs. Specifically, agreement to be reached on appropriate grade structures, job descriptions and overall reporting structure within the Hubs with a focus on stopping job encroachment.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 86 – Wexford Health and Local Government Branch

This Conference calls on Fórsa's incoming Health & Welfare Divisional Executive to secure the retention of line management functions and responsibilities for both Health & Social Care Professionals within their discipline facilitating equity of career progression for these groups to Senior managerial roles within current Community Health Organisations & Acute Hospital groups and from 2024 in Regional Health Areas.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Children's Disability Network Teams (CDNTs)

Motion 87 – Waterford Health and Local Government Branch

This Conference notes that there have been significant issues with the reconfiguration of Children's Disability Services under the national programme "Progressing Disabilities Services for Children and Young People" (PDS). There have also been significant issues about the AON protocol following a legal challenge in the High Court.

This Conference acknowledges the work of the outgoing Divisional Executive Committee and Fórsa staff on this issue over the last two years.

This Conference calls on the incoming Divisional Executive Committee to

- Continue to support workplace reps across the CDNTs and HSCP National Professional Committees on all issues related to PDS and AON.
- Continue to participate in the Joint Union Management IR Forum established under the auspices of the WRC.
- Prioritise an independent review of the reconfiguration process.
- Engage with parent campaign groups to identify issues of common struggle.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 88 – Tipperary South Health and Community Branch

That this Conference commits to resolving the current difficulties with the retention of staff in the Children's Disability Network Team in Clonmel, (CDNT5). Members working in the service believe that this is due to the ongoing systemic problems with implementing Progressing Disability Services. This conference calls on the incoming DEC to assist members in resolving this issue as quickly as possible.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Privatisation

Motion 89 – Offaly Health and Local Government Branch

That this Conference calls on the incoming Health & Welfare DEC to negotiate as a matter of urgency with the HSE NRS to insource the recruitment services for Clerical Administration and HSCP staff. It is unacceptable that HSE NRS continue to outsource recruitment to Private Sector Recruitment Companies who have provided an intransigent, inefficient, inflexible, and unaccountable service to interview candidates and boards. By outsourcing services, a dangerous precedent has been established, the HSE national HR function has been undermined and diluted, this needs to be stopped at the earliest juncture.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 90 – Cork Health and Local Government Branch

This Conference calls on the Health & Welfare Divisional Executive of the union shall adopt a policy position that there should be no involvement by for-profit agencies/companies/entities howsoever described in the provision of alternative care to children who are in care of the state. The Child & Family Agency's own targets, to achieve 60% public provision in residential care by 2027, and to review the use of private (i.e. for-profit) foster care providers before 2025, should be more ambitious.

While cognisant of a realistic timeline to achieve same, the union position should be that Child & Family Agency targets ought to be 100% public provision across all strands of alternative care (whether fostering or residential), however long that takes.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 91 – Limerick Health and Welfare Branch

This Conference calls on the incoming DEC to request that the Joint Consultation forum seek to establish the amount of the health care budget that is being spent on for profit organisations. This information could be used to protect health workers jobs from the threat of health care privatisation.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Organisation and development

Motion 92 – Clare Health and Local Government Branch

This Conference calls on Fórsa's incoming Health & Welfare Divisional Executive to support Health & Social Care Professionals to unite, organise and strengthen their voice and influence on the development of their professions in order to achieve better standards of care and improved outcomes for services users and increased opportunities for career progression within their clinical area of expertise.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 93 – Galway Health and Local Government Branch

Health and Social care professionals are the second largest clinical workforce within the Irish health service, however the range and variety of their roles is much misunderstood by the public. This Conference calls on the incoming Health and Welfare executive committee to continue its media campaign to highlight the range of work done by Health and Social Care professionals in the Irish health service and on improving the recognition of their roles.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Statutory regulation

Motion 94 – Health and Welfare Divisional Executive Committee

This Conference notes that many of the HSCP groups represented by Fórsa are designated/ due to be designated for regulation by CORU (Ireland's multi profession regulator) and acknowledges that statutory regulation brings additional needs for those professions regulated.

This Conference further notes that CORU intends to open a register for current Social Care Workers on the 30th November 2023 for a period of two year (a process known as grandparenting).

This Conference calls on the incoming Divisional Executive Committee to:

- Devise a national plan to support Social Care Staff throughout the two-year grandparenting process.
- Continue to engage with CORU on a quarterly basis to address issues of common concern.
- Engage with the health sector employers to agree a policy that supports professionals to participate in the various CORU boards and committees.
- Engage with the health sector employers to secure a policy of workplace supports for staff who are subject to a fitness to practise complaint.
- Lodge a claim with the health sector employers for a meaningful CPD framework and funding for all HSCP based on the principles of equity with other clinical professionals in the health service.
- Support members who are in professions not designated for regulation to lobby for designation.
- Ensure that the CORU fee continues to be capped by the Public Service Agreement at €100.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 95 – Boards and Voluntary Agencies Branch

This Conference calls on the incoming Divisional Executive Committee to recognise that youth work can play a crucial role in shaping young people's lives on a daily basis. Our work involves multi-disciplinary teams to support young people who are exhibiting behaviour that causes offending, mental health issues, early school leaving who drop out of the education system/training.

Youth work provides the opportunity to allow young people to grow and develop in a different environment which may change the course of their life.

We call on the incoming Divisional Executive Committee to engage with the relevant bodies to ensure that Youth Workers, as trained professional body, are brought in line with the CORU.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Department of Health Expertise

Motion 96 – Health and Welfare Divisional Executive Committee

This Conference notes that in December 2022, a Chief HSCP role within the Department of Health was announced. Conference commends the work of Fórsa activists and staff in campaigning for this role over the last 10 years and in particular the publication of Fórsa's position paper on the need for a Chief HSCP.

This Conference acknowledges that while the establishment of this post was a welcome step in the right direction, we remain concerned that the post is temporary in nature and not graded appropriately.

This Conference calls on the incoming Divisional Executive Committee to lobby for the role to be made permanent and to be graded appropriately at the level of the Chief Nursing Officer and the Chief Medical Officer.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 97 – Louth Health and Local Government Branch

This Conference calls on the incoming DEC to continue to lobby the leadership with the Department of Health for a permanent Chief HSCP Advisor post remunerated in line with Chief Nursing Officer. This Chief HSCP Advisor should be separate from the Health Employer with a reporting structure directly to the Minister.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 98 – Wexford Health and Local Government Branch

This Conference calls on the incoming DEC that in line with Medical, Nursing and Health and Social Care professions we request the Health & Welfare division to seek the appointment of a Chief Pharmacist in the Department of Health to develop policy in relation to strategic workforce planning and advance practice for pharmacists. The role and input of pharmacists in the state funded health services is significant and requires specific policy input to support planning, integration, and strategic development of the profession.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 99 – Louth Health and Local Government Branch

In line with Medical, Nursing and Health and Social Care professions this conference requests the Health & Welfare division to seek the appointment of a Chief Pharmacist in the Department of Health to develop policy in relation to strategic workforce planning and advance practice for pharmacists. The role and input of pharmacists in the state funded health services is significant and requires specific policy input to support planning, integration, and strategic development of the profession.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 100 – Mayo Health and Local Government Branch

In line with medical, nursing and health and social care professions this Conference requests the Health and Welfare divisional executive committee to seek the appointment of a Chief Pharmacist in the Department of Health to develop Policy in relation to strategic workforce planning and advance practice for Pharmacists. The role and input of Pharmacists in the State funded health services is significant and requires specific Policy input to support planning, integration, and strategic development of the profession.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 101 – Offaly Health and Local Government Branch

That this Conference calls on the incoming DEC to seek the appointment of a Chief Pharmacist in the Department of Health to develop policy in relation to strategic workforce planning and advance practice. The role and input of Pharmacists in the state funded health services is significant and requires specific policy input to support planning, integration, and strategic development of the profession.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 102 – Waterford Health and Local Government Branch

In line with Medical, Nursing and Health and Social Care professions Conference requests the Health & Welfare division to seek the appointment of a Chief Pharmacist in the Department of Health to develop policy in relation to strategic workforce planning and advance practice for pharmacists. The role and input of pharmacists in the state funded health services is significant and requires specific policy input to support planning, integration, and strategic development of the profession.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 103 – Dublin Hospitals Branch

This Conference calls on the incoming Health and Welfare Divisional Executive to request that the Department of Health reinstate a Pharmacist in the Position of Chief Pharmacist.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Public policy

Motion 104 – Health and Welfare Divisional Executive Committee

Conference notes with concern the recent anti-immigrant protests over the last period. It welcomes Fórsa's decision to (1) to support the Ireland for All rally (2) Work with Le Cheile, a broad based cross-sectoral alliance working together to promote diversity in Irish society and challenge the nascent and dangerous far right.

Conference notes that many Health employees, and Fórsa members, come from a wide range of ethnic and cultural backgrounds. These members are essential to a functioning health service in Ireland.

Conference calls on the incoming DEC to discuss with other health trade unions and health management initiatives that oppose the spreading of hate, fear and misinformation about refugees and asylum workers.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 105 – Boards and Voluntary Agencies Branch

This Conference calls on the incoming divisional executive committee to support a call for the reduction in VAT similar to that in the hospitality sector for those in the community, youth and disability sectors as they are increasingly struggling to provide food and services to some of the most marginalised and vulnerable in our society on a daily basis with the impact of rising inflation and no increase in funding to these services with additional VAT contributing excessively to their overall budgets .

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 106 – Clare Health and Local Government Branch

This Conference calls on Fórsa's incoming Health & Welfare Divisional Executive to address the gaps in service provision to vulnerable client groups by seeking investment and allocation of Senior & Clinical Specialist Speech & Language Therapy posts to Specialist teams eg: Chronic Disease, Adult Mental Health, Adult Intellectual Disability, Community Intervention, Child & Adolescent Mental Health and CAMHS Intellectual Disability teams.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 107 – Dublin Hospitals Branch

This Conference calls on the incoming Health and Welfare Divisional Executive to engage with Department of Health and the HSE to promote the anti-racism policy in the workplaces and across all sectors within the health service.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 108 – Kildare Health Branch

This Conference calls on the DEC to highlight with the Health Service the necessity to prioritise environmentally friendly practices across HSE facilities, including consideration of carbon neutral paints and concrete for building and maintenance.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

4 day week

Motion 109 – Clare Health and Local Government Branch

This Conference calls on Fórsa's incoming Health & Welfare Divisional Executive to request that Clare Community Healthcare services are selected to pilot & test the concept of a four-day working week instead of 35 hours over five.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

Motion 110 – Dublin Hospitals Branch

This Conference calls on the incoming Health and Welfare Divisional Executive to actively campaign the HSE for a shorter four-day working week and work towards introducing a pilot scheme with the HSE.

Withdrawn ☐ Amended ☐ Carried ☐ Not Carried ☐ Remitted ☐

APPENDIX 1

Motions considered to be out of order

Motion 123 – Laois Health and Local Government Branch

That this AGM supports calls for the development of 'Safe Harbour' legislation, which would provide liability protection to workers where, in situations of proven high work loads, low resources, and excessive demands from management, workers would not find their professional registration coming into question, should they, due to the aforementioned constraints, not be able to work to reasonable safe standards.

Under Texas law, Safe Harbour, a process that protects a nurse from employer retaliation, suspension, termination, discipline, discrimination, and licensure sanction when a nurse makes a good faith request for a nursing peer review of an assignment or conduct that the nurse is asked to perform, and that the nurse feels will jeopardise her registration. Basically, it allows a nurse but I want it introduced in Ireland and to extend it to all workers who are registered to be allowed refuse an assignment in good faith. This is not an option in any current legislation. As an example, say I work in one area of social work and I was asked to go and work in another that I believed I did not have the skills to work in, I would be allowed to say no and request a peer review. That's not currently available in legislation. In the past, it would have happened to a worker.

A similar motion was discussed and passed at the Irish Association of Social Workers AGM last year.

Motion 124 – Tipperary South Health and Community Branch

Motion That this AGM reaffirms that motions put forward by the South Tipperary Branch and adopted as union policy by national conference in the past, from this year forward, will become operational, whether to enact or pursue.

Motion 125 – Tipperary South Health and Community Branch

That this AGM states that the PRD/ASC which was introduced under FEMPI legislation, (PRD on 1st March; ASC on 1st January, 2019), that in 2022 it is time for this to be undone.

APPENDIX 2

Motions deemed advisory to the National Executive Committee

Motion 111 – Cavan Health and Local Government Branch

That this Conference notes with concern the Health Service employers have re-introduced the use of psychometric testing, when recruiting, as a means of short listing for interview. This Conference calls on Fórsa to engage with employers to seek that applicants who are already working for such an employer, are not required to undertake this testing.

Motion 112 – Dublin Hospitals Branch

This Conference calls on the incoming Health and Welfare Divisional Executive to engage on the Government to ensure that all elements of our Renewable Energy's planning and delivery systems are speedily and properly resourced in terms of staff numbers and expertise.

Motion 113 – Dublin South Health and Welfare Branch

The Dublin South Health and Welfare Branch calls on the incoming Divisional Executive Committee to continue its solidarity and support for Refugees and international protection applicants. In furtherance of this objective, the Dublin South Health and Welfare Branch calls on the incoming Divisional Executive Committee to run an awareness campaign in the workplaces of all health and social care members to counteract the lies, mistruths and scare mongering currently being peddled by far-right and fascist movements. These movements have been seeking to exploit discontent at Government policy to turn communities impacted by the general lack of housing and inadequate social service provision against those seeking sanctuary in our land. It should also be noted that many members of this branch are themselves migrants to Ireland and indeed some commenced their journey seeking the safety and security, which this country offers. This Conference stands against fascism and the racist nativist ideologies the adherents of this dangerous movement seek to spread.

Motion 114 – Limerick Health and Welfare Branch

Limerick Health & Welfare Branch instruct the incoming H&W DEC to ensure that access to blended working is applied in a fair and transparent fashion for all Fórsa members employed in clerical and administration grades (III to VII) or equivalent.

Motion 115 – Mayo Health and Welfare Branch

That calling on this Conference to address the disparities in mileage Community Occupational therapist have to cross cover out of their Geographical area due to vacant posts/maternity leave/sick leave. Travel and subsistence is derived from the Civil Service Circular. The sliding scale for travel should not be acceptable to the Health Service which is 100% essential and therefore unavoidable. OT and other Allied Health Professions are penalized by the lower rates saving the HSE money. I am calling on Conference to support this motion.

Motion 116 – Tipperary South Health and Community Branch

That this Conference directs the DEC to form as part of upcoming Public Sector Agreement negotiations a union membership incentive. Specifically, to seek an agreement that all Fórsa member grades be issued a Fórsa membership packet at the onset of their employment in the Public Sector.

Motion 117 – Tipperary South Health and Community Branch

That this Conference directs the DEC to negotiate in the immediate future that all working unsocial/Twilight Hours be in receipt of That Twilight Hour Payment/Unsocial Hours payment, regardless of location of work or job title.

Further to this, that the DEC negotiate in the immediate future that all Fórsa members are in receipt of the best available entitlements with regards to overtime payment calculation rates.

Motion 118 – Tipperary South Health and Community Branch

That this Conference directs the DEC that in the upcoming negotiations on a new Public Service Agreement Fórsa make the removal of the temporary tax, the Universal Social Charge a key demand.

Motion 119 – Tipperary South Health and Community Branch

That this Conference direct the DEC that in the negotiations on a new Public Service Agreement Fórsa make the restoration of the Sick Leave benefits which had been effectively halved in 2014 to the position which existed prior to March 2014, a central demand.

Motion 120 – Tipperary South Health and Community Branch

That this Conference direct the DEC to reject the DPER Guidelines “Guidance and FAQs for Public Service Employers during Covid-19”, which took effect on the 7th February 2022 and seeks reversion to the DPER Guidelines of 29th September, 2021.

Motion 121 – Tipperary South Health and Community Branch

That this AGM declares that Fórsa pursues what has been taken from members since 2008 and not yet restored, be that income reductions/freezes, changes in conditions of employment, etc.

Motion 122 – Tipperary South Health and Community Branch

That this Conference directs the DEC to pursue unpaid child rearing leave i.e. maternity leave, parental leave, job sharing/flexible working be reckonable for pension purposes and bought back at nominal rate.

APPENDIX 3

Motions reiterating existing policy/practice

Motion 24 – Cork Health and Local Government Branch

Recalling motions from other branches duly passed by delegates at previous conferences of the Health & Welfare Division, this Conference reiterates that the Health & Welfare Divisional executive of the union should pursue differentiated grades and/or pay scales/allowances for Social Care and Social Work professionals working in the areas of: Child Protection & Welfare, Alternative Care, and Aftercare, and which reflect the more onerous nature of their frontline work with the most vulnerable group in Irish society.

APPENDIX 4

Nominations received by the deadline set out in rule 21(v)

Cathaoirleach/Chairperson (1)

Clodagh Kavanagh
Cork Health and Local Government

Bernadette Mooney
Dublin South Health and Welfare

Nominating Branch

Ballinasloe
BVA
Cavan Health and Local Government
Cork Health and Local Government
Donegal Health and Welfare
Kildare Health
Kilkenny Health and Local Government
Louth Health and Local Government
Offaly Health and Local Government
Roscommon Health and Local Government
Waterford Health and Local Government
Dublin South Health and Welfare

Leas-Cathaoirleach/Vice-Chairperson (1)

Andy Meaney
Waterford Health and Local Government

Bernadette Mooney
Dublin South Health and Welfare

Nominating Branch

Ballinasloe
BVA
Cavan Health and Local Government
Cork Health and Local Government
Donegal Health and Welfare
Kildare Health
Kilkenny Health and Local Government
Longford Health and Local Government
Louth Health and Local Government
Offaly Health and Local Government
Roscommon Health and Local Government
Tipperary South Health and Community
Waterford Health and Local Government
Dublin South Health and Welfare

Divisional Executive Committee (13)

Helen Canning
BVA

Orla Carroll
Kilkenny Health and Local Government

Paula Cregg
Clare Health and Local Government

Michael Davis
Dublin North Health and Welfare

Pat Fallon
Sligo Health and Local Government

Keivan Jackson
Kildare Health

Clodagh Kavanagh
Cork Health and Local Government

Angela McGinley
Donegal Health and Welfare

Andy Meaney
Waterford Health and Local Government

Patricia Mellisop
Offaly Health and Local Government

Bernadette Mooney
Dublin South Health and Welfare

Jarlath O'Connor
Mayo Health and Local Government

Stuart O'Connor
Dublin Hospitals

Corrine Phelan
Galway Health and Local Government

Piarais Ryan
Limerick Health

Charney Weitzman
Westmeath Health and Local Government

Nominating Branch

BVA

Kilkenny Health and Local Government
Waterford Health and Local Government

Clare Health and Local Government
Tipperary South Health and Welfare
Waterford Health and Local Government

Dublin North Health and Welfare

Sligo Health and Local Government
Wicklow Health

Kildare Health

Cavan Health and Local Government
Cork Health and Local Government

Donegal Health and Welfare
Waterford Health and Local Government

Cavan Health and Local Government
Cork Health and Local Government
Waterford Health and Local Government

Longford Health and Local Government
Offaly Health and Local Government

Dublin South Health and Welfare

Ballinasloe
Mayo Health and Local Government

Dublin Hospitals

Ballinasloe
Galway Health and Local Government
Roscommon Health and Local Government

Limerick Health

Longford Health and Local Government
Westmeath Health and Local Government

Divisional Representative on NEC (4)

Helen Canning
BVA

Orla Carroll
Kilkenny Health and Local Government

Michael Davis
Dublin North Health and Welfare

Pat Fallon
Sligo Health and Local Government

Clodagh Kavanagh
Cork Health and Local Government

Andy Meaney
Waterford Health and Local Government

Patricia Mellsop
Offaly Health and Local Government

Bernadette Mooney
Dublin South Health and Welfare

Jarlath O'Connor
Mayo Health and Local Government

Corrine Phelan
Galway Health and Local Government

Nominating Branch

BVA

Kilkenny Health and Local Government

Dublin North Health and Welfare

Sligo Health and Local Government
Wicklow Health

Cavan Health and Local Government
Cork Health and Local Government

Cork Health and Local Government
Waterford Health and Local Government

Offaly Health and Local Government

Dublin South Health and Welfare

Ballinasloe
Mayo Health and Local Government

Ballinasloe
Galway Health and Local Government
Roscommon Health and Local Government

Standing Orders Committee (2)

Don Gibney
Westmeath Health and Welfare

Don Meskell
Cork Health and Local Government

Nominating Branch

Ballinasloe
BVA

Cavan Health and Local Government
Cork Health and Local Government

Donegal Health and Welfare
Dublin South Health and Welfare

Galway Health and Local Government
Kildare Health

Kilkenny Health and Local Government
Longford Health and Local Government

Louth Health and Local Government
Mayo Health and Local Government

Offaly Health and Local Government
Roscommon Health and Local Government

Waterford Health and Local Government
Westmeath Health and Welfare

Cork Health and Local Government

APPENDIX 5

Motion,
amendment
and nomination
withdrawal
forms

Fórsa health and welfare conference 2023

Motion, amendment and nomination withdrawal form

.....Branch wishes to withdraw:

[Please use BLOCK capitals]

Motion number	<input type="text"/>	Amendment to motion	<input type="text"/>
Motion number	<input type="text"/>	Amendment to motion	<input type="text"/>
Motion number	<input type="text"/>	Amendment to motion	<input type="text"/>
Motion number	<input type="text"/>	Amendment to motion	<input type="text"/>
Motion number	<input type="text"/>	Amendment to motion	<input type="text"/>

Election	Nomination
Election	Nomination
Election	Nomination
Election	Nomination
Election	Nomination
Election	Nomination
Election	Nomination
Election	Nomination
Name of principal delegate	
Signature of principal delegate	
Date	Time
SOC signature	Date Time



Fórsa health and welfare conference 2023

Motion, amendment and nomination withdrawal form

.....Branch wishes to withdraw:
[Please use BLOCK capitals]

Motion number	<input type="text"/>	Amendment to motion	<input type="text"/>
Motion number	<input type="text"/>	Amendment to motion	<input type="text"/>
Motion number	<input type="text"/>	Amendment to motion	<input type="text"/>
Motion number	<input type="text"/>	Amendment to motion	<input type="text"/>
Motion number	<input type="text"/>	Amendment to motion	<input type="text"/>

Election	Nomination
Election	Nomination
Election	Nomination
Election	Nomination
Election	Nomination
Election	Nomination
Election	Nomination
Election	Nomination
Name of principal delegate	
Signature of principal delegate	
Date	Time
SOC signature	Date Time





CORK

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LIMERICK

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SLIGO

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