

Memo

To: Chief Executive Officer

Each Regional Executive Officer

Each National Director

Each Assistant National Director HR Each Assistant Chief Finance Officer

Each Hospital Group CEO

Each Hospital Group Director of HR

Each Chief Officer CHO
Each Head of HR CHO
Head of HR, PCRS

Each CEO Section 38 Agencies

Each HR Manager Section 38 Agencies

Each Employee Relations Manager

Each Group Director of Nursing & Midwifery

Each Group Director of Midwifery

Each Clinical Director

Director National Ambulance Service

From: Anne Marie Hoey, Chief People Officer

Date: 18th July 2024

Subject: HR Memo 036/2024 - Pay and Numbers Strategy 2024

Implementation

Dear Colleagues,

Further to the CEO Memo 11942, the purpose of this HR Memo is to provide additional specific HR Guidance on the Implementation of the 2024 Pay and Numbers Strategy (PNS).

To note, this Memo on PNS refers to the agreement on the PNS under the auspices of the Department of Health only, and therefore **excludes** all WTE and associated measures under the auspices of the Department of Children, Equality, Disability, Integration and Youth Affairs.

1 Pay and Numbers Strategy Components

As advised in the CEO Memo (noted above) the construction of this years' PNS is as follows:

- i. December 31st 2023 opening 2024 WTE position all posts occupied and reporting WTE on the Health Service Personnel Census (HSPC) <u>125,420</u> WTE; *plus*
- ii. 1,850 WTE **New Service Developments** 2024; **plus**
- iii. 500 WTE **New Service Developments** 2024 (to be announced and allocated from August 2024); **plus**
- iv. 418 WTE Agency Conversion for Safe Nurse Staffing Framework Phases I& II; plus
- v. 542 WTE **Agency Conversion** to reduced costs and increase stability (to be allocated by September 2024 incrementally);
- vi. 1,023 WTE to accommodate the **S39 Hospice Agencies** change to S38 and subsequent incorporation onto the HSPC reporting in 2024.

The above provides for a total WTE allocation and Limit in 2024 of **129,753 WTE** for DoH funded services only.

This figure of **129,753 WTE**, and its associated portion of same across the Regions, National Services and Schemes along with the Corporate Centre, as advised, is the **Maximum WTE Limit** for the organization at the end of 2024 and at any point in between.

It excludes, in 2024, the *pre-registration nursing and midwifery students* and 76 WTE special assignment temporary posts.

2 WTE Limit Adjustment and Performance Reporting

- The Maximum WTE Limit as per above (129,753 WTE) has been set out by Staff Category by Region & National Services & Schemes, Care Group per Region and by Entity (Hospital, S38 entity and Community Care Group service);
- ii. The WTE limit for each of the Regions and National Services and Schemes as advised on the 11th & 12th July 2024, will be the WTE limit assessed monthly in line with the HSPC publication, issued as a separate report for these services;
- iii. Reporting at entity level, the report will provide the monthly Census outturn, incorporating the WTE filled year to date for the developments and agency conversions as set out in Section 1 above, notified via HR SharePoint to provide a **variance report** against the monthly and year end WTE maximum limit for the relevant Region/ National Services and Schemes;
- iv. Reporting via HR SharePoint, to be reflected in the monthly reports, must be updated by services by latest **10**th **of each month** in arrears (10th August for July reporting). This is critical to accurately reflect attributing growth factors, and also the 'in month' reporting against variance.
- v. This report will be used for the purposes of performance reporting and performance dialogue with services.
- vi. A **centrally managed WTE limit adjustment** will be made on the following basis:

- a. As further new developments/ agency conversion allocations are announced and allocated to services via the Primary Notifications Process. Importantly this may adjust a Regional/ National Services and Schemes WTE Limit, but will not impact or exceed the overall WTE limit for the Health Service at 129,753 WTE.
- b. **Technical adjustments** as advised by services/ Health Regions Programme Team can be made to better represent service provision e.g. where assumptions made on the WTE split across Regions (i.e. where CHO is aligned to more than one Region) in the construction of the WTE limits database, is subsequently advised for a technical adjustment to this split to more accurately reflect the WTE allocation as greater clarity on this arises in the context of the current and ongoing work on transition to Health Regions. Similar to a. above, these adjustments will not impact or exceed the overall WTE limit for the Health Service at **129,753 WTE**.
- c. **Service re-designation** in the unusual circumstance of the movement of a service either from a Section 39 to a Section 38/ HSE incorporated into the HSPC reporting, this will under the normal delegations process be managed for the purposes of WTE limit accommodation and **only** where formally agreed at CEO and DoH level.
- vii. Where a WTE Limit adjustment is made this will be updated for performance reporting to provide for accurate reporting.

3 Management Controls

- i. As per Section 1 and 2 above, the Maximum WTE Limit for the organisation is set at **129,753 WTE** with Regional and National Services and Schemes portion of same allocated.
- ii. As the Maximum WTE Limit there is **no approval to exceed this WTE limit** either at year end or any point in between.
- iii. To ensure compliance with the Maximum WTE Limit for their Regions/ National Services and Schemes, Regional Executive Officers and National Directors are requested to undertake with **immediate effect** the following steps:
 - Ensure understanding across services that vacant positions both at and from December 31st 2023 may only be approved (Subject to the below controls) for filling within the 2024 WTE limit;
 - b. Ensure understanding across services that beyond the WTE at December 31st 2023 (i.e. the opening WTE position as noted in Section 1), the only net WTE growth available is for filling of New Service Developments and Agency Conversion as set out in Section 1 earlier. Growth outside of this is unapproved.
 - c. Immediately proceed to obtain full visibility on all current/ potential contracting across Region/ National Service to gain a stock take of;
 - i. Volume of posts (WTE) contractually obligated (offered and accepted) but not yet onboarded and when due to onboard (projection) – to include International recruitment; graduate nurses and midwives 2024; consultants contracted with future start date; etc.
 - ii. Volume of posts in recruitment (WTE) **not yet offered and accepted** (contractually obligated) these may need no further

- action on review, or may need decision to phase onboarding / pause;
- iii. **Derogation approvals** received through the CEO process, for which have either onboarded after December 31st or are in recruitment the latter may require decision to either pause/ phase recruitment timeframe and the former will require management within the overall WTE limit, where the service is in excess of the December WTE limit **excluding** the **allowable** WTE growth
- iv. Data on any employee due to **return to work** who are on any type of unpaid leave at the point of December 31st 2023 to ensure this WTE is managed appropriately within the WTE limit e.g. maternity unpaid, career break returnees, long term –sick absence returnees.
- v. All posts filled via **Temporary Higher Appointments** such posts should in the first instance now be considered for filling on a permanent basis via competition where the post was occupied on 31st December 2023 and is therefore comprehended within the WTE limit. Where the posts is unapproved, it must be managed within the overall WTE limit. *The following HR Memo (attached under separate cover) outlines the specific provisions for THAs and their short-term nature which must be a consideration in decisions on same (HR Memo 015 2023)*

iv. Specific Controls

As per the CEO memo a **3-Stage Control** process for the management of the 3 key areas of decision in the recruitment and onboarding process have been set out as follows:

Stage 1 Authority to Initiate Recruitment.

Stage 2 Authority to Approve Entering into a Contract Of Employment.

Stage 3 Authority to Approve Admittance to Payroll

As stated in the CEO Memo only those roles and the people who are delegated in them as set out below have the authority to accept applications and make decisions on the 3 Stages of Control above;

- Regional Executive Officer x 6 (Region)
- National Director of National Services and Schemes (National Services)
- Chief People Officer (Centre)
- Chief Finance Officer (Centre)
- CEO

Each approving authority must maintain a register of decisions for their services for each stage of the controls above. To facilitate same, a **common simple register** will be provided to each REO, National Director of National Services and Schemes and in the case of the Centre, the CEO to ensure the organisation can at a glance at any time understand the approvals in place not yet entered to payroll which in turn allows for

the overall assessment of performance against control. It is **critical** and **expected**, that each REO, National Director of Services and Schemes and CPO ensure that this Register is maintained as the **single concurrent version** of all recruitment control decisions that may be used to assess performance at any point in time.

This Common Decisions Register will be communicated by end of week commencing July 22nd 2024.

The above process **immediately stands down** the previously advised CEO Recruitment Measures and associated **CEO Recruitment Derogation application process**, managed by National HR. All applications from services awaiting a decision via this process, now fall to be decided as per the above 3 Stage Control Process.

Exceptions to the above controls

- Notified allocations via Primary Notifications for 2024 New Service Developments and Agency Conversion posts – these posts are automatically approved for recruitment, with recruitment tracking already provided via HR SharePoint – noting that HR SharePoint must be maintained up to date at all times:
- 2. Senior Management and Administration New and Replacement Posts the current provisions as set out in HR Memos remain a requirement on the basis that the HSE does not possess the delegated authority to sanction posts at Grade VIII and above in the staff category of Management and Administrative.

Queries:

Generic queries relating to this memo please contact National HR at nationalhr@hse.ie.

Queries on **WTE Limits** please contact <u>workforcelimits@hse.ie</u>

Queries on **HR SharePoint** please contact National NHR SharePoint Team at nsprecruitment.queries@hse.ie

Yours Sincerely

Anne Marie Hoey Chief People Officer

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