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To ask the Minister for Health if a patient representative is informed of meetings due to take place between patients and HSE staff and or management in cases in which a patient has requested the presence of same; the person or body with responsibility to inform the patient representative; and if he will make a statement on the matter. -Anne Rabbitte

Dear Deputy Rabbitte

The Health Service Executive has been requested to reply directly to you in the context of the above Parliamentary Question, which you submitted to the Minister for Health for response. I have examined the matter and the following outlines the position.

It is best practice to involve patient representatives appointed by the patient where the patient requests it. If the patient has made it clear to the service that they wish all their dealings to be through their appointed representative then it is incumbent on the service to contact the patient representative.

In relation to open disclosure meetings the HSE Open Disclosure policy June 2019 states in section 3.9 that

“Health services providers must adequately prepare for an open disclosure meeting by giving due consideration to: (g) the provision of support to the patient and/or relevant person to assist them in preparing for and attending an open disclosure meeting e.g. advocacy support, patient information leaflet, appointment of a designated person, providing information on how the meeting will be conducted.”

It is at the discretion of the patient as to whether they wish to avail of the services of an independent patient advocate/representative to assist them in preparing for and attending an open disclosure meeting and if requested the health services provider would assist them in organising the same. Alternatively, the patient may choose to bring a family member or friend with them as an advocate. In services where a Patient Liaison officer is employed they may sometimes undertake this role.

In relation to adverse events there is an obligation on services to engage with service users following an adverse event to openly disclose the event to them and to advise them of the plan to review (this includes advising them of decisions where it is identified that no further review is required).

If a review is required there is an obligation on the Review Team to engage with the family to explain the purpose of the review i.e. learning, to outline the process, to listen to their perspective on the event, ask them if there are any questions that they would like to see addressed in the review and to

manage expectations i.e. explain what the review will not address i.e. staff disciplinary issues, compensation and advise on the routes that are available for this.

At all times families are welcome to bring a patient representative/advocate to any meeting, however whilst we may advise them of advocacy services available it is up to them to decide whether they wish to avail of an advocate or not. In circumstances where they chose to involve a patient representative/advocate any arrangements required for these persons to attend meetings with the family are a matter for the family. The service will of course facilitate meetings with the family but these arrangements are generally made directly with the family who in turn will advise their patient representative/advocate.

I trust this answers your question to your satisfaction.

Yours sincerely

Lorraine Murphy
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National Quality Improvement Team