



An Coimisiún um Chaidreamh san Áit Oibre
Workplace Relations Commission

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Mr Francis Rogers, HSE

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HSE / Forsa

**National Hospital Pharmacy Review Implementation
Implementation of the 2011 McLoughlin Report**

I refer to conciliation on 10th March 2020 concerning finalisation of the above long-standing initiative. Arising from these discussions the following proposal is tabled in settlement.

Proposal

The attached "Draft Pharmacy Review" to be amended to reflect the following agreed outcomes at conciliation.

With reference to points M, N & O, the Pharmacy Executive Manager including Medicines Management commits that these will be implemented immediately and to the on-going management of same, on acceptances of this proposal in its entirety. In that regard any such implementations must have regard to adequate resourcing and any emerging issues may be referred to conciliation for assistance on request.

Full co-operation and collaboration with community pharmacy services in line with the development of regional structures, i.e, Slaintecare.

All hospital Pharmacy Leads will fully co-operate with the provision of all pharmacy related data at hospital, hospital group and national levels with immediate effect.

This outcome is confined to pharmacists within the meaning of the legislative framework as provided for under the Pharmacy Act, 2007 and cannot be used in furtherance of other staff categories irrespective of similarity. On the general issue of legal liability, pharmacists are bound by the 2007 Pharmacy Act which details their legal obligations under hospital management governance.

For the purpose of pay, core pay is aligned to the Head of Services for Model 3 and Model 4 hospitals. In effect, in maintaining the integrity of core pay an additional allowance of 6.5% (of mid-point currently €6,524.60) is payable in Model 4 hospitals.

It is accepted that while the new framework provides for a formal deputy role at Model 4 level, it is recognised a future development may necessitate the introduction of a formal deputy role within a Model 3 hospital where there is consensus at hospital site, hospital group and national level.

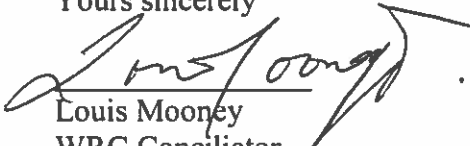
Concerning the issue of advancing the Pharmacist Specialist role, the parties are agreed on the importance of future service development by way of establishing an agreed validation process jointly within a reasonable time frame.

On the issue of pay overlap, the chair notes that this proposed outcome relates to career structure, recruitment and retention issues, etc. and that integrity of the fundamental pay structure has not been altered. It is within such a context that dialogue around any such pay structure alterations is beyond the scope of this proposal. This is without prejudice to the position of the parties on this issue at conciliation.

It is agreed under Clause F of the Draft Pharmacy Review document to delete the reference to e.g., and diagram.

This proposal issues that the parties agreed to recommend to their respective sides. If rejected the proposal is withdrawn and deemed to be without status.

Yours sincerely


Louis Mooney
WRC Conciliator