**ACTIONS ON MOTIONS**

**Regional Health Areas (RHAs)**

1. 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 38’s.

• 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.

*Fórsa continues to engage with the HSE in relation to the establishment of the six health regions. Regular meetings have been convened with members initially impacted and updates have been provided. Research has not yet been scoped out but is under consideration.*

**Health and Welfare Divisional Executive Committee**

2. 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.

**Clare Health and Local Government Branch**

*Fórsa initiated a petition urging the employer to reverse its decision to exclude the role of Regional Director – HSCP. Throughout the process, we continued to lobby and met with senior HSE management. This decision has since been paused, and we are now engaging with management on a draft job description.*

3. 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.

**Boards and Voluntary Agencies Branch**

*Fórsa initiated a petition urging the employer to reverse its decision to exclude the role of Regional Director – HSCP. Throughout the process, we continued to lobby and met with senior HSE management. This decision has since been paused, and we are now engaging with management on a draft job description*

4. 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 & clinical care programmes and the wide-ranging nature of HSCP practices.

**Offaly Health and Local Government Branch**

*Fórsa initiated a petition urging the employer to reverse its decision to exclude the role of Regional Director – HSCP. Throughout the process, we continued to lobby and met with senior HSE management. This decision has since been paused, and we are now engaging with management on a draft job description*

5. 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.

**Limerick Health and Welfare Branch**

*Fórsa, along with our sister unions are engaged with HSE senior management to establish Joint Union Management Forum for each region, with agreed terms of reference.*

6. 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.

**Limerick Health and Welfare Branch**

*Fórsa continues to engage with HSE senior management in relation the HSE Centre and National services, impacted by the establishment of the six health regions.*

**Pay, pensions and related**

7. 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.

**Limerick Health and Welfare Branch**

*We engaged with members to establish a union campaign and will continue to advocate and lobby on their behalf.*

8. 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.

**Tipperary South Health and Community Branch**

*We engaged with members to establish a union campaign and will continue to advocate and lobby on their behalf.*

9. 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.

**Offaly Health and Local Government Branch**

*This matter remains active on the National Joint Council, and we have secured the support of our sister unions to work toward a successful resolution***.**

10. This Conference calls on the incoming Health & Welfare Divisional Council of FORSA 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.

**Dublin North Health and Welfare Branch**

*Fórsa, along with our sister unions engaged with management on this matter. During these discussions, we have secured significant improvements*

11. 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.

**Health and Welfare Divisional Executive Committee**

*Fórsa has secured significant improvements for members receiving their retirement benefits, with substantial progress recorded. Additionally, we recently distributed explanatory videos and leaflets to guide members on completing the necessary paperwork in advance.*

12. 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.

**Boards and Voluntary Agencies Branch**

*Fórsa has secured significant improvements for members receiving their retirement benefits, with substantial progress recorded. Additionally, we recently distributed explanatory videos and leaflets to guide members on completing the necessary paperwork in advance.*

13. 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.

**Tipperary South Health and Community Branch**

*Fórsa has secured significant improvements for retired members receiving their pay increases, with substantial progress recorded. This matter was raised at the NJC where both HSE and Dept of Health are in attendance.*

14. 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.

**Wicklow Health Branch**

*Fórsa has secured significant improvements for members receiving their retirement benefits, with substantial progress recorded. Additionally, we recently distributed explanatory videos and leaflets to guide members on completing the necessary paperwork in advance.*

15. 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 & 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.

**Cork Health and Local Government Branch**

*Fórsa sought and secured a dedicated pension subgroup to ensure regular engagement with the Department of Public Expenditure on all pension-related matters. Additionally, under the terms of the current public service agreement, individual groups can utilize the local bargaining clause to address outstanding claims.*

16. 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.

**Tipperary South Health and Community Branch**

*Fórsa sought and secured a dedicated pension subgroup to ensure regular engagement with the Department of Public Expenditure on all pension-related matters. Additionally, under the terms of the current public service agreement, individual groups can utilize the local bargaining clause to address outstanding claims.*

17. This Conference calls on FORSA'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.

**Wexford Health and Local Government Branch**

*Under the terms of the current public service agreement, individual groups can utilize the local bargaining clause to address such claims. The H&W division have identified 31 Local Bargaining units and are actively engaged with each group to determine appropriate claims such as these.*

18. 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.

**Clare Health and Local Government Branch**

*Under the terms of the current public service agreement, individual groups can utilize the local bargaining clause to address such claims. The H&W division have identified 31 Local Bargaining units and are actively engaged with each group to determine appropriate claims such as these.*

19. 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.

**Galway Health and Local Government**

*Under the terms of the current public service agreement, individual groups can utilize the local bargaining clause to address such claims. The H&W division have identified 31 Local Bargaining units and are actively engaged with each group to determine appropriate claims such as these.*

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

**Louth Health and Local Government Branch**

*Under the terms of the current public service agreement, individual groups can utilize the local bargaining clause to address such claims. The H&W division have identified 31 Local Bargaining units and are actively engaged with each group to determine appropriate claims such as these.*

21. 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

**Offaly Health and Local Government Branch**

*Under the terms of the current public service agreement, individual groups can utilize the local bargaining clause to address such claims. The H&W division have identified 31 Local Bargaining units and are actively engaged with each group to determine appropriate claims such as these.*

22. 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.

**Tipperary South Health and Community Branch**

*Under the terms of the current public service agreement, individual groups can utilize the local bargaining clause to address such claims. The H&W division have identified 31 Local Bargaining units and are actively engaged with each group to determine appropriate claims such as these.*

23. 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.

**Tipperary North Health and Community Branch**

*Under the terms of the current public service agreement, individual groups can utilize the local bargaining clause to address such claims. The H&W division have identified 31 Local Bargaining units and are actively engaged with each group to determine appropriate claims such as these.*

**25.** 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.

**Offaly Health and Local Government Branch**

*This will be a focus for the next divisional term. It is important to note that overtime rates are precluded under local bargaining, but we can revisit such proposals when we engage with management in relation to alternative working hours.*

27. 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.

**Tipperary South Health and Community Branch**

*The HSE has sought engagement in relation to the extending working week this issue will form part of these discussions.*

28. 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.

**Tipperary North Health and Community Branch**

*Fórsa has engaged with Revenue in respect of Flat Rate Expenses. Revenue has requested a detailed submission to support the requests of HSCP members. We are currently trying to identify an external provider who can assist in drafting the required submission.*

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

**Wexford Health and Local Government Branch**

*Fórsa has engaged with Revenue in respect of Flat Rate Expenses. Revenue has requested a detailed submission to support the requests of HSCP members. We are currently trying to identify an external provider who can assist in drafting the required submission.*

**Community and Voluntary Sector Pay**

30.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.

**Health and Welfare Divisional Executive Committee**

*Recently, members voted to overwhelmingly accept the WRC proposals secured on the evening of March 10, 2025. A key element of this agreement ensures that members across the sector will receive pay increases in line with future public service agreements. However, it is acknowledged that a gap remains for those previously paid on HSE consolidated pay scales. The ongoing data-gathering exercise marks the first step toward addressing this issue. The commitment of members, branches, officials, and the division to this lengthy and enduring campaign deserves commendation.*

31. This Conference commends the successful beginning of FORSAs 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.

**Galway Health and Local Government**

*Recently, members voted to overwhelmingly accept the WRC proposals secured on the evening of March 10, 2025. A key element of this agreement ensures that members across the sector will receive pay increases in line with future public service agreements. However, it is acknowledged that a gap remains for those previously paid on HSE consolidated pay scales. The ongoing data-gathering exercise marks the first step toward addressing this issue. The commitment of members, branches, officials, and the division to this lengthy and enduring campaign deserves commendation.*

**Recruitment and retention issues**

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

**Limerick Health and Welfare Branch**

*Where fair procedures have not been followed or incorrect job descriptions have been used, Fórsa have lodged objections to national HR and insisted on the matter being addressed. This occurred multiple times over the course of the last two years.*

33. 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.

**Dublin Hospitals Branch**

*Whilst is has not been possible to pursue this issue due to the high levels of activity across the division over the last two years, including limited recruitment. It is important to note that we have commenced engagement with the HSE in relation to the Regional Structure for HR and Employee Relations and will consider this issue in this context.*

34. 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.

**Kildare Health Branch**

*Fórsa have pursued specific retention initiatives through work on the Career Pathway Review and through Joint Union Management Forum for Children’s Disability Services and other equivalent processes across all HSCP groups. Fórsa have also pursued workforce planning processes as part of the resolution to the Pay and Numbers Dispute. This will provide members with a regional platform to address retention initiatives.*

35. 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,

**Offaly Health and Local Government Branch**

*Fórsa have pursued specific retention initiatives through work on the Career Pathway Review and through Joint Union Management Forum for Children’s Disability Services. Fórsa have also pursued workforce planning processes as part of the resolution to the Pay and Numbers Dispute. This will provide members with a regional platform to address retention initiatives.*

36. 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

**Boards and Voluntary Agencies Branch**

*Fórsa have addressed with the HSE that there is no agreed Cross Cover Policy. This remains under active discussion through the WRC proposals on the Pay and Numbers Proposals.*

37. 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.

**REMITTED Cavan Health and Local Government Branch**

*We have engaged with the HSE and secured a review of all existing panels under the current WRC Agreement dated 30th March 2025. It is important to note that panels can only be extended for a maximum of three years, as per CPSA code.*

38. 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.

**Cavan Health and Local Government Branch**

*Our claim for a transfer / mobility policy has been referred to the WRC and a hearing is scheduled for the 28th May 2025.*

39. 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.

**Wexford Health and Local Government Branch**

*Our claim for a transfer / mobility policy has been referred to the WRC and a hearing is scheduled for the 28th May 2025.*

40. This Conference calls on FORSA'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

**Clare Health and Local Government Branch**

*This matter has been raised by Fórsa through the Children’s Disability Services Joint Union Managment Forum and the Roadmap for Service Improvement Working Groups and SIP Board.*

41. 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.

**Cork Health and Local Government Branch**

*Fórsa successfully negotiated new and improved rates of pay in the area of Special Care. It is envisaged these will attract and retain Social Care Workers into that area of social care. TUSLA are currently awaiting DPER sign off on the new deal.**Other improvements to pay and terms and conditions are under consideration as part of local bargaining.*

42. 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.

**REMITTED Dublin South Health and Welfare Branch**

*Notwithstanding the position of the Fórsa NPC’s and DPER’s signoff of the new Special Care Deal, Fórsa will advocate to extend the rates agreed across the streams to help recruitment and retention.*

43. This Conference requests the incoming DEC to request that new entrants coming into the HSE, grades 3 – 7 serve a minimum of 2 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.

**REMITTED Limerick Health and Welfare Branch**

*We have raised concerns regarding unfair recruitment practices with the relevant senior managers. The HSE intends to establish regional recruitment teams, and as part of this process, we will continue to advocate for nationally agreed transparent and fair policies and practices***.**

44. 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.

**Boards and Voluntary Agencies Branch**

*While exit interviews cannot be mandatory, they are a feature in some, but not all, areas of the HSE. As the HSE intends to stand up regional recruitment teams Fórsa will continue to advocate for consistent and fair practices which focus on retention.*

45. 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.

**Offaly Health and Local Government Branch**

*While exit interviews cannot be mandatory, they are feature in some, but not all, areas of the HSE. As the HSE intends to stand up regional recruitment teams Fórsa will continue to advocate for consistent and fair practices which focus on retention.*

46. This Conference calls on FORSA’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.

**Wexford Health and Local Government Branch**

*While exit interviews cannot be mandatory, they are feature in some, but not all, areas of the HSE. As the HSE intends to stand up regional recruitment teams Fórsa will continue to advocate for consistent and fair practices which focus on retention.*

**Job Evaluation Scheme (JES)**

47. 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

**Dublin Hospitals Branch**

*Whilst it has not been possible to move this process online, there has been significant improvements in the waiting times for members. In addition, the division continues to provide active support to individuals if they require information in relation to their individual application.*

48. 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.

**Dublin North Health and Welfare Branch**

*Whilst vast improvements have been achieved in the waiting times, members who are due to retire can have their forms processes sooner upon request.*

49. 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.

**Kildare Health Branch**

*Fórsa secured and agreed a full-time team to work on JE applications. This has reduced the waiting list significantly with approximately 500 members remaining on the waiting list.*

**Career Pathway**

50. 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.

**Tipperary South Health and Community Branch**

*Extensive negotiations have taken place to progress the Career Pathway Review resulting in a series of WRC Agreements which are being progressed to implementation***.**

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

**Louth Health and Local Government Branch**

*Extensive negotiations have taken place to progress the Career Pathway Review resulting in a series of WRC Agreements which are being progressed to implementation***.**

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

**Louth Health and Local Government Branch**

*Extensive negotiations have taken place to progress the Career Pathway Review resulting in a series of WRC Agreements which are being progressed to implementation***.** *This process has formally opened outside of Primary Care.*

53. This Conference calls on FORSA'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.

**Clare Health and Local Government Branch**

*Extensive negotiations have taken place to progress the Career Pathway Review resulting in a series of WRC Agreements which are being progressed to implementation***.** *This matter will be addressed within Phase 2 of the report and is also a feature of the Therapies Local Bargaining Claim.*

54. This Conference calls on FORSA'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.

**Clare Health and Local Government Branch**

*This matter will be addressed within the Therapies Local Bargaining Claim.*

55. That this conference calls on the incoming Health and Welfare Divisional Executive of Forsa to support the inclusion of HSE Dental Hygienists in the automatic progression to senior level after 5 years of full time service for health and social care professionals

**Kilkenny Health and Local Government Branch**

*This matter will be addressed within the Local Bargaining Claim for the group.*

56. 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.

**Tipperary South Health and Community Branch**

*This matter will be addressed within the Local Bargaining Claim for the group.*

57. 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.

**Tipperary North Health and Community Branch**

*This matter will be addressed within the Local Bargaining Claim for each HSCP group.*

58. 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 Forsa Executive Committee are on stand-by to act in the best interests of the Workforce Review when called upon by the National Professional Committee.

**Tipperary South Health and Community Branch**

*This matter is currently in dispute with the employer due to their lack of engagement on the review and is currently referred to conciliation under the Workplace Relations Commission. The substantive matters will also be addressed within the Local Bargaining Claim for the group*

**General terms and conditions of employment**

59. 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.

**Health and Welfare Divisional Executive Committee**

*Since our previous Divisional Conference in 2023, the division oversaw a national ballot of all relevant members in Tusla. Industrial Action commenced in 2024, and the matter was referred to the WRC and onward to the Labour Court. A further hearing took place in the Labour Court, December 2024 and a recommendation issued in January 2025. This required the parties to re-engaged, as no agreement could be reached Fórsa has sought the intervention of the Labour Court to issue a final recommendation.*

60. 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.

**Health and Welfare Divisional Executive Committee**

*These matters are regularly reviewed by the Division. Additionally, we have secured the re-establishment of a policy and procedure subgroup within the NJC, which actively examines policies up for renewal as well as newly proposed policies.*

61. 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.

**Ballinasloe Branch**

*Fórsa led this campaign, not just in health but across all other sectors of the public service for the introduction of menopausal policy. This has been implemented, across the HSE and training available on HSE Live. Fórsa continue to campaign to “stop of stigma” which was recognised across the European unions as a key campaign on behalf of members.*

62. 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

**Kildare Health Branch**

*A comprehensive review of the sick leave schemes requires wider engagement across the unions. As part of the Health Division, we have actively engaged for the establishment of a bespoke scheme for health care workers who continue to suffer long covid. This is returning to the Labour Court on the 11th June 2025*

63. 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

**Limerick Health and Welfare Branch**

*The DEC secured a ratio for Grade IV promotions nationally. Since conference 2023 the HSE has imposed a recruitment embargo and subsequent Pay and Numbers Strategy. Following our industrial campaign a set of proposals was achieved. Members balloted and accepted these proposals. This requires the parties to engage in the process of workforce planning whereby these matters will be addressed.*

64. 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.

**Wexford Health and Local Government Branch**

*Fórsa met with HSE management to seek the creation of this grade code and continue to lobby for same with HSE Recruitment and Resourcing.*

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

**Wexford Health and Local Government Branch**

*Fórsa met with HSE management to discuss same. This matter will now be pursued through the workforce planning process agreed within the Pay and Numbers WRC Proposals.*

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

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

**Galway Health and Local Government**

*The National Health Office are currently considering an external contract for assistance on developing a position paper on safe staffing. We have also indicated our support for the INMO position on safe staffing legislation.*

67. This Conference calls on FORSA'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.

**Clare Health and Local Government Branch**

*The National Health Office are currently considering an external contract for assistance on developing a position paper on safe staffing. We have also indicated our support for the INMO position on safe staffing legislation. Within Children’s Disability Services, we have asked that this form part of the NDA Review.*

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

**Wexford Health and Local Government Branch**

*The National Health Office are currently considering an external contract for assistance on developing a position paper on safe staffing. We have also indicated our support for the INMO position on safe staffing legislation.*

69. 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.

**Louth Health and Local Government Branch**

*Fórsa have been engaging in the NJC subcommittee on CPD provision and raised the current inequitable situation***.**

70. 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.

**Louth Health and Local Government Branch**

*This position has been set out in discussions as appropriate.*

72. 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.

**Tipperary South Health and Community Branch**

*Fórsa has engaged with our sister unions in relation to developing a claim for the extension of the HSE bereavement leave to similar terms across the civil service. To date this remains an active agenda item.*

73. 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.

**Tipperary South Health and Community Branch**

*There are clearly defined job roles for the above-named grades. Where organisations have sought to change / blur same Fórsa has set out the position as agreed by conference. This remains an active issue on multiple workplace agendas and we proactively intervene.*

74. 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 & 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

**Westmeath Health & Local Government Branch**

*Given the increasing and complex nature of residential care and the increase in Violence and aggression in the workplace Fórsa will advocate for an improvement in the scheme within TUSLA given the very specific nature of the work.*

75. 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.

**Tipperary South Health and Community Branch**

*This matter is being considered under the Local Bargaining Process.*

76. 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.

**Kildare Health Branch**

*Since our divisional conference in 2023 the DEC has overseen five national disputes which has limited its opportunity to engage on wider projects. This will remain an agenda item for the incoming DEC.*

77. 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.

**Tipperary South Health and Community Branch**

*Fórsa continues to engage with the HSE in relation to the operation of the National Investigation Unit. This includes access to mediation.*

79. 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.

**Limerick Health and Welfare Branch**

*The DEC commissioned research into the morale of health workers. This was conducted by TASC. Members were invited to participate in a national survey and focus groups were convened. These findings will be presented at Conference 2025 which a focus on the next steps required to change the culture for those who work in the health service.*

**CHN model and related**

80. 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.

**Health and Welfare Divisional Executive Committee**

*This matter remains under the auspices of the Workplace Relations Commission. Substantive discussions have paused while the HSE engage with other unions regarding their engagement in the CHN Model.*

81. This Conference calls on FORSA'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.

**Clare Health and Local Government Branch**

*This position is set out in the relevant fora, including in the current Health Region negotiations.*

82. 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.

**Louth Health and Local Government Branch**

*This matter remains under the auspices of the Workplace Relations Commission as it is linked to the outcome of the CHN model discussions. Substantive discussions have paused while the HSE engage with other unions regarding their engagement in the CHN Model.*

83. 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.

**Louth Health and Local Government Branch**

*This matter remains under the auspices of the Workplace Relations Commission. Substantive discussions have paused while the HSE engage with other unions regarding their engagement in the CHN Model.*

84. 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.

**Louth Health and Local Government Branch**

*This matter remains under the auspices of the Workplace Relations Commission. Substantive discussions have paused while the HSE engage with other unions regarding their engagement in the CHN Model.*

85. 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.

**Tipperary South Health and Community Branch**

*This matter is currently in dispute with the employer due to their lack of engagement on the review and is currently referred to conciliation under the Workplace Relations Commission. The substantive matters will also be addressed within the Local Bargaining Claim for the group*

86. This Conference calls on FORSA'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.

**Wexford Health and Local Government Branch**

*This matter remains under the auspices of the Workplace Relations Commission. Substantive discussions have paused while the HSE engage with other unions regarding their engagement in the CHN Model.*

**Children’s Disability Network Teams (CDNTs)**

87. 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.

**Waterford Health and Local Government Branch**

*Fórsa have been involved in regular JUMF meetings in respect of CDNTs. An independent review of reconfiguration has been agreed and will be conducted by the NDA. There is regular engagement with both workplace reps and parent grups as well as with the relevant professional bodies.*

88. 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.

**Tipperary South Health and Community Branch**

*Fórsa have been involved in regular JUMF meetings in respect of CDNTs and secured a number of recruitment and retention solutions in the WRC proposals of January 2023.*

**Privatisation**

89. 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.

**Offaly Health and Local Government Branch**

*This was a significant feature of the Pay and Numbers Dispute and will be pursued through the SDO of the Public Service Agreement.*

90. 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.

**Cork Health and Local Government Branch**

*This matter will be addressed in the next divisional term.*

91. 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.

**Limerick Health and Welfare Branch**

*Fórsa have sought additional information in regard agency spend and have received a more detailed breakdown than was previously provided. There will be ongoing monitoring of this issue.*

**Organisation and Development**

92. This Conference calls on FORSA'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.

**Clare Health and Local Government Branch**

*Significant work has been undertaken to support 17 HSCP NPCs over the two-year term with a significant IR agenda pursued as outlined within this document. This will continue throughout the Local Bargaining Process.*

93. Health and Social care professionals are the second largest clinical

workforce within the lrish 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 lrish health service and on improving the recognition of their roles.

**Galway Health and Local Government**

*Significant work has been undertaken to support 17 HSCP NPCs over the two-year term and to avail of all media opportunities. Multiple examples of HSCP roles were used during the various disputes and they also featured as part the submissions to the Oireachtas.*

**Statutory Regulation**

94. 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.

**Health and Welfare Divisional Executive Committee**

*A one day conference was organised in October 2023 to support Social Care members on the journey to registration. This was followed by a series of in person regional webinars and an online national webinar in 2024. Further work is planned for 2025 to support members ahead of the 30th November date.*

*The NAtional Health Office regularly engage with CORU to go through issues related to Statutory Regulation for the designated professionals represented by Fórsa.*

*We successfully retained the CORU Fee at €100.*

*Supports for staff in the workplace will continue into the next Divisional Term.*

95. 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.

**Boards and Voluntary Agencies Branch**

*This will be a focus for the next divisional term.*

**Department of Health Expertise**

96.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.

**Health and Welfare Divisional Executive Committee**

*It is recognised it was through the activity of the Division that the temporary position was created it is important that we continue to campaign for its permanent inclusion. In addition, the DEC has lobbied and are currently engaged with the DOH and HSE on the creation of Regional Director of HSCP at Executive Management Team level across the regions.*

97. 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.

**Louth Health and Local Government Branch**

*It is recognised it was through the activity of the Division that the temporary position was created it is important that we continue to campaign for its permanent inclusion. In addition, the DEC has lobbied and are currently engaged with the DOH and HSE on the creation of Regional Director of HSCP at Executive Management Team level across the regions.*

98. 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.

**Wexford Health and Local Government Branch**

*This will be a focus for the next divisional term and is included in the current Programme for Government.*

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**Louth Health and Local Government Branch**

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100. 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.

**Mayo Health and Local Government**

*This will be a focus for the next divisional term and is included in the current Programme for Government.*

101. 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.

**Offaly Health and Local Government Branch**

*This will be a focus for the next divisional term and is included in the current Programme for Government.*

102. 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.

**Waterford Health and Local Government Branch**

*This will be a focus for the next divisional term and is included in the current Programme for Government.*

103. 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.

**Dublin Hospitals Branch**

*This will be a focus for the next divisional term and is included in the current Programme for Government.*

**Public Policy**

104. 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.

**Health and Welfare Divisional Executive Committee**

*Fórsa has led the campaign across the trade union movement against the rise of the far right. We continue to work with our colleagues in Le Cheile and all other networks to condemn the spreading of hate, fear and misinformation.*

105. 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 .

**Boards and Voluntary Agencies Branch**

*We will review any initiatives by the organisations and / or their lobbyists to achieve such changes. This must be led the organisations themselves in the first instance.*

106. This Conference calls on FORSA'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.

**Clare Health and Local Government Branch**

*This will be a focus for the next divisional term.*

107. 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

**Dublin Hospitals Branch**

*Whilst the HSE has in place such policies the need to be actively training staff and ensuring wider education is a requirement. Through our recent negotiations in the WRC we have secured a commitment from the HSE to recruit Diversity, Equity and Inclusion positions to support staff across grades, two of these posts will be filled in 2025 at national level who will design the actions and measures for implementation. Further posts for each region will be included in estimates 2026.*

108. 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.

**Kildare Health Branch**

*The program for government commits to assisting sponsoring agencies in complying with local, national and EU environmental and development standards. We will continue to champion for such practices at all relevant engagements.*

**4 day week**

110. This conference calls on the incoming Health and Welfare Divisional Executive to actively campaign the HSE for a shorter 4 day working week and work towards introducing a pilot scheme with the HSE.

**Dublin Hospitals Branch**

*Fórsa continue to support the 4 day week campaign and the National Health Office are currently considering appropriate pilot sites within the HSE. The commitment to public sector pilotsis included in the Public Service Agreement.*