

HSE Technology and Transformation Committee Special Meeting Minutes

A special meeting of the HSE Technology and Transformation Committee was held on Thursday 3rd November 2022 at 14:00 via video conference.

Members Present: Tim Hynes (Chair), Fergus O'Kelly, Brendan Whelan, Barry Lowry, Martin McCormack, Rosaleen Killalea.

HSE Executive Attendance: Dean Sullivan (Chief Strategy Officer), John Ward (Interim Chief Technology Transformation Officer), Mairead Dolan (Chief Financial Officer), Michael Redmond (Chief Operations Officer eHealth), Dara Purcell (Secretary).

All figures provided in this document are accurate at the time of recording but are subject to change.

1. Governance and Administration

1.1 Declarations of Interest

No conflicts of interest were declared.

2. eHealth and ICT Capital Plan 2023

The CTTO provided an overview of the eHealth and ICT Capital Plan 2023 and its current timeline which was circulated to the Committee in advance of the meeting for their consideration. He informed the Committee that Draft 1 of the ICT Capital Plan had been issued to the Department of Health.

The CTTO confirmed that the ICT and eHealth capital funding available in 2023 is €140m, an increase of €10m (7.69%) from 2022. He advised that the public health service is underpinned by a vast technology landscape which is the largest ICT operating environment in the state and this requires ongoing and significant investment in order to stay current, and to ensure security and protection. In addition to the ICT Capital funding made available in 2023, an additional ICT Capital funding amount of €23.5M had been provided at the end for 2022 which has allowed for a "pull forward" of planned investment from 2023. An additional €40M has also been provided as 'once off' for Cyber resilience, and a proportion of this funding has been used to address foundational technology investment that pose a Cyber risk.



The CTTO confirmed that there are a significant number of Board approved priorities that have been allocated funding under the Plan's National Programmes. These include the Integrated Financial Management System (IFMS), Children's Health Ireland Electronic Health Record (CHI EHR), National Integrated Medical Imaging System (NIMIS), National Medical Laboratory Imaging System (MedLIS) & Maternal/Newborn services. These account for €67.47M in 2023, or 48.2% of available ICT Capital funding.

In relation to HSE Transformation Priorities, the CTTO advised that community is a key area of focus with both Integrated Community Case Management System (ICCMS) and Enhanced Community Care (ECC) obtaining a funding allocation to complete scoping and requirements. In addition, a number of public health systems need to be modernised post-COVID, including a National Vaccination System and an Outbreak Management and Surveillance system.

The Chair invited Committee members to provide comments on the draft and the Committee noted the proposed timelines. It was noted that the Committee is not signing off on the Plan but instead providing comments before it is submitted to the Department of Health as part of the National Service Plan 2023.

The Committee suggested that the language used in some sections of the Plan should be clearer and that a glossary and table of abbreviations should be included. The importance of coherency and clarity in the Plan was emphasised, and the Committee advised that the Plan needs a specific outline of service, stating clearly where sufficient and insufficient levels of investment are expected. It was highlighted that it is important to understand how additional investment will improve the service and what outcomes are expected from this investment. The Committee requested that a separate document on these outcomes should be developed to accompany the Plan.

In relation to queries on the difference between eHealth and ICT, the COO eHealth explained that ICT encompasses eHealth. The Committee noted that the distinction between the two should be highlighted clearly in the Plan, particularly as elements relating to eHealth will need to be transformational.

The Committee discussed the proposed funding provided under different sections and noted that there was not much spending on transformative projects outlined. The COO of eHealth advised that the percentage was misleading as most of the projects are transformative in nature. The Committee asked that the distinction between transformative projects and corporate reform projects is defined as

HE

it should be clear where this split is. It was stated that three elements which should be outlined when categorising projects are: what's a priority; what will the project do, and is the project a corporate or

eHealth project.

The Committee queried the level of community spending (5% - €7.2m) which, by comparison to the

acute investment (19% - €27.1m), seemed low. The COO of eHealth confirmed that the acute funding

allocation is significantly larger as hospitals need the most funding to keep their systems running but

there are projects currently underway which should result for more provision for community services

in the future. The Committee recommended that in future, the acute funding should not only be used

to patch current systems and instead should be used to work towards transformative projects. It was

suggested that there should be significant engagement with Community services (e.g. GPs and

Community nurses) to assist with development of such projects.

The Committee discussed the main risks to the delivery of the plan: cyber-attack, recruitment of

additional technology and change expertise, recruitment against the agreed and funded workforce

plan, and COVID-19. It was agreed that the CTTO would provide the Committee with more details on

these risks and where they sit in the wider HSE risk matrix.

In relation to the overall character of the Plan, the Committee emphasised that the benefits of the Plan

for patients, users and personnel need to be made clear. The Committee also advised that the Plan

must be more clearly aligned with the objectives of the HSE Corporate Plan 2021-24.

The CSO thanked the Committee for their comments and advised that they would be reflected in the

next draft of the Plan which would be circulated to the Committee in advance of its submission to the

Department of Health.

3. A.O.B

Nothing was raised under this item.

The meeting concluded at 15:05

Signed:

Chairperson

Date:

19/01/23

3