

### **Minutes of HSE Board Meeting**

Wednesday 29 May 2024

A meeting of the Board of the Health Service Executive was held on Wednesday 29 May 2024 at 12:00pm in the Boardroom, Dr Steevens' Hospital.

**Present:** Mr Ciarán Devane (Chairperson), Prof Deirdre Madden (Deputy Chairperson), Dr Yvonne Traynor, Mr Brendan Whelan, Mr Aogán Ó Fearghaíl, Mr Fergus Finlay, Dr Sarah McLoughlin, Ms Anne Carrigy, Ms Michelle O'Sullivan and Mr Matt Walsh

Apologies: Mr Tim Hynes and Prof Fergus O'Kelly

## In Attendance for Board Meeting:

Mr Bernard Gloster (CEO), Mr Brian Murphy (Head of Corporate Affairs), Ms Niamh Doody (Executive Business Manager), Mr Dara Purcell (Corporate Secretary), Ms Niamh Drew (Deputy Corporate Secretary), Ms Patricia Perry (Office of the Board)

# Joined the meeting:

Mr Stephen Donnelly TD (Minister for Health), Mr Robert Watt (Secretary General DoH), Ms Susan Mitchell (Special Advisor to Minister), Dr Andy Philips (REO South East), Ms Kate Killen White (REO Dublin & Midlands), Ms Sara Long (REO Dublin & North East), Ms Sandra Broderick (REO Mid West), Mr Tony Canavan (REO West & North West), Mr Stephen Mulvany (Chief Financial Officer), Mr Damien McCallion (Chief Operations Officer), Mr Patrick Lynch (A/Chief Strategy Officer), Mr Mark Brennock (ND Communications), Dr Colm Henry (Chief Clinical Officer), Mr Robert Kidd (Acting ND Acute Operations), Mr John Delamere (AND HR), Mr David Walsh (ND Community Operations), Ms Miin Alikhan (AND Strategic Planning and Reporting)

Minutes reflect the order in which items were considered and are numbered in accordance with the original agenda. All performance/activity data used in this document refers to the latest information available at the time.

## 1. Board Members Private Discussion

The Chairperson welcomed members to the meeting and provided an update to the Board during their private session on several matters.

CEO and Executive Business Manager joined the meeting



#### 2. Governance and Administration

#### 2.1 Declarations of Interest

No conflicts of interest were declared.

### 2.2 Ministerial Correspondence

The Board noted correspondence received relating to:

- Letter from Minister for Health re 2023 Final Approved Level of Net Expenditure dated 08 May 2024
- Letter to Minister for Health re NIMS 22759675 External Review dated 13 May 2024
- Letter from Minister for Health re Health Performance Visualisation Platform dated 27 May 2024 encl. Irish Government Economic and Evaluation Service (IGEES) Analytical Paper 2024

### 2.3 Public Only Consultants Contract

The Board discussed the Public Only Consultants Contract in advance of the meeting with the Minister for Health and Secretary General of the Department of Health.

#### 2.4 Minutes of Board meeting

The Board approved the minutes of the Board meeting of 26 April 2024.

A Board member requested an update in relation to genetics and genomics testing, discussed at the April Board meeting. It was agreed that a response would be forwarded to the Board member.

#### 3. Meeting with Minister for Health

Stephen Donnelly Minster for Health, Robert Watt Secretary General and Susan Mitchell Special Advisor joined the meeting **3.1 Presentation re Consultants** 

The Chairperson welcomed Minister Donnelly, Robert Watt, Secretary General and Susan Mitchell, Special Advisor to the meeting of the Board.

The Minister welcomed the opportunity to meet with the Board to discuss the implementation of the Public Only Consultant Contract (POCC), noting that uptake of the contract enables opportunities for the move towards universal, single-tiered healthcare and the increasingly positive impact on the delivery of healthcare leading to reductions on waiting lists.

He highlighted that the other core objective of implementing the POCC is to enhance senior decision maker presence on-site, out of hours and at weekends and that this would ensure that senior decision makers were present and delivering patient care when demand was at its highest. The Minister raised concerns that while there was strong interest and take up of the contract, the impact



on working practices and activity at site level has been challenging to quantify and there is a need to see that the increased capacity, which has now been funded, appearing in the number of clinical sessions made available.

Regarding the implementation of the Injury Unit plan, with specific reference to the standardisation of opening hours provided for in 2024. It was noted that a specific detailed report with measurable performance will be presented to the Board for approval in July 2024 to deal specifically with the standardisation of hours and will address the Minister's concerns on this matter.

The Minister noted that with the establishment of the six new Health Regions, there was an opportunity to realign culture, accountability and performance in the Regions. The Board has recognised the need for each Regional Executive Officer (REO) to be allocated very clear deliverables / targets and held to account for the management of these, and that this was core to delivering better health services throughout the country.

It was noted that this will be better supported with the full implementation of the Health Performance Visualisation Platform (HPVP) and the work of the newly established Productivity Unit, which will provide the Board with greater transparency of data which the Minister had highlighted as one of his concerns. He noted that this along with deploying increased levels of senior clinical capacity would support and address access.

The Minister highlighted that the National Service Plan (NSP) 2024 had set a new-to-return ratio target of 1:2.0 for out-patient attendances, however current data was showing 1:2.5. The Board confirmed that they will be monitoring the implementation of best practice approaches to follow up care, as this will be important in achieving the target.

Following discussions on the above areas, it was agreed that the Board would discuss further with the CEO and revert back to the Minister with a detailed response of the topics raised. *Minster for Health, Secretary General and Special Advisor left the meeting.* 

#### 4. Chief Executive Officer

REOs, COO and CFO joined the meeting

#### 4.1 CEO Report

The Chair welcomed the REOs, COO and CFO to the meeting and the CEO Report was taken as read. The CEO reported to the Board on a number of the key significant areas as set out in the report relating to operational matters, strategic objectives, Ministerial priorities and organisational change.



Discussions were held on the following aspects of the report.

# Employment Control & Industrial Relations

The CEO confirmed that approval for the Pay and Numbers Strategy has yet to be received. He informed the Board that at present it is not possible to meet our pay targets or control mechanisms and there is risk attaching to the current position. He noted appropriate steps are being taken to mitigate, but as the half year mark is approaching this is becoming more concerning. The CEO highlighted that any strategy now agreed will only have full year effect in 2025.

## Navan Hospital

The CEO confirmed that he had reviewed the first report from the group charged with addressing matters in respect of Navan Hospital / Northeast and that he is consulting with the Department of Health (DoH) on this. He noted that he has reverted to the group seeking a number of clarifications and he will advise the Board further upon receipt.

## Organisational Change

The Board welcomed that the new governance systems at national and regional levels are due to commence at the top line of management from 10 June 2024 and all previous structures will end at that time.

## Safeguarding

The Board were informed that recruitment for the new position of Chief Social Worker is at the final stage. The CEO also confirmed that he intends to publish the McIlroy report with implementation plans in the second week of June. The Board welcomed the publication and agreed that the Safety and Quality Committee will monitor implementation of recommendations, and that this will bring to fruition a major improvement plan in this complex and concerning area of our work.

## Finance

The Board were informed that the draft revenue I&E financial position at the end of April 2024 shows a YTD deficit of €809.2m (10.7%). This variance includes net deficits of €669.2m in Acute Operations, €158.4m in Community and €68.8m in Pension and Demand Led Areas, partially offset by a surplus of (€87.1m) in Other Operations / Support Services.

The CEO confirmed that a bottom up projection exercise based on Q1 financial results is currently near completion and that this will further inform the YTD results and will also be the first projections completed which will be based on the new Health Regions. He also noted that as part of the



monthly reporting from the REOs, he will be seeking to minimise the level of financial deficit and supplementary that will arise by focusing on improving financial controls and increasing productivity in line with NSP 2024, with particular focus on pay and staffing.

Independent Review of Paediatric Orthopaedic Surgery Service at CHI and Dublin Hospitals The Board were informed that Phase one of the review of the relevant areas of orthopaedic surgery in CHI at Temple Street is approaching completion. The CEO confirmed that the reviewer is at drafting stage, but the date of completion is subject to the time required for due process and fair

procedures. The CEO will provide a further briefing to the Board in June.

## National Digital Framework

The Board welcomed the launch of The National Digital Framework. The Framework sets out a roadmap to digitally transform health services in Ireland and improve access for patients. It had been reviewed and supported by the Boards Transformation and Technology Committee commencing in Q4 2023 with further review and discussions during Q1 2024. The CEO confirmed that this year will see the roll-out of a patient app that will provide people with important medical history and records. This will be followed next year with the rollout of a 'Shared Care Record' to integrate patient records, no matter what part of the health service they engage with.

In addition, a commitment from Government has also been given with regards to a regional electronic health record, estimated to cost between €250-300m per Health Region. The Board agreed that this will need to be prominent in NSP 2025.

#### University Hospital Limerick (UHL)

An update was provided to the Board on UHL performance.

## 4.2 Board Strategic Scorecard

Reviewing the Board Strategic Scorecard (BSS), the CEO informed the Board that the May 2024 BSS reports on March 2024 KPI data and includes the most current progress update of key deliverables across all 19 Scorecards at the time of reporting.

The CEO confirmed that two Scorecards reported an upgrade in their rating and one Scorecard reported a downgrade. He advised that the Pay and Numbers Strategy until finalised continues to impact the reporting of data and progress of deliverables across four Scorecards.

The Board considered the BSS presented and provided feedback relating to a number of Scorecards.



The Board approved the BSS for May 2024, reflecting March 2024 data, for submission to the Minister for Health, and a copy to be sent to the Department of Children, Equality, Disability, Integration and Youth.

### 5. Committees of the Board Briefings

#### 5.1 Audit and Risk Committee

The minutes of the Committee meeting of 12 April 2024 were noted.

The Committee Chairperson provided a verbal report on the matters considered at the Committee meeting that took place on 10 May 2024 as follows.

The Committee were provided with an update in relation to the Health Regions Programme Implementation with specific reference to functions under the remit of the Committee and how they will be structured and populated. The Committee discussed the span of control for both the CEO and the REOs and the Integrated Healthcare Areas (IHA) management structures, and requested that once the structure is finally established, a comparison on the number of people in Senior Management positions (AND upwards) pre and post restructuring be supplied to the Committee.

The Committee were provided with an update from the Deputy Director, Comptroller & Auditor General (C&AG) on the progress to date of the audit for the year ended 31 December 2023 and were advised that the final audit is ongoing and that there are a number of key account areas where information and explanations were awaited. It was noted at that meeting that the estimated completion date for all outstanding work for submission to the C&AG was 31 May 2024.

The Committee Chair advised the Board that a further update was provided by the Asst CFO since the Committee meeting of 10 May 2024 and that the C&AG's deadline of 31 May 2024 will now not be met. He advised that the financial statements are ready and final changes to the Statement of Internal Control (SIC) arising from the C&AG are not anticipated to be material. The Committee will meet on 7 June 2024 to review matters and will then make recommendations for final approval by the Board at its meeting on 28 June 2024.

The Committee reviewed and noted documentation relating to the SIC; Operating and Finance Review (OFR); Letter of Representation 2023; and the Chair's Comprehensive Report.



The Committee received updates in relation to the YTD Financial Position as at March 2024, Supplementary 2023 and noted the March Performance by Health Region.

The Committee had considered the detail of proposed contracts and properties, and recommended approval to the Board.

The Committee was presented with the Q1 2024 Corporate Risk Register Report (CRR), and noted that since January 2024, for a majority of risks, there had been no significant changes noted to risk ratings or key controls and key actions.

The Committee reviewed the HSE Corporate and Operational Strategic Legal Matters report for September 2023 to March 2024, and in the course of reviewing the report, further information on a Section 39 organisation was requested, which was brought to the Planning and Performance Committee meeting of 24 May 2024.

The Committee discussed the high level of legal challenges and consequent legal costs for the HSE with the Assessment of Need process in the disability sector, which requires urgent attention both for financial and service impact reasons.

The Committee received an update in relation to the Primary Care Centres – Operational Lease Model (OLM), and noted the Quarterly Report on delegated authority for property transactions approved between  $\leq 2m \& \leq 10m$  and low value/nominal CAT 3a transactions for the period of 01 January – 31 March 2024.

The Committee received a report which showed the comparison of contract amounts for major capital projects approved by the Board with the final outturn for those projects, and asked that a similar analysis of projects that are still in progress be conducted, comparing the forecast outcome and the original approval.

The Committee were provided with the Internal Audit Q1 2024 Report (IA Reports and IA Recommendations Monitoring), including Post Audit Client Surveys and Quality Assurance and Improvement Programme. The Committee noted that the result of Q1 2024 audits reported showed a similar unsatisfactory/limited assurance profile to previous quarters.

The Committee were joined by the CPO for the discussion of an IA report with regard to Compliance with HSE/HR Employment Controls and Recruitment Restrictions, and were advised that



management had accepted the two medium recommendations in respect to offers of contracts of employment, and that they were being implemented.

The Committee received an update in relation to an Internal Audit Industrial Relations matter.

# 5.2 People and Culture Committee

The minutes of the Committee meeting of 12 March 2024 and HR Dashboard (March data) were noted.

The Committee Chairperson presented to the Board the amended version of the Terms of Reference, which was approved by the Board. **Decision No.: 290524/19** 

The Chairperson provided a verbal report on the matters considered at the Committee meeting that took place on 10 May 2024.

The Committee were presented with the Internal Communications report which included an update in relation to the current communications activities including the staff communications relating to the Health Regions, the launch of the HSE Menopause Policy with almost 8,000 staff visiting the policy content since the launch in April; the support with the development of communications materials and a communications plan for the HSE Disability Survey; and the HSE Policy for the Prevention and Management of Work-Related Stress.

The HR Bi-Monthly report was presented to the Committee, which included an update in relation to staffing the Health Regions and the HSE Centre, noting the next phase of the implementation plan is the advertisement of the IHA Manager posts.

The Committee discussed the Sick Leave with Pay (SLWP) – Long Covid scheme for HSE employees; the HSE involvement in the Displaced Talent for Europe – DT4E with the recruitment of personnel with skills in Cybersecurity/IT professionals and network field technicians/engineers.

The Committee were provided with an update on the progress of the Recruitment Resourcing and Retention Strategy.

The Committee noted the Internal Management Data Dashboard and requested some changes to the data provided, and the discussion relating to the 2024 Pay & Numbers Strategy was deferred until finalised.



The Committee were briefed on progress in relation to the Health Regions Programme; and with an update on the CRR review, and discussed the draft Q1 2024 CRR.

The Committee were provided with an update on the HSE Staff Disability Survey report findings, noting that 17% of the respondents to the survey have a disability. With continued commitment, developments in training, awareness-raising, policy and communication, the HSE will continue to increase the percentage of its workforce declaring a disability.

The Committee received a summary of the disability workforce for the HSE and Section 38 agencies as reported in the HSE census February 2024. This showed an increase in the last 4 years of 14.7%. The Committee were advised of the actions that are or will have a direct impact on the Disability service, relating to the recruitment and retention of nurses and health and social care professionals in the disability services, talent attraction, engagement and national campaigns.

### 5.3 Technology and Transformation Committee

The minutes of the Committee meeting of 20 March and 17 April 2024 were noted.

As the Committee Chairperson was absent from the Board meeting, the verbal report on the matters considered at the Committee meeting that took place on 15 May 2024 was deferred.

#### 5.4 Safety and Quality Committee

The minutes of the Committee meeting of 18 April 2024 were noted.

The Committee Chairperson provided a verbal report on the matters considered at the Committee meeting that took place on 16 May 2024.

As it was her last meeting as Chair of the Committee, she expressed her gratitude to the members of the Committee, and to the members of the senior management team.

The Committee discussed the Implementation Plan of the McIlroy Report on Adult Safeguarding, and agreed that timelines need to be included in the plan where possible. The Committee discussed the perceived culture around safeguarding and emphasised the importance of strong professional leadership to improve this as necessary.

The Committee noted the Quality Profile from the March data cycle and discussed the governance of the Quality Profile as the Health Regions are established. It was agreed that the CEO would be invited



to speak to the Committee on the proposed governance of the Quality Profile and to outline improvement plans for the indicators which are not showing appropriate improvement.

The Committee were presented with the Patient Safety Together (PST) Evaluation Plan which outlines the work of the PST programme during its first year. The governance of the PST programme was highlighted as key to enable proper growth of the programme and allow its implementation across the Health Regions in both hospital and community care settings, and the Committee expressed its full support for PSTs work to date.

The new CRR was presented to the Committee, and it was agreed that the revision had delivered a better document, which will be more useful going forward.

The monthly Chief Clinical Officer's report was presented to the Committee, which included a briefing on the National Women and Infants Health Programme (NWIHP) Annual Report 2023; the Organ Donation Transplant Ireland (ODTI) 3-year strategic plan for 10-year service output for Organ Donation and Transplant services nationally; and the HSE Independent Review of Paediatric Orthopaedic Surgery Service at CHI.

The Committee also noted the update provided on the National Venous Thromboembolism (VTE) Clinical Programme; and the HPV Associated Cancers Report from the National Cancer Registry Ireland (NCRI).

The Committee were updated on the National Healthcare Communication Programme (NHCP) which was established in response to the National Care Experience Programme, and aims to improve communication in practice to a professional level of competence as communication leads to positive outcomes for patients, staff and the healthcare system, and that poor communication often leads to complaints and adverse outcomes. The CEO advised that there has been engagement with the NHCP through the ND Communications and the plans to include them in the new centre.

## 5.5 Planning and Performance Committee

The minutes of the Committee meeting of 19 April 2024 were noted.

The Committee Chairperson provided a verbal report on the matters considered at the Committee meeting that took place on 24 May 2024. As it was his last meeting as Chair of the Committee, he expressed his gratitude to the members of the Committee and to the members of the senior management team.



The Committee noted updates relating to Enhanced Community Care data re Chronic Disease Management and Integrated Care Programme for Older People (ICPOP) discharges; and Genetic and Genomic Medicine Strategy.

The Committee received an update on current HSE media coverage, particularly in relation to University Hospital Limerick and the upcoming Mr Justice Frank Clarke Report.

The Committee were presented with the monthly COO Performance Report and Performance Profile (March Data), and were advised that the interim performance oversight process with the Regions and National services took place in early May.

Key strategic and operational updates were provided to the Committee with a particular focus on Cancer Services. The functioning of Cancer Services under the Health Regions was discussed, including the potential benefits with regard to the creation of a cancer lead role in each region. The Committee noted the update on the National Radiology Review, with the commencement on the development of a 5 Year National Strategic Plan for Radiology Services in early 2024.

The Committee noted the Quarterly Progress Report in relation to Roadmap for Service Improvement 2023 – 2025 Disability Services for Children and Young People (the Roadmap), and discussed the challenges with the rollout/implementation of the Roadmap; the work of the Roadmap Working Groups; the challenges associated with filling the posts required for the implementation of the Roadmap and noted that recruitment and retention is the most significant area for improvement to ensure effective delivery of services across all Children Disability Network Teams.

The Committee noted the Report from the Oireachtas Joint Committee on Disability Matters: Towards harmonisation of national legislation with the United Nations Convention on the Rights of Persons with Disabilities.

The Committee Chair provided a brief on care provision for a certain service user in a Section 39 Organisation which had been highlighted at the Audit & Risk Committee (ARC) meeting, and confirmed that assurances have been provided that they are receiving appropriate care.

#### 6. Reserved Functions of the Board

## 6.1 Board Resolution

The Board considered and approved the updated Board Resolution relating to the Designation of a panel of employees authorised by the Board to be appointed as Acting Chief Executive Officer, which reflected the changes to the Senior Leadership Team. **Decision No.: 290524/20** 



The CEO presented to the Board the following papers which were recommended by the ARC for approval, to which the Board considered and approved.

- i. Contract award for construction of three rapid build surgical hubs Decision No.: 290524/21
- ii. Mini Competition under Multi-Supplier Framework Agreement for the provision of Microsoft Solution Renewals and Associated Services **Decision No.: 290524/22**
- iii. National Drawdown framework for the Provision of Medical hygiene products **Decision No.:**290524/23
- iv. National universal New-born screening services Decision No.: 290524/24
- v. Dental Extractions for children under general anaesthesia Decision No.: 290524/25
- vi. Secure mail and Identity services Decision No.: 290524/26

The CEO provided an update to the Board in relation to the recent anti-immigration protests on HSE owned sites in Clonmel. He advised that a list of available vacant sites has been made available to the Department of Children, Equality, Disability, Integration & Youth for accommodation.

### 7. Any Other Business and Close

The Chair thanked Board members Mr Fergus Finlay, Professor Deirdre Madden, Dr Sarah McLoughlin and Professor Fergus O'Kelly whose appointments to the Board had concluded. He highlighted the enormous value that each member brought to the Board in the 104 Board and 253 Committee meetings over the past 5 years, which was far beyond the strategic requirement and a testament to the members commitment to the health services.

The CEO, on behalf of the Executive, also thanked the Board members and acknowledged the work they had carried out during their time as a member of the Board and wished them well.

Each Board member thanked the Chairperson, Board members, CEO, Executive and Board office staff.

There was no further business. The meeting concluded at 16:35pm.

Signed:

Ciarán Devane Chairperson

Date: \_28<sup>th</sup> June 2024 \_