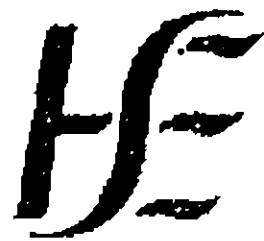


No	DATE	TYPE	From	To	Decision	Section of Act applied
1	04.01.10	Letter	Robert Notley	Irene & Patrick sweeney	Release	N/A
2	09.01.10	email	Dick Roche TD	Dara Purcell	Release	N/A
3	11.01.10	letter	Dick Roche TD	CEO HSE	Release	N/A
4	11.01.10	Letter	Dick Roche TD	Dara Purcell	Release	N/A
5	20.01.10	email	Reps	E Lynch	Release	N/A
6	21.01.10	Letter	Dara Purcell	Dick Roche TD	Release	N/A
7	21.01.10	letter	AND Procurement HSE	Dick Roche TD	Release	N/A
8	27.01.10	Letter	Dick Roche TD	Dara Purcell	Release	N/A
9	09.02.10	Letter	Dara Purcell	Dick Roche TD	Release	N/A
10	18.02.10	letter	Dick Roche TD	Dara Purcell	Release	N/A
11	18.02.10	Letter	Dick Roche TD	CEO HSE	Release	N/A
12	15.03.10	Letter	Dick Roche TD	CEO HSE	Release	N/A
13	30.03.10	Letter	Dick Roche TD	CEO HSE	Release	N/A
14	06.04.10	Letter	CEO PA HSE	Dick Roche TD	Release	N/A
15	24.05.10	Letter	CEO HSE	Dick Roche TD	Release	N/A



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

HSE Procurement
Portfolio & Category Management
Cherry Orchard Hospital
Ballyfermot
Dublin 10
Tel: 00 353 01 6206280
Fax: 00 353 01 6206290

Date: 4th January 2010

MS IRENE SWEENEY
PATRICK SWEENEY
31 FERRYBANK
ARKLOW
CO. WICKLOW

**Tender for: Patient Care Transport Services
Lot 2**

Dear Irene,

With regard to your tender submitted in relation to the above. We regret to inform you that you have been unsuccessful on this occasion. Please find attached your scorecard.

We wish to take this opportunity to thank you for your participation in the tender process. If you require further feedback as to why your tender was unsuccessful, you may contact the undersigned.

Yours sincerely

Robert Nolley
Buyer/Category Manager

Scorecard for Lot 2

Technical Merit	Marks Available	Score
Demonstrate the ability to introduce ICT initiatives to enhance the ordering/invoicing and reporting systems	100	50
Reliability & Quality Assurance	Marks	
Demonstrate the ability to provide reliable and continuous service, demonstrate the ability to introduce suitable quality assurance measures to ensure service level agreements are monitored	100	50
After Sales	Marks	
Demonstrate the ability to provide the service in the most economical manner going forward which will include the ability to provide a full range of services.	100	50
Technical Assistance	Marks	
Demonstrate the ability to perform the contract to the specification of requirements	100	50

Quality Score = 200
Price Score = 460
Combined Total = 660

dara purcell

From: Dick.Roche@Taoiseach.Gov.IE
Sent: 09 January 2010 17:54
To: dara.purcell
Subject: Re Tender for Patient Care Transport Services

Mr Purcell,

Thank you for taking my phone call on Friday re the above.

At the outset I would again reiterate that I am reluctant to approach the HSE on a contract matter. Neither the constituents that I represent in this matter nor myself wish to in any way improperly influence the awarding of a contract.

My contact with you arises because I believe that there are fundamental flaws in the process that is being applied to awarding what is a very important series of contracts that touch on the matter of quality patient care.

I have now had the opportunity of reviewing one of the tenders and the scoring system applied to the tender valuation. From the material I have seen it seems to me that the scoring system contains a series of fundamental flaws.

I have prepared a detailed letter addressed to Professor Drumm setting out in detail some of the reservations that I have with the process that has been applied and the decision that results from the scoring system.

I will copy that letter to you in hard copy and electronically as soon as it is typed in my office. I request in the letter that a full re-evaluation of the processes applied be carried out before these contracts are finalised.

Thank you again for taking my call.

Dick Roche

Tá Roinn an Taoisigh meáite ar seirbhís phroifisiúnta, éifeachtach agus chúirtéiseach a sholáthar dár gcustaiméirí go léir. Chun amharc ar an Chairt do Chustaiméirí, cliceáil ar <http://www.taoiseach.gov.ie//irish/index.asp?docID=1763>

Le haghaidh an duine nó an aonáin ar seoladh dó/dí an t-eolas a seachadadh, agus d'fhéadadh ábhar faoi rún agus/nó ábhar faoi phribhléid a bheith istigh leis. Tá cosc ar aon athbhreithniú, athsheachadadh, scaipeadh faisnéise nó aon úsáid eile den eolas seo ag aon aonáin eile seachas an faighteoir beartaithe, ná aon ghníomh a thógáil i dtuilleamaí an eolais seo. Má fuair tú sco de bharr earráide, téigh i dteagmháil leis an seoltóir agus scríos an t-ábhar ó do ríomhaire le do thoil. Is é polasaí Roinn an Taoisigh cosc a chur ar ábhar maslach a sheoladh, agus más rud é go gceapann tú go bhfuil an t-ábhar istigh leis an teachtaireacht seo maslach ba cheart duit dul i dteagmháil leis an seoltóir ar an bpointe agus le itu@taoiseach.gov.ie freisin.

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DICK ROCHE TD
MINISTER FOR EUROPEAN AFFAIRS



11 January, 2010

Mr. Dara Purcell
Assistant National Director
Board Secretary
Parkgate Street Business Centre
Dublin 8

Please quote our ref: CO 06/ 1922

Re: Tender for Patient Care Transport Services

Dear Mr. Purcell,

Thank you very much for taking my phone call regarding the tenders for Patient Care Transport Services in Co. Wicklow and parts of Co. Kildare. I am very grateful for the amount of time you gave me to discuss what I believe is a very serious issue.

I am attaching herewith a copy of a letter which I have sent to Prof. Drumm. As I mentioned to you when we first spoke, I am frank loathe to intervene in a tendering process. I share a common concern with the HSE that all contracts should provide value for money and that they should be allocated on an objective basis.

I believe, however, from the documentation which I have seen that the scoring system in this case is fundamentally flawed. Some of the basis for that view are outlined in my letter to Prof. Drumm.

You will note in my letter to Prof. Drumm that I would be anxious that the points that I have raised should be considered fully before the HSE Board makes any final decision in this case.

I should be grateful to hear from you as to whether that will be done.

One final point, I have also asked in my letter to Prof. Drumm, that a request from [REDACTED] for a meeting with the HSE should be granted. Given that [REDACTED] have provided 28 years of exemplary service to the HSE, it seems to me that this is the very minimum that could be expected by a contractor who has provided not only value for money but exemplary services to patients.

I should be grateful to hear from you at an early date on this.

Yours sincerely

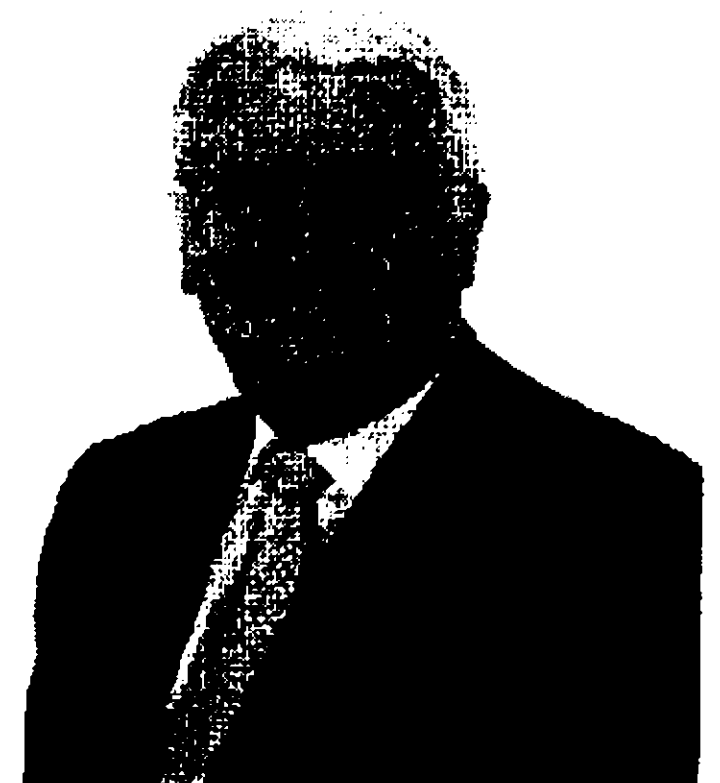
Dick Roche, T.D.,
Minister for European Affairs

Encl

HEALTH SERVICE EXECUTIVE

15 JAN 2000

OFFICE OF THE CHAIRMAN

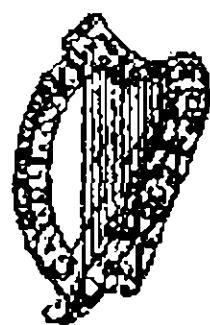


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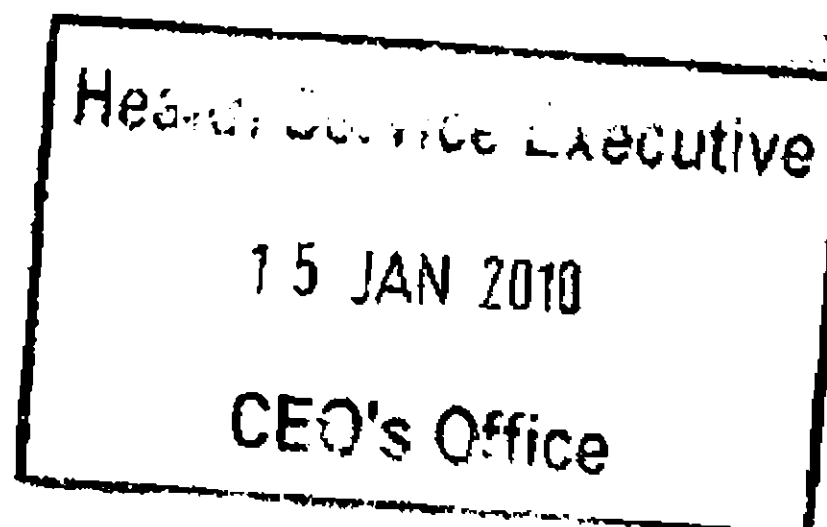
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DICK ROCHE TD
MINISTER FOR EUROPEAN AFFAIRS



11 January, 2010

Prof. Brendan Drumm
Chief Executive Officer
Health Service Executive
Dr. Steeven's Hospital
Dublin 8



Please quote our ref: CO 06/ 1922

Re: Tender for Patient Care Transport Services

Dear Prof. Drumm,

Over the Christmas period I had a number of calls from firms who have, for some considerable time, been providing patient transport services in the Co. Wicklow area.

As I understand it, three existing service providers, with between them well-over 50 years of service in the area of patient transport have been replaced and the proposal is that the contracts be given to two companies based in Co. Dublin and the third based in Co. Kildare.

I understand the HSE introduced an entirely new form of tendering system for patient transport on this occasion. I have no problem whatsoever with that. In the current times it is vital that value for money be provided by all service providers.

Mr. Notely of the HSE Procurement, Portfolio and Category Management Section, sent the unsuccessful tenders, a document described as a "scorecard" in each case.

It seems to me that very fundamental questions arise regarding this scorecard and the basis on which the tenders were allocated. The most obvious and glaring omission from the scorecard is quality and safe service.

On the matter of the "scorecard" which was issued in the case of ~~the patient transport services~~ Arklow, Co. Wicklow, I note that in each of the four categories for which a score is allocated, ~~the service provider~~ who have provided transport without any complaint to the HSE and its predecessor for 28 years, was scored at the 50% level. The first point I wish to make about this is that it seems strange to me that if the scoring system is correct, that the HSE have, over a protracted period, been doing business with a service operator who, by HSE criteria, reached the 50% level in terms of satisfaction rating.

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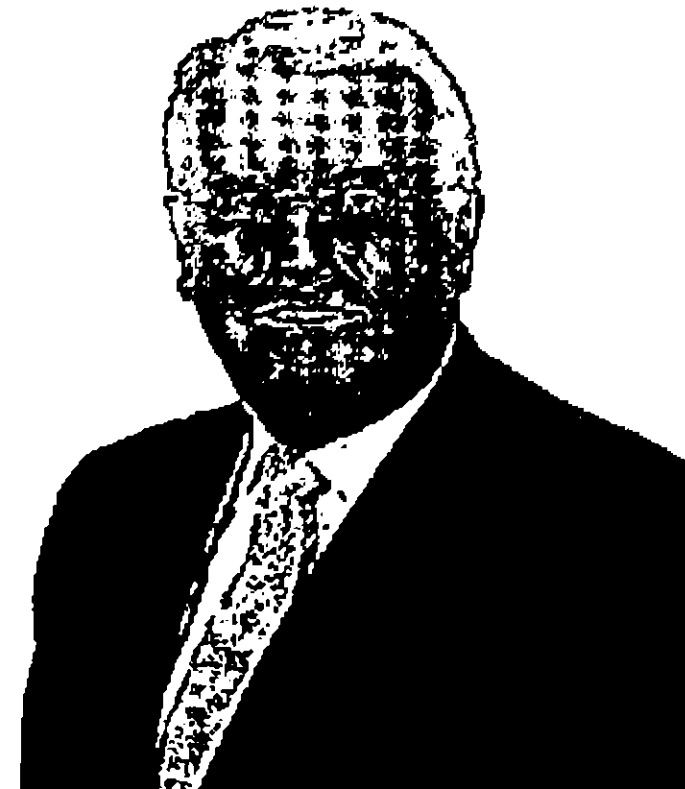


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The categories to which scores have been assigned somewhat mystify me. The first category is "demonstrate the ability to introduce ICT initiatives to enhance the ordering/invoicing and report systems". I can well understand why the HSE would wish to have an efficient invoicing system and I can also well understand why ICT initiatives would be an important part of that. I cannot understand, however, why a service provider such as Sweeneys who have never given the health services any major problems with invoicing should be scored at only 50%. This defies logic. [REDACTED] have contacted a number of Health Board staff with whom they have dealt with over the years to enquire as to whether there was any complaint regarding their invoicing. There was no complaint. Why this firm which is known for its efficiency should be allocated a score of only 50% raises fundamental questions in itself. A more fundamental question still, however, is how was the alternative company, the new service provider in this case scored? How could the HSE possibly score somebody who is not yet providing services in Co. Wicklow against somebody who has on an exemplary basis provided those services over a 28 year period? I await with great interest a response to this question.

The second criterion against which the contract has been scored is "demonstrate the ability to provide reliable and continuous service, demonstrate the ability to introduce suitable quality assurance measures to ensure service level agreements are monitored". Again the [REDACTED] have been allocated a score of 50%. Your own staff both current and past are mystified as to why such a low score has been allocated to the [REDACTED]. Patients and General Practitioners who have become aware in the last few days that [REDACTED] are to lose the contract have written the letters which I have attached attesting to the quality of the services provided by [REDACTED].

I should be grateful if you would let me know whether the HSE evaluation team made any effort whatsoever to contact any patient or patient's family who has been provided a service over the last 28 years by the [REDACTED]. Has the HSE and its evaluation team approached the HSE staff or hospital staff who have had regular, virtually daily dealings in recent years with the [REDACTED]? My understanding is that the answer to these two questions is in the negative. That leaves me with the fundamental question, how can the HSE judge whether quality service has been provided if it hasn't done the basic research amongst the clients and professionals who have been dealing with [REDACTED]?

Another question which relates to this particular section of the evaluation is how, if the HSE allocated a score of only 50% to an existing service provider, could it possibly reach its evaluation on a potential service provider who has not been dealing with patients from Co. Wicklow, their doctors or hospital staff?

There are a number of specific subsets in this section of the evaluation. The first of these is the ability to provide a reliable and continuous service. [REDACTED] have provided reliable and continuous service for 28 years. There has never been a complaint about their service. Had there been any serious reason to question either the quality or capacity of the service provider, I expect that the HSE would long since have moved to another service provider. I ask the question, therefore, what score had the [REDACTED] been allocated on the issue of the provision of reliable and continuous service?

A second subset of this section of the scoring is the "contractors capacity to demonstrate the ability to introduce suitable quality assurance measures to ensure that service level agreements are monitored". Again I ask whether there is any basis whatsoever for questioning the capacity of [REDACTED] to meet these particular quality criteria? This company uses first class vehicles. It employs two full time mechanics in its garage. The garage also provides a valet service to the general public and this is used to ensure that the vehicles used in patient transport is up to first class standard. Moreover [REDACTED] have, as your own staff will verify, been incredibly flexible over the years, willing to take on new services and willing to be flexible in the provision of existing services to the HSE. How were these factors incorporated into the scoring system? More importantly how can the HSE score a potential service provider who is not currently in the field under these particular headings?

Cont/d. ...

I understand that one of the service providers who has won a contract in this round is NRC, a Dublin based cab company. I have no wish to question the efficiency of this company, but even a casual user of taxi services in the greater Dublin area must come to the conclusion that they are far from exemplary. Has the HSE, before awarding a valuable contract to this particular taxi company checked the quality of its cabs? Have you checked them for cleanliness? Have you checked the capacity of the drivers to find their way around the remote villages and rural regions of Co. Wicklow? If you haven't done these things how in the name of goodness can you possibly score a potential contractor based far away from these remote parts of Co. Wicklow more highly than you could score the [redacted]

The third criterion in the scoring system is the capacity of the contractor to "demonstrate the ability to provide the service in the most economical manner going forward which will include the ability to provide a full range of services".

The first observation I have to make is that I suspect that this particular judgement criterion is integrated into the pricing score. I should be interested to hear how the HSE differentiates between providing the "most economical service going forward" and its evaluation of price.

Over the years [redacted] have provided an incredibly flexible service to the HSE. Incidents which arose recently illustrate this particular point. [redacted] recently took a patient from the Arklow area to the Beacon Hospital for dialysis. When the various tests were being run on this patient, another problem was detected. Staff at the Beacon Hospital took the view that the patient in question be transferred to St. Vincent's. This was done and the transfer could be effected immediately because the driver for [redacted] was waiting in the hospital for the patient. When the patient was taken to St. Vincent's the driver stayed for a number of hours while another set of tests were run on the patient. While the patient was in St. Vincent's the driver rather than abandon the patient, decided to hold on in the hospital, on his own initiative, until the staff in St. Vincent's had made a determination that the patient could be discharged. Some hours after the man had been brought from the Beacon to St. Vincent's, he was brought by [redacted] driver home to Arklow. The patient was greatly appreciative of the efforts put in by [redacted]. I cannot understand how a taxi service based in Dublin could possibly compete with this quality of service. As I said at the very outset I was surprised that patient care was not given a high rating in the scoring system. I am amazed it doesn't appear to have featured in your scoring system at all.

The question of the "ability to provide a range of services" is also raised in this section of the scoring system. [redacted] currently meet this particular criterion fully. They have a variety of vehicles, standard top of the range cars, a minibus, a people carrier and a number of 4X wheel drive vehicles - vital in inclement weather for reaching patients in the Arklow/Wicklow hinterland. Has the HSE evaluated the services and more importantly the vehicles available to the alternative contractors tendering in this case? Can you assure me, given my concern about my constituents' health and safety, that the range of vehicles which are necessary to cover difficult terrain such as exists in Co. Wicklow will be available to the alternative contractors?

The final element in the evaluation system is that the contractor must "demonstrate the ability to perform the contract to the specification of requirements". Again I make the observation that this seems to effectively duplicate other elements in the evaluation system. That point aside, can you inform me, given the fact that you have experience going back for over quarter of a century of the service provided by Sweeneys of any example where they failed to demonstrate the ability to perform the contract? If not can you possibly explain why Sweeneys received only 50% of the marks available under this heading.

Cont/d. ...

I note that the one evaluation point which is not included in the scorecard is a detailed breakdown of the price score. [redacted] were allocated a score of 460 under this heading. I would ask that you personally examine the prices that have been indicated by any other tenderer for this particular contract. I have spoken in detail with the [redacted] on the pricing structure which they submitted. I cannot see how any alternative contractor could significantly undercut them. The only basis on which they could be undercut, it seems to me, would be by another service provider, for example, a taxi company, who would take a patient from the patient's home, abandon the patient at the hospital and leave it to the hospital to contact a taxi to transport the patient back to his/her place of origin. This seems to me to be a lesser quality service for patients which, must be a first priority for any health authority.

One other aspect of this issue which I wish to address is an incident which occurred, not with [redacted] but with another of the existing contractors who failed to have a contract renewed. I understand that in that case the successful contractor visited the premises of the unsuccessful tenderer hoping to recruit some of the existing firm's drivers. During conversations which took place it emerged that the company which won the contract had only three vehicles available to service what is a vast rural area. Has the HSE carried out an inspection of vehicles which are being put forward to provide this vital service? Have you checked the capacity of the vehicles which will be used by any successful contractor? Indeed has the HSE checked the number of vehicles and the quality of the drivers that would be available?

As I mentioned at the very outset my main concern in this is for the quality of service that the HSE will be providing to my constituents who find it necessary to leave Wicklow to attend hospitals outside the county for medical procedures. I am far from convinced that the scoring system which I have examined has anything like an appropriate focus on quality of patient service. Indeed as I have already mentioned, I am quite shocked that the quality of service to patients isn't actually mentioned in the scoring system, an omission which I find frankly bizarre.

I believe that the tendering system in this case is fundamentally flawed. The scoring system can best be described as focused on bureaucratic requirements rather than patient systems. I fully endorse the introduction of good quality administrative systems whether in the HSE or within the firms with whom it tenders for public works, however I would have expected that the first priority be patient treatment.

It is my understanding that decisions on this issue will be made shortly by the Board of the HSE. I should be very grateful if you would assure me that each of the issues that I have raised above will be examined objectively before any proposals are put to the Board and I should also, given the seriousness with which I view this issue, ask that this correspondence be copied to all members of your Board.

Finally, I am enclosing herewith a letter in relation to the [redacted] service from Drs. [redacted] and [redacted] who operate one of the biggest medical practices in the Arklow area. This particular practice has been in operation in the Arklow area for as long as the Sweeney family has been providing services. It is widely regarded as one of the most effective medical practices in the south east. The doctors who have signed this letter are progressive, dynamic, forward looking, patient oriented medical practitioners. It seems to me that their evaluation of the [redacted] service is something which should be factored into any final decision. I am also enclosing two letters from dialysis patients who regularly avail of the [redacted] services. [redacted] in his letter speaks of the punctuality, courtesy and helpfulness that he has received and makes the point that it has been "absolutely outstanding". The second letter from [redacted] (hard copy of an email) speaks of the totally reliable service provided by the [redacted], the care and attention that patients receive from drivers, the professional nature of the service provided and the willingness of Mr. & Mrs. [redacted] and their drivers to provide services in good weather and in bad.

Cont/d. ...

It seems to me that these testimonials from patients and from medical practitioners must be factored into any final decision made in this case.

A last point, Mrs. ~~xxxxxx~~ has written to the HSE asking for a more detailed evaluation of the decision processes adopted in her case. She has also asked for a face to face meeting with HSE management. Given that this company has provided 28 years of exemplary service which has never been faulted and which has been very highly regarded by patients and medical practitioners, the very minimum courtesy which should be afforded her in my belief is that she be allowed to have such a meeting before any final decision is taken in this case.

I look forward with great interest to hearing from you and I should be grateful for an early response.

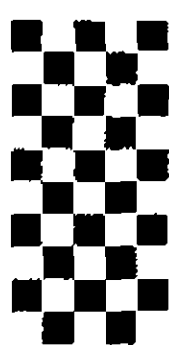
Yours sincerely



Dick Roche, T.D.,
Minister for European Affairs

Encl

cc Ms. Mary Harney, TD, Minister for Health & Children
Mr. Dara Purcell, Assistant National Director - Board Secretary, HSE

**Elaine H. Lynch (Communications, Training & Customer Relationship)**

From: Reps [Reps@hse.ie]
Sent: 20 January 2010 12:41
To: Elaine H. Lynch (Communications, Training & Customer Relationship)
Cc: Reps
Subject: Rep:RDR/10/0037 re Tender for Patient Transport Services in Wickl ow,from Dick Roche TD
Importance: High
Follow Up Flag: Follow up
Flag Status: Orange
Attachments: pdf_79153_combined.pdf

Please Find attached Representation for direct response (RDR) to the requester, which has been received in PAD.

The turnaround time for this rep is 15 working days. A response is therefore due by **10/02/10**

If this representation does not fall within your remit please advise this office immediately.

In addition to responding directly to the requester please also email a copy of the response back to reps@hse.ie so we can close off the Representation on our database / tracking system.

If you have any queries please do not hesitate to contact us

Many Thanks

Representations Section,
Parliamentary Affairs Division,
Health Service Executive,
Block D, 2nd Floor,
Parkgate Business Centre,
Parkgate Street,
Dublin 8
Tel: 01 635 2878

-----Original Message-----

From: Ann OBrien [mailto:ann.obrien@HSE.IE]
Sent: 19 January 2010 11:07
To: Reps
Subject: Correspondence from Dick Roche TD
Importance: High

<<pdf_79153_combined.pdf>> Hi
Attached find correspondence from Dick Roche regarding Tender for Patient Transport Services for your attention.

22/01/2010

It seems to me that these testimonials from patients and from medical practitioners must be factored into any final decision made in this case.

A last point, Mrs. [REDACTED] has written to the HSE asking for a more detailed evaluation of the decision processes adopted in her case. She has also asked for a face to face meeting with HSE management. Given that this company has provided 28 years of exemplary service which has never been faulted and which has been very highly regarded by patients and medical practitioners, the very minimum courtesy which should be afforded her in my belief is that she be allowed to have such a meeting before any final decision is taken in this case.

I look forward with great interest to hearing from you and I should be grateful for an early response.

Yours sincerely



Dick Roche, T.D.,
Minister for European Affairs

Encl

cc Ms. Mary Harney, TD, Minister for Health & Children
Mr. Dara Purcell, Assistant National Director - Board Secretary, HSE



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

Office of the Chairman of the HSE
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Baile Átha Cliath 8

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Unsent letter to Mr. Roche

Mr. Dick Roche, TD
Minister for European Affairs
2 Herbert Terrace
Herbert Road,
Bray
Co. Wicklow

21st January 2010

Dear Minister,

I would like to acknowledge receipt of your letter dated 11th of January 2010 which was received in this office on 15th January 2010 in relation to HSE patient transport contracts in the Dublin/Wicklow/Kildare areas.

As I informed you in our telephone conversation, the contract for patient transport in the Dublin/Wicklow/Kildare areas was on the agenda for the scheduled monthly HSE Board meeting on the 14th January 2010, i.e. the day before your letter was received. The Board approved the HSE management recommendation that contracts be placed with the successful bidders for elements (mainly taxi/hackney services) of the contract. No preferred bidders emerged for other elements (mainly minibus services) of the contract and therefore this will now be re-tendered.

From my enquiries I understand that the HSE Procurement team formally met the unsuccessful suppliers who requested to be provided with a debriefing on the tender process (this included a meeting with the ~~suppliers~~).

I trust this explains the present position. I understand your letter to Prof. Drumm is receiving attention.

Yours sincerely,

Dara Purcell
Dara Purcell
Secretary to the Board



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

Communications, Training and Customer Relationship
Management
Tipperary Technology Park
Rosanna Road
Tipperary

Chumarsáide, Ollúna agus Caidrimh Chustaiméara
Páirc Theicneolaíochta Thiobraid Árann
Bóthar Rosanna
Tiobraid Árann

Tel/Teil: 062 - 82273 /4
Fax/Facs: 062- 82320
<mailto:elaine.h.lynch@hse.ie>

Minister Dick Roche,
Department of An Taoiseach,
Government Buildings,
Dublin 2.

21st January, 2010

Re: Tender Patient Care Transport Services

Dear Minister Roche,

With reference to your letter of the 11th of January 2010 regarding a tender for Patient Care Transport Services with HSE I wish to respond as follows.

Within HSE all purchasing of supplies, works and services is governed by the following core values:-

- Patient and customer focus
- Achieving efficiency, effectiveness and best value for money in terms of overall life-cycle
- Dealing with quality suppliers, contractors and service providers
- Operating in a fair, open, transparent and non-discriminatory manner in the marketplace
- Properly managing risk
- Complying with all relevant European and National Legislation, HSE Procurement Policy and Government Guidelines
- Operating to the highest ethical standard

HSE has a Procurement Directorate which provides strategic sourcing and a category management approach for all non pay expenditure. The overall objectives are to meet the internal requirement of our customers and to obtain best value for money. HSE tenders are advertised on the Government Etenders Website www.etenders.gov.ie and on the Official Journal of the European Union (OJEU) and fully comply with government guidelines and EU Directives. This tender was also advertised in both National and Local newspapers. HSE would always want competition, and in that regard promotes and engages in the market in a very positive manner.

It is not my intention to refer in detail to all of the issues raised in your correspondence. However, I wish to advise that the above tender was awarded in

line with EC Directive 2004/18/EC and was awarded under an EU Open Tender Procedure.

As part of the evaluation process an evaluation team and a wider consultative group who had expertise and a working knowledge in the area of patient transport was established to support this tender process. The tender evaluation group examined all aspects of tender proposals put forward with a view to procuring a service that is in line with specifications, meets user requirements and achieves best value for money. The evaluation group who are appointed to carry out tender assessments apply award criteria to submissions received and score them accordingly. The level of the information provided in the tender proposal in support of the award criteria will be reflected in the outcome of the score. As you will appreciate, the evaluation of tenders has to be objective in line with the principles of EU competition, Equity, Fairness and Proportionality.

Apart from observing legal obligations where provisions of EU Procurement Directives apply, the HSE adopts a voluntary constructive policy on debriefing unsuccessful candidates. This is to encourage suppliers to improve future bids and as a result improve their competitive performance. With regard to the above tender a number of the unsuccessful tenderers were debriefed. In respect of the tender submission from Sweeney's, a detailed debriefing meeting took place with members of the evaluation team in attendance to address any questions or issues arising. At this debriefing session all aspects of their tender submission were discussed with them in detail as well as the scoring applied to each criterion. They also received constructive comment and feedback from the evaluation team.

HSE wish to advise that further lots in respect of mini bus services were not awarded as part of this tender and it is our intention to go to the market in the near future in this regard.

To conclude, I would like to highlight that the outcome of this tender did achieve best value for monies for HSE and importantly will release funds for other patient related services.

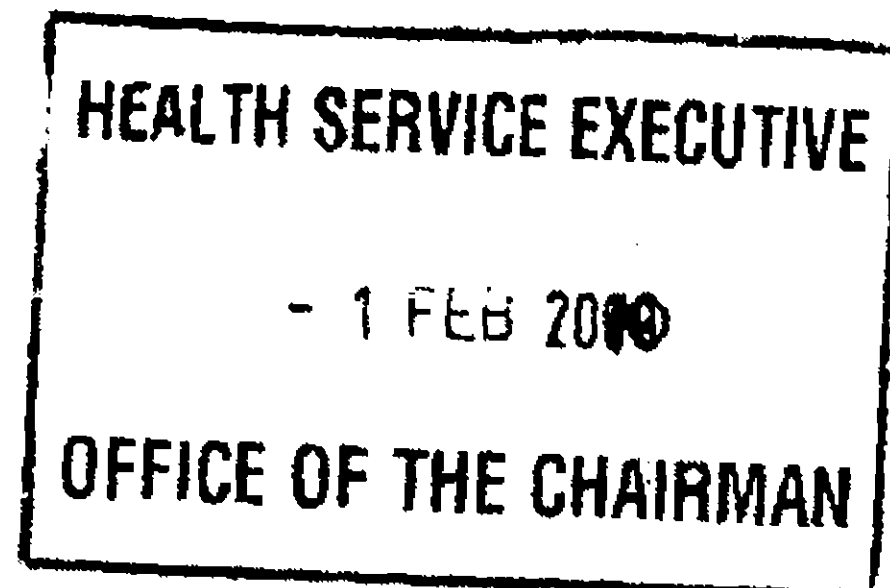
Yours Sincerely,


Julie Ryan

Assistant National Director Procurement
Head of Communications, Training & Customer Relationship Management

**Cc : Leo Stronge, Head of Procurement, Block 4 Unit C, Central Business Park,
Clonminch, Tullamore, Co. Offaly**

DICK ROCHE TD
MINISTER FOR EUROPEAN AFFAIRS



27 January, 2010

Mr Dara Purcell
Secretary to the Board
Office of the Chairman of the HSE
Dr. Steeven's Hospital
Dublin 8

Please quote our ref: CO 06/ 1922

Re: Tender for Patient Care Transport Services

Dear Mr Purcell,

Thank you for your letter dated 21 January regarding patient transport contracts for Dublin/Wicklow/Kildare areas.

I have to say I am very disappointed with your letter. The letter fails to address the very detailed concerns which I put forward in my letter to Professor Drumm in relation to the manner in which these contracts have been awarded.

I am frankly shocked that patient care and the quality of patient services provided by existing contractors seems to have been entirely discounted in the contract awarding process. There was, as you say in your letter, a meeting with unsuccessful suppliers and a "debriefing". However, this too failed to answer the questions which I raised in my letter.

I should be grateful, therefore, to have a detailed response on each of the points which I raised in my letter of 11 January and I look forward to hearing from you on this.

Yours sincerely,

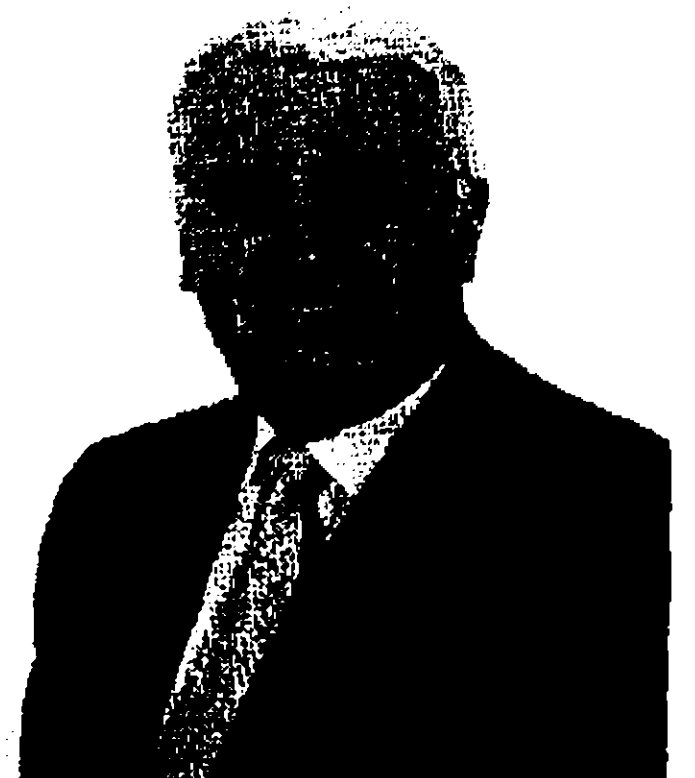

Dick Roche, T.D.
Minister for European Affairs



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Mr. Dick Roche, TD
Minister for European Affairs
2 Herbert Terrace
Herbert Road,
Bray
Co. Wicklow

9th February 2010

Dear Minister,

I refer to your letter dated 27th January 2010 and would like to clarify certain matters.

The purpose of my letter was to update you regarding the Patient Transport contract i.e. that elements of the contract were approved by the Board at its meeting on the 14th of January 2010; that your letter was received after that Board meeting (15th January, 2010) and that meetings had been held with unsuccessful bidders to provide them with a debriefing on the tender process.

My letter to you on 21st January 2010 was not intended to address the substantive issues raised in your letter of 11th January, 2010 to Prof Drumm. I confirmed that your letter to Prof. Drumm was still receiving attention and a detailed response would be sent to you.

I hope this is helpful in clarifying the intent of my letter as you express disappointment with it.

Yours sincerely,

Dara Purcell
Secretary to the Board

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Minister for European Affairs

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18 February 2010

Ms Daragh Purcell
Secretary to the Board Health Service Executive
Room 127, Dr. Stephen's Hospital
Dublin 8.

Dear Mr. Purcell,

Thank you very much for your letter of 9th February, which was received in my office on 16th February regarding the patient contract.

I have received a letter from Ms. Ryan the Assistant National Director Procurement, regarding the contract. The contents of that letter are, in my view, completely inadequate and I am currently checking as to how the new service is operating and I will be in further contact with Professor Drumm.

I look forward to receiving the further letter from Professor Drumm, which seems to be indicated in the third paragraph of your letter.

Again I am very grateful for the time and effort you have taken in this matter personally. I would however make the point that I believe that the new arrangements cannot work and that any saving which is achieved will be achieved at the cost of patient comfort and service.

Yours Sincerely,

Dick Roche
Minister for European Affairs.

HEALTH SERVICE EXECUTIVE

19 FEB 2010

OFFICE OF THE CHAIRMAN

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Health Service Executive

22 FEB 2010

CEO's Office

18 February, 2010

Prof. Brendan Drumm
Chief Executive Officer
Health Service Executive
Dr. Steeven's Hospital
Dublin 8

Please quote our ref: CO 06/ 1922

Re: Tender for Patient Care Transport Services

Dear Brendan,

I wrote to you on the above matter in January. I have received a response to that letter from Ms. Ryan, Assistant National Director for Procurement, HSE. I regard Ms. Ryan's response, a copy of which is attached for ease of reference as entirely unsatisfactory in tone and in content. I set before the HSE a number of very specific issues in relation to this particular Tender, Ms. Ryan either has dismissed or ignored key points in my original letter.

In Ms. Ryan's letter it was suggested that all HSE purchasing is in compliance with "core values".

The number one core value quoted in the letter is "Patient and Customer" focus. This "core value" seems to have received scant attention in the changes which the HSE has recently made in its Patient Transport Services.

You will recall I mentioned in my letter of 11th January that I was mystified to read in the assessment list that "ability to introduce ICT initiatives" was the first assessment criteria used by the HSE. In fact the words "patient care" does not appear in the HSE "score card for lot 2", an omission that I find as utterly baffling.

All of the available evidence suggests that service arrangements which the HSE has signed up to are not focussed on patient care. Your organisation has dismissed suppliers of services with which you have been conducting business with the HSE and the Health Boards for almost three decades without a single customer complaint. In its assessment process it is my understanding that none of the HSE clients who have availed of the services of Sweeney's were interviewed. I also believe that the views of HSE officials on the ground were not part of the assessment process.

The second core value referred in Ms. Ryan's letter is efficiency and effectiveness. I of course accept the importance of efficiency and effectiveness. I take the view however, that the quality of patient care should not suffer. Since the new contract came into effect earlier this month I have already received complaints from two constituents. One of these, from [REDACTED] is attached for your attention. This elderly man is forced to endure an additional six hours travelling per week for his dialysis. As he points out in this letter this not only subjects him to additional stress but it interferes with his dietary and medications schedules.

The third core value referred to in Ms. Ryan's letter is the HSE commitment to dealing with "quality suppliers, contractors and service providers". As I understand it the HSE has at no stage had any complaint regarding the services provided by [REDACTED]. In spite of this the HSE awarded [REDACTED] only half of the available points for "reliability and quality assurance" under the assessment system which was applied to this contract.

For ease of reference I am attaching a copy of the HSE's "scorecard for lot 2". I am at a loss to understand how a contractor who had a 100% record in terms of quality and reliability in the past could be evaluated at the 50% level. Indeed I am mystified at how exactly 50% has been awarded under each of the four evaluation criteria's. This simply makes no sense. I should be grateful to have an explanation of the very low ranking awarded and why a company which has supplied a service for three decades without complaint could possibly get such a poor assessment.

On the matter of reliability and quality it has been suggested to me a contractor who was awarded one of the Wicklow contracts may be contemplating "sub contracting" some of the collections to local hackney operators. I should be grateful to know if such an arrangement is allowed under the terms of the contract that has been agreed.

Ms. Ryan also refers to the HSE operating in a fair, open transparent and non-discriminatory manner in the marketplace. I would question whether the HSE Tender procedure applied in this particular principle. During the course of a post-tender briefing HSE's staff were asked how they factored a blemish free record of client service into the evaluation process. They provided no satisfactory explanation. I would be interested in knowing how the HSE evaluated the quality of services that will be provided to patients in rural Wicklow, some of the most remote areas of the East Coast of Ireland by cab companies based in Co. Dublin, companies with no experience of operating in rural Co. Wicklow.

I note that in the tender documents the HSE asked those submitting tenders to list their vehicles registration and license numbers etc. Before the contract was awarded, was any effort made to examine the vehicles that would be used in patient transport? Another core value mentioned is "properly managing risk." This one fascinates me. How can the HSE possibly suggest that the manner in which this contract has been awarded meets this 'core value?' Has the HSE made any effort to assess the quality of service vehicles which will be dealing with patients from my constituency under the contract which it has recently allocated? A related point - has the HSE evaluated the patient risk arising from the extended journey time in for example [REDACTED] case?

Ms. Ryan suggests in her letter that the manner in which this contract has been handled is determined by what you call relevant "European and National Legislation". I should be grateful if you would

stipulate the EU legislation that requires a small contract to provide transport services in remote areas in Co. Wicklow must be dealt in the manner in which the HSE has handled this particular contract?

Ms Ryan takes the view in the final paragraph of the first page of her letter that the HSE has no responsibility to respond to the detailed questions which I have raised in my letter to you. I should be grateful to know whether you share this dismissive attitude to a legitimate query from a public representative?. In my view the HSE has a responsibility to reply to reasonable questions raised by any public representative. I completely reject the view that your organisation can decide unilaterally to ignore valid questions which we put to it in good faith particularly where those questions touch on the health and welfare of constituents and where they touch on the manner in which your organisation goes about its business. Your organisation is not above public scrutiny. If Ms. Ryan has a personal problem responding to queries that she regards as irksome, perhaps you would direct that some other official of the HSE deal with those queries.

Ms Ryan also makes reference in the second page of her letter to an evaluation team and a wider "consultative group" as having had an input into this particular contract. If a consultation process was applied I should be interested in learning who was consulted. Were any patients approached by the consultative group? How many staff members in the hospitals were consulted? How many of your own staff dealing with transport services were consulted? If you consulted any of these three groups, were there any complaints?

I look forward to your detailed reply to each of the above points and I also look forward to the outstanding points which Ms Ryan chose to dismiss from my first letter to you.

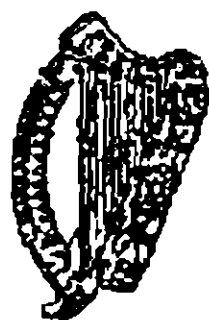
Yours sincerely,



Dick Roche, T.D.
Minister for European Affairs

cc. Ms. Mary Harney, T.D., Minister for Health and Children

DICK ROCHE TD
MINISTER FOR EUROPEAN AFFAIRS



Health Service Executive

19 MAR 2010

CEO's Office

15 March, 2010

Prof. Brendan Drumm
Chief Executive Officer
Health Service Executive
Dr. Steeven's Hospital
Dublin 8

Please quote our ref: CO 06/ 1922

Re: Patient Care Transport Services in Co. Wicklow

Dear Prof. Drumm,

I have written to you on a number of occasions regarding patient transport in Co. Wicklow. I must, at the outset, say that I am less than impressed regarding the responses which I have received from your office and from the HSE on this issue. It strikes me that Tallaght is not the only institution in the health service that is very poor in terms of responses to communications.

In my last letter I indicated that I had already started to receive queries regarding the quality of patient care which could and would be supplied under the new arrangements.

Since my last correspondence I have had a complaint in particular about a Hiace van with a 1999 registration collecting three patients from the north east of the county. Patients have complained regarding the fumes entering the van and regarding what they describe as "bench seating" which was made available in the vehicle.

A more serious case, however, has now come to my attention from members of a family of a very elderly patient, a lady in her 80s who is being taken to St. Vincent's Hospital for dialysis. I understand that the lady in question is a patient of [REDACTED]. The care she receives in St. Vincent's Hospital is superb, but unfortunately her experiences since the HSE decided to change the patient transport arrangements has been decidedly second-rate. On a recent trip for her dialysis, this lady was awaiting as usual in her home when the car arrived to take her to St. Vincent's. The car was slightly earlier than usual, she very much welcomed this, made her way to the car. The driver was sitting in the car but as she joined him he announced that he was having his coffee break and it would be a little while before they left. She sat in the car and waited until the gentleman in question completed his coffee break.

The patient arrived in St. Vincent's Hospital late for her dialysis appointment. Hospital staff rescheduled her appointment, but she had to wait for 1 and half hours before dialysis could be started. When her dialysis session was complete the lady again joined the car which was parked to the front St. Vincent's Hospital. The driver told her that she would have to wait for at least an hour until another patient joined the car.

Cont/d. ...



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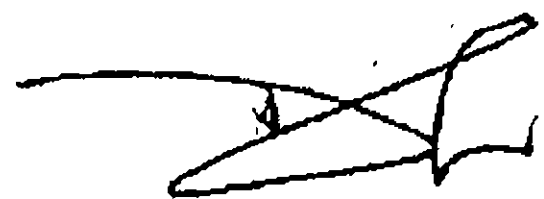
This elderly lady having just completed her dialysis programme was left sitting in the car for one hour in the cold. She found the experience a humiliating one and when she arrived home she was in a very distressed condition. She complained that she had been treated with very little respect.

The episode, tragically, was something of a last straw for this lady. She had shortly before the dialysis lost a very close member of the family. The following weekend she was taken to hospital having tried to take her own life. I am not for a moment suggesting that the dialysis episode was a direct contributory factor to this tragic turn of events but certainly didn't help a patient who was already trying to cope, not just with her illness but with a tragedy in her own life.

In addition to the complaints which have come to my attention regarding the new transport arrangements, I understand that complaints have also been registered in St. Vincent's Hospital where many of the patients receive their dialysis.

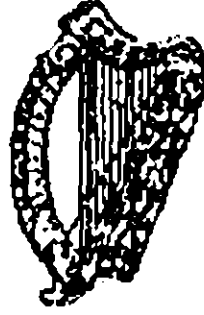
Your organisation still has not replied to all of the points which I raised in the previous correspondence. In view of the mounting complaints that I am receiving regarding the service which the HSE has put in place, I would now like to have a response to the questions I have raised without any further delay. —

Yours sincerely



Dick Roche, T.D.,
Minister for European Affairs

DICK ROCHE TD
MINISTER FOR EUROPEAN AFFAIRS



Health Service Executive

6 APR 2010

CEO's Office

30 March, 2010

Prof. Brendan Drumm
Chief Executive Officer
Health Service Executive
Dr. Steeven's Hospital
Dublin 8

Please quote our ref: CO-06/1922

Re: Tender for Patient Care Transport Services

Dear Brendan,

I recently wrote to you again regarding the handling by your Organisation of the Patient Transport arrangements in Co. Wicklow.

Given that this correspondence was addressed to yourself I was stunned to receive an e-mail from the Parliamentary Affairs Division of the HSE saying that "due to industrial action by Impact Trade Union it is not possible to process a response to your representation/query at this time.

My correspondence to you was not a standard representation regarding a constituency case. It was a substantial letter in relation to the manner in which a contract for patient transport had been awarded. In short the letter was a matter for management in the HSE and related very specifically to your organisation's policies. This is not the type of issue which I would imagine should be appropriately assigned to grade members covered by the Impact Trade Union, a Union of which I happen to have a lot of personal regard.

The matter in question was a management issue appropriately addressed to yourself. I should be grateful, therefore, to have a reply from you on the matter.

Yours sincerely,

Dick Roche, T.D.
Minister for European Affairs



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6th April 2010

Dick Roche TD
Minister for European Affairs
Department of Foreign Affairs
Iveagh House
St Stephens Green
Dublin 2

Dear Minister Roche

I wish to acknowledge receipt of your correspondence dated 30th March 2010 and previous correspondence of 15th March 2010 to Professor Brendan Drumm, CEO regarding the tender for patient care transport services.

Please accept my apology for the manner in which your previous correspondence was dealt with.

I wish to advise you that your correspondence has now been brought to the attention of Professor Drumm and a reply will issue in due course.

Yours sincerely

Patricia Perry
CEO's Office



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24th May 2010

Dick Roche TD
Minister for European Affairs
Department of Foreign Affairs
Iveagh House
St Stephens Green
Dublin 2

Dear Minister Roche

I refer to your correspondence in relation to the tender for patient care transport services.

Firstly I regret to note the contents of the complaints which you attached from two of your constituents and it is of concern that they had such a negative experience. I have requested that these be investigated with immediate effect and with a response to be issued directly to you.

I also wish to refer to correspondence issued to you by Ms Julie Ryan, Assistant National Director, HSE Procurement regarding Tender for Patient Transport Services.

In this regard I have consulted with Mr Brian Gilroy, National Director of Commercial and Support Services and Mr Leo Stronge, Head of Procurement. Having had their advice on the matter, I am satisfied that without going into the minute detail of the specific tender which we are reluctant to do from a number of perspectives including commercial sensitivities and confidentiality, Ms Ryan has given the appropriate level of information to address the matters raised in your query.

As you are aware HSE is the largest purchaser in the state and as a single legal entity we are obliged to aggregate spend and carry out procurement procedures accordingly. However, in an effort to ensure that local service providers were aware of this particular tender I have been advised that the notice as well as going to the Official Journal of the European Union was also advertised in both national and local newspapers.

This particular tender covers the provision of Patient Transport Services for the areas of Dublin, Kildare and Wicklow and based on my discussions I am satisfied that this procurement was carried out in line with best practice procurement, EU legislation and HSE Procurement Policy. I have attached a copy of HSE Procurement Policy for your information.

The tender process is a two stage process covering selection and award. I am advised that the service provider you refer to passed the Selection Stage and it is at this stage that their past experience can only be assessed.

Without revealing specific details pertaining to the company you refer to in your correspondence, I can advise that this company have been fully briefed and advised of their standing in relation to this competition. It is my understanding that the service provider was satisfied with the debriefing they received as they have not reverted back indicating otherwise.

For all procurement processes HSE Procurement establish a specialist evaluation team of key professional stakeholders and indeed stakeholder input forms a critical part of all commercial decisions made. All procurement is carried out with a view to meeting the requirements of end service users. In the case of this particular process the evaluation team included professionals from Hospital Settings, Local Health Offices, Patient Liaison Officer, Patient transport Manager to ensure that the outcome was patient focused.

Furthermore HSE would acknowledge that this company is a recognised service provider of good standing to HSE and indeed continue currently to do business with us in respect of mini bus services.

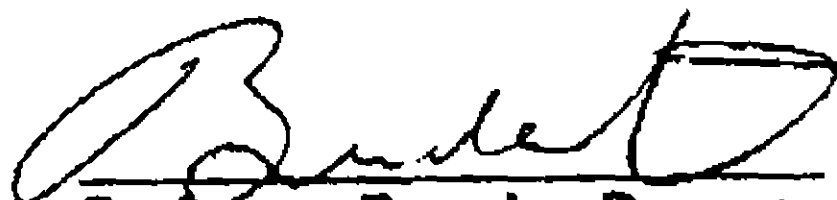
In terms of quality and safety I can also reassure you that all service providers awarded business from this contract meet all relevant legislation and standards pertaining to patient transport services as set down by the Taxi Regulator.

Since the contract was established I have been advised that in line with the contract management process two contract review meetings have taken place with the main customers in HSE using this contract and to date no significant problem have been reported.

In addition within procurement a database for registering any issues/complaints for this contract is in place and to date no significant issues have been highlighted in this regard.

I trust the above gives you the clarity you require. In addition I understand that Mr. Brian Gilroy, National Director of Commercial and Support Services personally contacted your office with regard to discussing this matter and this offer still stands if you require any further clarity.

Yours sincerely



Professor Brendan Drumm
Chief Executive Officer

Deck
if confusion about the process remains,
I would advise you to speak to Brian
Gilroy as outlined above
