

REGIONAL HEALTH FORUM - DUBLIN NORTH EAST

FÓRAM RÉIGIÚNACH SLÁINTE - BAILE ÁTHA CLIATH AGUS AN TOIRTHUAISCEART

MINUTES OF MEETING HELD ON MONDAY, 25TH NOVEMBER, 2024 AT 2:00PM

IN THE BOARDROOM, HSE OFFICES, BECTIVE STREET, KELLS, CO. MEATH
& VIA MICROSOFT TEAMS

Members Present (*in person*)

Cllr. Kieran Dennison

Cllr. John Paul Feeley

Cllr. Shane McGuinness

Members Present (*online*)

Cllr. Michelle Hall

Cllr. Bronagh McAree

Cllr. Fiona Mhic Conchoille

Cllr. Edel Moran

Cllr. Cat O'Driscoll

Cllr. Supriya Singh

Cllr. Aoibhinn Tormey

Apologies

Cllr. Christy Burke

Cllr. Mary McCamley

Cllr. Caroline O'Reilly

Cllr. Sarah Reilly

Cllr. Áine Smith

Cllr. Gillian Toole

Not in attendance

Cllr. Winston Bennett

Cllr. Eimear Carbone-Mangan

Cllr. Pdraig Coffey

Cllr. Donna Cooney

Cllr. Ruth Coppinger

Cllr. Séamus Coyle

Cllr. Deirdre Heney

Cllr. Tom Kitt

Cllr. Alan Lawes

Cllr. David Maxwell

Cllr. Ejiro O'Hare Stratton

Cllr. Gayle Ralph

Cllr. John Stephens

HSE Representatives Present (*in person*)

Mr. Liam McHale, Communications and Parliamentary Affairs, IHA Dublin North City & West

Ms. Josephine Collins, Primary Care, IHA Cavan Monaghan

Ms. Rosaleen Harlin, Communications Lead, HSE Dublin & North East

Ms. Katherine Kellett, Regional Health Office – HSE DNE

Ms. Lorraine Timmons, Regional Health Office – HSE DNE

HSE Representatives Present (*online*)

Ms. Michelle Forde, Head Of Primary Care covering Integrated Health Areas of Dublin North County and Dublin North City & West

Mr. Ed Murphy, Project Manager, HSE Tobacco Free Programme

Cllr. Kieran Dennison chaired the meeting.

1. Adoption of minutes of meeting held on Monday, 23rd September, 2024

The minutes of the meeting held on Monday, 23rd September, 2024 were adopted by the Forum on the proposal of Cllr. JP Feeley and seconded by Cllr. Michelle Hall.

2. Health Service Executive Updates

Mr. Liam McHale gave a report to the meeting which dealt with the following:

- HSE publishes 2023 National Safeguarding Office Annual Report;
- HSE launches Cervical Cancer Elimination action plan as latest figures show Ireland is on track to reach historic goal by 2040;
- Gynaecology 'See and Treat' clinics reducing waiting lists;
- HSE helping people reduce risk of type 2 diabetes with free intervention and support programmes;
- HSE encourages men to set simple, realistic and practical tactics to improve their health;
- Antibiotic Resistance on the rise – European Antibiotics Awareness Day.

The following outlines comments and queries raised by members and responses from HSE representatives:

- **Concern that the only pathway for gynae emergencies is the ED.**
A presentation on Women's Health will be organised.
- **Concerns in relation to BMI being used in clinical settings.**
Comments noted.

The report was noted by the Forum.

3. Presentation on HSE Tobacco Free Programme

Mr. Ed Murphy, Project Manager, HSE Tobacco Free Programme, gave a presentation to members on the HSE Tobacco Free Programme.

The following outlines comments and queries raised by members and responses from HSE representatives.

- **International perspective on e-cigarettes**
Ireland is similar to the rest of Europe and the United States in not recommending as a tool to quit smoking. England has made a recommendation for e-cigarettes to be used as smoking cessation aids. Australia has passed legislation to make e-cigarettes prescription only.
- **Links between e-cigarette manufacturers and the tobacco industry.**
The industry denies any direct links to the tobacco industry, however, it is known that the tobacco industry owns some of the larger vaping companies.
- **Update on the abolition of single-use vapes.**
A ban on single-use vapes has been proposed and is expected to become a Bill within the next 12-18 months.

- **Regulation of tobacco products at airports and possible under-reporting of these products in statistics.**

This matter would come under the remit of the Department of Health and Environmental Health and will be raised with them.

- **Suggestion of visit by a Public Health Nurse to support those trying to quit smoking, particularly for those who have been unsuccessful in the past and perhaps the older population.**

The HSE operate a 'Making Every Contact Count' training programme which involves having short conversations with patients / clients in relation to behaviour changes such as tobacco use, alcohol use, physical activity or healthy eating. Where a person has been diagnosed with a disease related to tobacco use, every healthcare interaction should be used as an opportunity by healthcare professionals to encourage and support the person to quit. The HSE also has a cohort of very well trained stop smoking advisors who can support the person on their journey and help them to be as successful as possible. It was also agreed that public health should also be able to follow as well.

- **Concern that banning e-cigarettes may lead young people to turn to back to smoking tobacco.**

There is currently no evidence in this regard and smoking tobacco by young people has significantly decreased in the last 30 years.

- **Education in schools on harmful ingredients in vapes.**

There is a misconception around e-cigarettes that they are harm-free devices. Advertising is placing these products as health adjacent, with healthy flavours, etc.

The HSE has developed SPHE lessons for junior cycles and a webinar was held recently with the National Association of Principals and Deputies with a view to including in the curriculum. Resources for out-of-school settings have also been produced. Funding has also been secured for a campaign on youth prevention for e-cigarettes.

4. Motions

That the HSE implement the recommendations in the National Clinical Practice Guideline Assessment and Management of Stress Urinary Incontinence in Women. Currently, the mid-urethral sling is not available to women with SUI in Ireland, an outlier with the UK compared with most of Europe and developed countries. By implementing the latest guidelines, the Regional Health Forum supports the rights of women to make informed choices about their bodies. Also, that the HSE will also release the report and recommendations from the HSE National Vaginal Mesh Implant Oversight Group to this Forum.

Cllr. Michelle Hall

Cllr. Michelle Hall proposed the Motion and it was seconded by Cllr. Cat O'Driscoll.

Cllr. Hall provided some background to the Motion. She outlined that there has been a pause on vaginal mesh implants since 2018 following adverse reactions by a small number of women. Six years later, there has been a national vaginal mesh implant oversight group who have made recommendations to the Government and guidelines have been published through the Royal College of Surgeons in Ireland.

Cllr. Hall outlined that the CMO report states that the best evidence for the long term repair of Stress Urinary Incontinence in Women is surgical. However, recommendations were made for patient information and consent, professional training, an accreditation system and a national mesh register.

Cllr. Hall read through some of the key points of the 2023 National Clinical Practice Guidelines, firstly noting that women with this chronic severe condition have to plan every minute of their lives, within a society where public toilets are largely unavailable and the subject is still seen as taboo.

- The pathway for the specialised care and management of SUI is surgical treatment - Mid-Urethral Slings, Colposuspension, Pubovaginal Slings, Retropubic tape or Transobturator tape.
- There is a very conservative way of looking at stress incontinence, firstly where consultants perform basic investigations, which may be followed by urodynamics.
- Non-surgical therapy is always the first line of treatment and women should be fully informed regarding treatment options.
- In women with SUI, or stress-predominant mixed urinary incontinence, who are considering surgery, it is recommended that physicians should offer the following treatment options: no further treatment, pelvic floor physiotherapy, non-surgical options or surgical treatment.
- All surgical procedures are registered with the HPRA.
- Surgery for SUI should only be undertaken by appropriately trained surgeons who undertake such operations regularly, and who work within a Multidisciplinary Team.
- Mesh implants should only be considered after all the options for conservative and non-mesh surgery have been discussed.

Cllr. Hall stated that the objectives are that women are informed about their choices, but women in Ireland are not being given the choice to have the surgery. Six years later, there are women on waiting lists who have been told they could have this surgery because the recommendations have been given by the experts to the Government. And yet, they still no further on, in that they are not allowed to make informed choices about their body.

Cllr. Hall stated that the objective of the report was to provide evidence-based recommendations for the care of women with SUI as well as promoting a standardised approach nationally across all maternity units in general hospitals where gynaecological services are in place. She updated members on the stakeholders involved.

Cllr. Hall stated that the SUI conclusion is a common condition affecting one in ten women over the age of 60 years. The choice of operation is dependent on surgical skill and training, resources and an individual woman's preference. Given the emerging mesh complications of recent years, caution is advised when considering changing practice outside of a research context without long-term follow up data.

She also mentioned sections on informed consent, an extensive literature review, governance arrangements and communications.

The Chairperson asked for a copy of the Guidelines which Cllr. Hall agreed to forward.

Cllr. Hall also spoke about the cost to women throughout their whole lives; from teenager to end of life, and products not covered by medical cards, e.g. urinary incontinence and quoted from the report "Urinary incontinence is a potentially debilitating social problem, with significant cost implications to the individuals and the healthcare service. In the UK

an estimated more than GBP 178 million (1999/2000 GBP) is borne by women on an individual basis annually. This constitutes a significant individual financial burden. In Ireland, there is no statutory requirement to provide products for incontinence, so each healthcare group has developed their own policy and guidelines. As a result, there is a wide variation of access to the provision of incontinence and containment products resulting in cost pressures and disproportionate distractions from best clinical practice.” Cllr. Hall stated that most people don’t recognise the huge costs involved for urinary incontinence.

Cllr. Hall called for the report to be issued and the recommendations implemented. She called on the CMO and the Minister for Health to allow women to make informed choices about their bodies.

Cllr. Hall expressed disappointment with the response given to her Motion and stated that it did not provide an answer.

Cllr. Hall also drew attention to the fact there was no HSE representative available at the meeting to speak to her Motion. Cllr. Hall was informed that a representative was invited to attend but was not available.

The Motion was adopted by the Forum.

To ask the HSE to provide improved Ophthalmology Services for the people of County Cavan.

Cllr. Áine Smith

Cllr. Smith was not in attendance so the Motion was not moved.

That the HSE initiate improvements to the patient experience in Beaumont A&E with immediate effect.

Cllr. Aoibhinn Tormey

Cllr. Tormey was not in attendance so the Motion was not moved.

5. Questions

The responses to the Questions were noted.

6. Chairperson’s Correspondence

Regional Health Forums and Health Regions

The Chairperson updated members on the reformation of the fora across the country.

He outlined that in September, the CEO of the HSE, Bernard Gloster, received a letter from the Department of Health outlining proposals to change the current fora to six. Under these proposals, the geographic area of the Dublin North East Regional Health Forum will not change but the number of members would increase to 34.

The Chairperson informed members further direction is awaited from the Department of Health in relation to the allocation of extra members, and due to the Dáil having been dissolved for the General Election, information would not be expected until a new Minister for Health is in place.

7. Date and time of next meeting

The next meeting of the Regional Health Forum - Dublin North East will take place on Monday, 27th January, 2025.

Signed:

Chairperson