

REGIONAL HEALTH FORUM - DUBLIN NORTH EAST

FÓRAM RÉIGIÚNACH SLÁINTE - BAILE ÁTHA CLIATH AGUS AN TÓIRTHUISCEART

MINUTES OF MEETING HELD ON MONDAY, 22ND MAY, 2023 AT 2:00PM

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

Members Present (*in person*)

Cllr. Michael Gallagher

Cllr. Adrian Henchy

Cllr. Gillian Toole

Members Present (*online*)

Cllr. Christy Burke

Cllr. Mary Callaghan

Cllr. Kieran Dennison

Cllr. Aiden Fitzpatrick

Cllr. Tom Kitt

Cllr. David Maxwell

Cllr. Brian McKenna

Cllr. Kevin Meenan

Cllr. Trevor Smith

Cllr. Aoibhinn Tormey

Apologies

Cllr. Donna Cooney

Cllr. Howard Mahony

Cllr. Brigid Manton

Cllr. Emer Tóibín

Not in attendance

Cllr. Daryl Barron

Cllr. Tom Behan

Cllr. Séamus Coyle

Cllr. Michelle Hall

Cllr. Deirdre Heney

Cllr. Conor Keelan

Cllr. Sean Kelly

Cllr. Ray McAdam

Cllr. Patricia Roe

HSE Representatives Present (*in person*)

Ms. Mellany McLoone, Chief Officer, CHO Dublin North City & County

Mr. Liam McHale, Communications and Parliamentary Affairs, CHO Dublin North City & County

Mr. Liam Woods, National Director, RHA Implementation

Mr. Ray Bonnar, Change, Planning and Delivery, Health Regions Programme

Ms. Martina O'Byrne, Head of HR, Midlands Louth Meath CHO

Ms. Jackie Barron, General Manager, Louth / Meath

Mr. Frank Kennedy, Disability Manager, Meath

Mr. Gearóid Rennicks, Communications & Press Officer, Ireland East Hospital Group

Ms. Katherine Kellett, Regional Health Office – HSE DNE

Ms. Lorraine Timmons, Regional Health Office – HSE DNE

HSE Representatives Present (*online*)

Ms. Dermot Monaghan, Chief Officer, Community Healthcare Cavan, Donegal, Leitrim, Monaghan, Sligo

Cllr. Adrian Henchy chaired the meeting.

1. Adoption of minutes of meeting held on Monday, 27th March, 2023

The minutes of the meeting held on Monday, 27th March, 2023 were adopted by the Forum on the proposal of Cllr. Gillian Toole and seconded by Cllr. Brian McKenna.

2. Health Service Executive Updates

Mr. Liam McHale, Communications and Parliamentary Affairs, CHO Dublin North City and County, gave a report to the meeting which dealt with the following:

- Taoiseach and Minister for Health officially open new wing at The Mater Hospital and launch next phase of trauma services;
- Every dose counts – HSE marks European Immunisation Week 2023;
- HSE NCCP participates in new European consortium on cancer;
- HSE Addiction Services create naloxone street art to launch new naloxone resources;
- All-Ireland Conference honours midwives on International Day of the Midwife;
- HSE National Cancer Control Programme and Healthy Ireland urge people to be SunSmart and protect your skin when outdoors;
- Be tick aware: protect against Lyme disease, says HSE HPSC.

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

Possibility of providing sunscreen dispensers in public areas

A response was previously circulated on this issue. An update will be provided. It was also suggested that members may raise with their own local authority.

Request for Midlands Louth Meath Delivery Plan

It was agreed that the Delivery Plan would be circulated and that any questions or queries to be submitted through the Regional Health Office.

Details of funding for respite services in Meath

An update was provided by Mr. Frank Kennedy on funding for children and adult respite services in County Meath.

Request that letter issue to the Health Products Regulatory Authority (HPRA) on behalf of the Forum in relation to nitrous oxide.

It was agreed to link with councillor in relation to proposed letter.

Review of excess mortality rates

An update will be provided.

The report was noted by the Forum.

3. Presentation on RHAs

Mr. Liam Woods, National Director, RHA Implementation, gave a presentation to members on RHAs.

The following outlines comments and queries raised by members and responses from Mr. Woods.

Cost of aligning hospital and community-based services

The HSE National Service Plan 2023 has provided an additional €7m which will primarily be associated with salary costs for the six Chief Executive Officers, along with small additional teams within the RHAs. Hospital Group CEO and CHO Chief Officer posts will no longer exist. The larger number of senior posts will be within the National Centre of the HSE and it is intended that some of those posts will migrate to regional roles. Other than the €7m, there is no additional funding for RHA implementation and it is likely the total number of senior posts after this change will be lower.

Concerns in relation to additional layers of management

Learnings from various structural changes and experience has shown that providing the management of all services under a single leadership and a geography works best. However, previously, the required investment was not available to support these structures.

The Chief Executive Officers of each RHA will report to the CEO of HSE. This differs from the current position where the Chief Officer of each CHO reports to the Director of Community Operations, who then reports to a Chief Operating Officer (COO), who in turn then reports to the CEO. Therefore, there will in actuality be a reduction in layers.

The HSE are being careful in not creating six new HSEs, but to create entities that are functional for their populations. Posts under the CEO of the RHA will be managing services across the geography with the intention to integrate services under singular service leadership within an RHA.

Clarification on data being used by the Advisory Group on Population Based Resource Allocation

The Advisory Group are due to meet in the next number of months and will use the latest census data available.

Similarity to language used and promises made when downgrading Monaghan Hospital

The new structure is about enabling; it is not about promising anything additional in service terms. Service commitments will be dealt with separately. The expectation is to deliver on new structures that enable integrated care along with appropriate investment for the expanding demography and aging population.

Anticipation of any issues with staff transfers

A number of meetings have been held with the National Joint Council (NJC) and the relevant unions to appraise of developments and plans. The HSE CEO and the National Director of HR have also met the Fórsa trade union. The HSE has agreed to a very open relationship as the transformation progresses and will continue to engage with staff.

Effect to Our Lady's Hospital, Navan

There will be no direct impact on Our Lady's Hospital arising from any of the changes. Our Lady's Hospital Navan and Our Lady of Lourdes Hospital Drogheda will now come under the same RHA and it is expected that this may further support the flow of patients and clinical criteria.

Clarification on how the changes will apply at an individual level and how services will differ

Evidence and personal experience suggests that when a person is in the health system for personal and social services, it is a good system and well regarded by the people who use it. However, the biggest challenge for individuals is access to elective care and timely access to emergency care.

The contention in Sláintecare is that providing singular leadership will allow for sensible decisions at local level without splitting budgets or services across community and hospitals. Along with joining services, joining the management of services as well will work better. It is well understood through international evidence that joined up services, closer to peoples' homes, makes sense and that is what is being invested in at present.

Potential for imbalance within Hospital Groups

The Ireland East Hospital Group (IEHG) will split into a North and South piece. There is a high propensity for people to go to their nearest hospital and the movement of patients to the Mater Hospital and Beaumont Hospital for routine treatment is very much North City and County based, with very little movement across the South in service terms, with the exception of obstetrics. Tallaght Hospital, St. James' Hospital and St. Vincent's Hospital are significantly resourced to meet South city and South west requirements.

The changes are not seen as causing an imbalance and patients will continue to have the freedom to choose where they go.

Battle between hospitals and communities in terms of resources - historically worked apart

It is recognised that one of the factors that can influence the success of moving towards more integrated care is the desire for services to maintain their own controls internally. However, the focus has to be on the patient and not the location of care. This has been flagged in Sláintecare as having a strong focus in time on health outcomes.

Working within certain frameworks, Sláintecare is very clear that investment needs to follow the patient and service user.

Integration with Northern Ireland

Meetings have taken place with the CEO of Cooperation And Working Together (CAWT) to update on plans and discuss links. Some connections are already in place across hospitals in the North and South and these will continue.

Wish for patients to travel to where best treatment is available, e.g. cancer services

The National Cancer Care Programme (NCCP) will continue to make decisions on where cancer care services are provided and how. The new developments will not alter any aspects of existing centres of excellence and will support more care in the home or close to home..

Structure of Fora

Legislation will be amended to align geographies introduce two new Fora regions. The Regional Health Forum – Dublin North East will not change as it is already aligned to an RHA..

4. Motions

That the HSE report on what measures it is taking to reduce staff burnout, with particular reference to CHO DNCC.

Cllr. Aoibhinn Tormey

Cllr. Tormey stated that the response provided did not give much confidence in adequate supports for staff. She outlined her reason for submitting the Motion in the first instance as being due to the limitations of the of Staff Health and Wellbeing fund in terms of what could actually be applied for, stating that many wellbeing courses were classed under the initiative as being too expensive to be funded.

Cllr. Tormey referred to the impact of political pressure on staff and queried the level of interaction and dialogue with public representatives on the matter.

Cllr. Tormey referred to the Staff Survey 2022 and dissatisfaction from staff with management, querying any actions from the survey.

A request was also made for further information on the role of Psychosocial Lead.

The councillor also referred to recent research on the benefits of a four-day working week and asked had this been examined in respect of HSE staff.

Cllr. Tormey acknowledged the pressure on staff, particularly within Children's Disability Services, and the large number of vacancies, and stressed the importance of looking after staff, especially those in challenging services. She stated that she felt more could be done to promote wellbeing in these areas.

Ms. Mellany McLoone, Chief Officer expressed disappointment that Cllr. Tormey believed the response did not answer the question submitted, and stated that extensive supports are available to staff within CHO DNCC.

Ms. McLoone agreed with Cllr. Tormey's comments in relation to the impact of political pressure on staff and acknowledged that public representative PQs and Reps provide a good indication as to the pressure points being experienced in constituencies. An update was provided on an initiative undertaken by CHO DNCC in 2022 arising from the large number of PQs and Reps being received in relation to Children's Disability Services. A meeting was organised with local public representatives to provide an outline of work being undertaken and efforts being made, the position to date and an acknowledgment of shortcomings, particularly in relation to access.

In regards to the Staff Survey, it was outlined that a lot of work has been accomplished as a direct result of the survey, e.g. the Staff Health and Wellbeing Working Group and Fund. It was explained that following the Survey each year, an Action Plan is prepared and circulated.

Ms. McLoone advised that the Psychosocial Lead has been in place since late 2022 and the role involves work on resilience building, particularly around teams. Ms. McLoone also stated that CHO DNCC funded their own Employee Assistance Programme Counsellor for CHO DNCC who deals with staff on an individual basis.

With regard to the suggestion of a four-day week, Ms. McLoone stated that healthcare is a seven-day business. However, the proposal is being examined in the context of the new Consultants Contract. The challenges to the initiative were outlined in terms of additional resources, risk of lower levels of service and funding.

Ms. McLoone outlined that research undertaken to date has been within the private sector and any such proposals for the health service is a Government decision in the context of the broader public sector.

Ms. McLoone also referred to a number initiatives also currently underway in CHO DNCC such as the forthcoming Staff App and the series of Staff Information Sessions on Sláintecare currently taking place around the region.

5. Questions

The responses to the Questions were noted.

6. Chairperson's Correspondence

There was no business under this item.

7. Date and time of next meeting

The next meeting of the Regional Health Forum - Dublin North East will take place on Monday, 24th July, 2023.

Signed:

_____ **Chairperson**