



Minutes of HSE Board Meeting

Wednesday 26 October 2022

A meeting of the Board of the Health Service Executive was held on Wednesday 26 October 2022 at 9:00am

Present: Prof Deirdre Madden (Deputy Chairperson), Ms Anne Carrigy, Mr Aogán Ó Fearghaíl, Mr Brendan Lenihan, Mr Brendan Whelan, Mr Fergus Finlay, Dr Sarah McLoughlin, Prof Fergus O’Kelly, Mr Tim Hynes, Dr Yvonne Traynor, Dr Aogan O’Fearghail and Ms Michelle O’Sullivan

In Attendance for Board Meeting:

Mr Stephen Mulvany (Acting CEO), Dr Colm Henry (CCO), Ms Mairead Dolan (Interim CFO), Mr Dean Sullivan (CSO) Mr Fran Thompson (CIO), Mr Tom Malone (ND IA), Mr John Delamere (AND HR), Mr Damien McCallion (COO), Mr Mark Brennock (ND Communications), Ms Eileen Whelan (ND T&T), Mr John Ward (CTTO), Ms Niamh Drew (Corporate Secretary)

Apologies:

Mr Ciarán Devane (Chair), Mr Tim Hynes

Joined the meeting:

Liam Woods (ND), Yvonne Goff (ND), Ms Miin Alikhan (AND), Dr. Philip Crowley (ND Strategy and Research)

Minutes reflect the order in which items were considered and are numbered in accordance with the original agenda.

1. Governance and Administration

1.1 Board Members Private Discussion

The Deputy Chairperson welcomed Board members to the meeting and held a private session to consider the agenda and papers for the meeting.

1.2 Declarations of Interest

No conflicts of interest were declared.

1.3 Chairperson’s Remarks

The Deputy Chairperson welcomed Mr Stephen Mulvany, Acting CEO and Ms Mairead Dolan, Interim CFO to the Board meeting.

The Deputy Chairperson outlined her and the Board’s sincere appreciation to all of the local HSE staff,



including ambulance services, hospital staff, community teams and our Northern Ireland colleagues who worked in the community of Creeslough, Co Donegal, for all their hard work and support in responding to the terrible incident accident and their ongoing support for the people of Donegal.

She informed the Board that a meeting is scheduled to take place on 16 November 2022 between herself, the Board Chair, the Chief Clinical Officer and the Minister for Health to discuss the Patient Safety (Notifiable Patient Safety Incidents) Bill 2019.

1.4 Correspondence

The Board noted correspondence received relating to:

- Letter from Chair to Minister for Health re Our Lady's Hospital Navan Reconfiguration dated 7 October 2022
- Email from IPPOSI Citizens' Jury on the Future Use of Genomics re Verdict Report dated 11 October 2022 – IPPOSI to Board Members.

The Chair noted that the Genomics Strategy would be discussed later in the CEO Report.

- Letter from Minister for Health to Chair re 2023 Approved Level of Expenditure and National Service Plan dated 20 October 2022

1.5 Minutes of Board meeting

The Board approved the minutes as per the suggested changes by B Lenihan.

It was agreed that the Terms of Reference of the Technology & Transformation Committee are to be amended to reflect the views as set out in the Board minutes of 30 September 2022 and be brought back to the Board for approval.

2. Committee Update

Members of the EMT joined the meeting.

2.1 Performance and Delivery Committee

The Chairperson of the Committee advised the Board that the meeting scheduled for 21 September 2022 was postponed and a revised date is yet to be set.

It was noted that there are two special meetings of the P&D Committee scheduled to facilitate the National Service Plan (NSP) process on Wednesday 02 November and Tuesday 08 November 2022, and the Chair extended an invitation to Board members should they wish to attend.



2.2 Audit and Risk Committee

The minutes of the Committee meeting of 16 September 2022 were noted.

The Chairperson of the Committee provided a verbal report on the matters considered at the Committee meeting that took place on 13 October 2022. He advised the Board that they were presented with the current version of the HSE Capital & Estates Strategy and Implementation Plan. The Committee proposed some minor amendments to be made to the document and once amended agreed to approve the Implementation Plan, the contents of which mainly focused on enabling activities over the next 2 years (including getting visibility insofar as possible on the necessary funding. The strategy would be reviewed again in 2 year's time depending on the outcome of this work. Further to discussions the Committee had agreed that the role of publicly funded capital infrastructure and privately delivered leased infrastructure will also be included in the report.

The Chair advised that a progress update was presented to the Committee by the National Director of Governance & Compliance and KPMG in relation to the work on the Compliance Project and next steps, and the review of the draft Compliance Framework and proposed future operating model. The Chair advised of the Committees support in relation to the framework, and once the report and framework is finalised, it will be brought back for review and recommendation to the Board for approval.

The ARC Chair mentioned two reports that the Committee have requested but remain outstanding, Update on Management Action Plan – High Earners Review - Consultants IA Report and YTD Expenditure to include a breakdown of maximum expenditure limits with Hospital Groups (HGs) & Community Health Care Organisations (CHOs), and noted that these were due to be supplied to the ARC at the meeting in November. He strongly encouraged EMT to address the delivery of these reports.

Contracts and Properties were brought to the Committee which would be discussed later at today's meeting.

The Chair advised that he will be speaking at the Dialogue Forum with sector representatives from Section 38 / 39 agencies in the DoH in November with regard to the Risk Appetite Statement of the HSE and the learnings from the IA process, and that the CRO and ND IA are also attending.

2.3 People & Culture Committee

The minutes of the Committee meeting of 02 September 2022 were noted.

The Chairperson of the Committee provided a verbal report on the matters considered at the Committee meeting that took place on 14 October 2022. The Regional Health Area's (RHA's) is now



a standing item on the agenda, she noted that regional meetings had taken place and that feedback was largely positive. She advised that the Committee had outlined their concern in relation to the delivery of timelines but that this will be monitored and reported on to the Committee at its meetings.

An update was given in relation to the Special Pandemic Recognition Award. She also noted that a contract has been awarded to a 3rd party contractor to progress the payment to Section 39 agencies and other groups.

She advised that the Committee was provided with a progress update on engagement of the National Taskforce with the IMO re NCHDs issues and that over the course of engagement, progress has been achieved on a range of these issues.

The number of Consultants not on the Medical Council's Specialist Register was discussed, with the number reduced from 153 to 104 and an explanation for the continued employment of Consultants without Specialist Registration was provided. She also advised that work is ongoing with regards to the development of the HSE Accountability Framework, and that work is ongoing to identify current gaps and how to improve accountability arrangements.

The October 2022 HR Dashboard was presented to the Committee, and the Chair advised the KPI's are to be revitalised and expanded and will come back to the Board on this issue.

She updated the Board on the significant challenges in relation to recruitment and retention of staff, and noted that this is to be discussed at Committee meetings.

She informed the Board that the Committee also received a presentation from Morgan Lucey in relation to the HSE National Employee Assistance Programme (EAP) Service.

2.4 Safety & Quality

The minutes of the Committee meeting of 13 September 2022 were noted and the Chair of the Committee provided a verbal report on the matters considered at the Committee meeting that took place on 11 October 2022. The Chair informed the Board of the Committee's update from the CCO's monthly report which provided updates on the Reconfiguration of Services at Navan Hospital, Transgender Services, updates on the pandemic and screening service.

The Chair advised the Board that the Committee were informed of The Unplanned Pregnancy and Abortion Care Research Study, which focused on the difficulties of getting emergency access to abortion, access to abortion services of pregnancies of more than twelve weeks, abortion after care



services and the service provided by MyOptions.ie.

The Board were briefed on discussions with regards to the Committees discussion on reporting under areas such as the National Incident Review Panel and the need for clarity regarding access to reports prior to publication.

The Board were provided with a summary of discussions on the National Centre for Clinical Audit, and were informed of the Committee's workshop on 19 October 2022 with the Quality Improvement Intelligence team.

2.5 Technology and Transformation Committee

B Whelan provided a verbal report on the matters considered at the Committee meeting that took place on 17 October 2022. The focus of the meeting was the Committees Terms of Reference, the ways of working and the goals of the Committee. He noted that while a key focus of the Committee is the implementation of the strategic and tactical recommendations of the Post Incident Review, there is a need for a long term e-healthcare strategy view. He also advised that agreement is needed on which transformation projects should come under the remit of the Committee. The suggestion for an external member with patient advocacy experience was noted and Board member S McLoughlin advised that she had been liaising with the Chair on this matter.

3 Reserved Functions of the Board

3.1 Property Transactions

The CSO presented the following properties, which the Board considered and approved.

- 3.1a Elective Care Centres **Decision No.: 261022/72**
- 3.1b Acquisition of land in Dublin 8 and Annexe (x2) **Decision No.: 261022/73**
- 3.1c Lease of Primary Care Centre, Graiguenamanagh, Co. Kilkenny **Decision No.: 261022/74**
- 3.1d Lease of Primary Care Centre, Lismore, Co. Waterford **Decision No.: 261022/75**
- 3.1e Lease of Primary Care Centre, Rosslare, Co. Wexford **Decision No.: 261022/76**

3.2 Contract Approvals

The CFO presented the following contracts, which the Board considered and approved.

- 3.2a Contract Approval Request (CAR) for the provision of National Ambulance Service Fleet Asset Coordination Centre. **Decision No.: 261022/77**



- 3.2b Contract Approval Request (CAR) for the establishment of Intermediate Care Ambulance Services Dynamic Panel Agreements (DPA). **Decision No.: 261022/78**
- 3.2c Contract Approval Request (CAR) for COVID-19 Stand-Alone Swabbing Managed Service Swabb. **Decision No.: 261022/79**
- 3.2d Supply of Directly Acting Antiviral Medicines for the National Hepatitis C treatment programme. **Decision No.: 261022/80**
- 3.2e Provision of a Blood Sciences Managed Level Service (MLS) at Cork University Hospital & University Hospital Kerry. **Decision No.: 261022/81**

3.3 Opening of bank accounts with Danske Bank

The Interim CFO updated the Board in relation to a project which was stood up to transition HSE banking services from Ulster Bank to Danske Bank, which was overseen by the Asst/CFO and Head of Treasury & Capital. She advised that the project is in 3 waves, and the approval in relation to Wave 1 was being presented to the Board for their approval.

The Board considered and approved as follows:

1. Danske Bank Banking – Approval of Danske Composite Bank Mandate and Main Signatories.
2. Approval to Open all bank accounts, limited to only use Wave 1 bank accounts (approval request to use accounts in wave 2 & 3 to follow).
3. Approval of Wave 1 bank account designated signatories.

Decision No.: 261022/71

3. Chief Executive Officers Update

The Board reviewed and discussed the key aspects of the CEO monthly report and supporting papers, including the Board Strategic Scorecard Report, which had been circulated prior to the meeting.

The CEO advised the Board that his first weeks as CEO have had a strong focus on engaging with as many of the frontline staff, service partners and managers, which has been centred on listening to and understanding the challenges, opportunities and innovations with a view to being better able to support them going forward. He informed the Board that he met with colleagues from a variety of service areas such as Disability Services, including voluntary service colleagues, Older Persons Services, Ambulance Services and Acute Service, including professional groups, and intends to seek out opportunities to engage with all of these stakeholders in the weeks and months ahead.

The CEO welcomed the appointment of Mr Damien McCallion as Chief Operations Officer (COO) and



Ms Mairead Dolan as Interim CFO.

An update was provided in relation to the Monkeypox infection and the Board were advised that the National Crisis Management Team (NCMT) is overseeing and co-ordinating the HSE's ongoing response. A wider vaccination programme commenced on 17 October 2022 to target up to 3,000 people for vaccination. The vaccination programme includes plans to extend vaccination coverage where additional supplies are received.

National Genetics and Genomics Strategy

The CEO updated the Board in relation to this area, and acknowledged the work done by CCO which will be brought to the Safety & Quality Committee, EMT and Board by the end of the year. A discussion took place in relation to the Strategy and recent correspondence received from IPPOSI to which a response had issued from the CCO, and that the recommendations from the Citizen Jury which were welcomed. The patient involvement in the Strategy was discussed. The Board were informed that there was patient involvement in the Strategy development, both on the steering group and subgroups. It was suggested that feedback be obtained from the Personal and Public Involvement (PPI) representatives on their experience with the strategy development process in order to learn from it and improve the PPI experience in the area in future.

Test & Trace

ND T&T provided an update to the Board in relation to the transition to the future clinical, public health and surveillance led model, including the engagement with the DoH in relation to the agreed date for the implementation of the new Public Health guidance and ensuring that the appropriate planning and stakeholder engagement is in place before commencing the transition to the future model. She noted the focus is on finalising the operational surge response and emergency response plans should either scenario emerge, as well as preparing readiness plans to gradually move from the existing model towards the clinically driven and surveillance-led model.

She advised the Board that over the last week there was a slight downward trend in demand relative to the previous week, noting that community and GP referrals, laboratory tests and antigen test kits booked have all decreased.

The Board discussed the aligned Flu and Covid - 19 Vaccine Autumn Winter Programme and were informed that since the commencement of the programme, circa 167.8k people have come forward for booster vaccination. HSE Mobile Vaccination Teams have commenced administration of the flu vaccine and Covid-19 Boosters to residents of HIQA Registered Residential Care Facilities for older persons and those who are housebound. The programme is on track to visit all sites by the end of



October administering vaccines to consenting and eligible residents. She advised that the uptake for the over 65 eligible population is good, for the 50-64 eligible population and those at high risk is poor and that there is concern in relation to the uptake of vaccines in healthcare workers, and were advised that a communication has been issued to all healthcare workers to increase the uptake.

The Board considered the impact of the public health advisory communications to raise awareness about preventing the spread of Covid 19. It was agreed that ND T&T would follow up on the impact of communications being issued and advise the Board. This related to both infection, prevention and control and boosting immunisation.

There was a query in relation to Evusheld, an antiviral agent that is being used in other countries to help protect high risk individuals from Covid 19, which is not available in Ireland. The CCO provided an update later in the meeting, and advised that there was a HTA process with the company involved and the NCPE have sent additional questions to the company for a response, there has been no financial proposal submitted by the company as yet. The CCO advised the Board that it is hoped that the HTA process will be concluded in the next few weeks, this is reliant on the company submitting outstanding HTA queries.

Cyber Attack – Data Notification Process

The CEO updated the Board in relation to the recruitment process regarding the positions of CTTO and CISO. The job descriptions have been completed and expected to go to the Public Appointment Services this week.

The CEO provided an update to the Board in relation to the Cyber Attack Post Notification Process noting the National Director Operational Performance and Integration was leading out on the project and chairs the Steering Committee in place and gave an outline of the steps being taken. He advised that extensive work has been undertaken in reviewing the exfiltrated data and determining the notifiable subjects as per GDPR regulations, which was followed by a complex verification process. Patients and staff who had some of their personal information illegally accessed and copied during the cyber-attack will be notified by letter. They will then have an opportunity to get advice and further support from the HSE. A robust communication strategy is being prepared to support the notification process, which is scheduled to take place in November 2022,. Due to the numbers of people involved, and the need to support each notification, this will commence later this month and continue in phases over the coming weeks and months.

Winter Plan

The CEO advised the Board that the Winter Plan 2022-2023 was developed in consultation with and



approved by the Department of Health and the Minister for Health on 11th October 2022.

The Winter Plan provides for the appropriate, safe and timely care for patients by ensuring, insofar as possible, effective levels of capacity and resources are in place to meet the growth in activity levels, and identify risks in the implementation of the plan. It focuses on continuing to build capacity and capability in developing new services and enhancing existing services as initiated in Winter Plans and National Service Plans in 2020/21 and 2021/2022 respectively, and will focus on delivering a whole system and integrated approach at both a national and local level which aims to facilitate 'right care, in the right place, at the right time'.

The Board noted that the Winter Plan had not been sent to the Board for its consideration and approval prior to publication and a discussion took place in relation to the process with regards to the issuing of documents regarding strategic planning to the Board in a timely manner, in line with the role of the Board, its list of Reserved matters and its governance responsibilities. Concern was expressed that none of the potentially mitigating controls or other offices involved in managing the Board workplan or agenda had acted to identify or remedy an acknowledged oversight at management level and acted to seek Board approval. The CEO acknowledged and committed to conducting a review with EMT to ensure that such documents are submitted to the Board in a timely manner.

The Board discussed the Winter Plan in particular areas such as recruitment of ED Consultants and the five fundamentals outlined in the plan. Concern was expressed at commitments entered into in a number of aspects of the plan. The Winter Plan as approved by the EMT and published by the Minister was noted by the Board.

Waiting Lists

The CEO provided an update to the Board in relation to Waiting Lists and advised that progress has been made in relation to reducing the number of people on waiting lists, with a focus by the COO and ND Acute Operations in making progress which has seen as of this week the OPD waiting list being reduced. However, despite this reduction, he noted progress against the targets set out in the 2022 Waiting List Action Plan remain challenging. In order to deliver significant improvement by the end of 2022, several targeted actions have been identified and an update in relation to progress against each of these actions was presented in the CEO Report. The CEO advised that work is continuing and a meeting has been arranged with the Minister for Health and Secretary General to discuss further.

A discussion took place in relation to skill sets that could be available in the hospitals and community settings which are perhaps not being fully utilised, which could be of benefit in reducing the waiting list, an example discussed was specifically in relation to Clinical Nurse Specialists (CNS) who don't have



the authority to administer IV drugs, therefore not allowing patients to be able to receive these services at home. ND T&T confirmed she will liaise with the CCO and discuss this matter further.

The Did Not Attend (DNA) Strategy was discussed, which is being tested in three sites at present. The Board noted their concerns that there are a number of reasons why a patient does not attend for their appointment and queried with the EMT if the problems that are in the system are being addressed.

The Board noted the from the CEO report examples of improvements in some hospitals in the decrease in the OPD waiting list that have been achieved compared to the same period last year, and the Board queried how this good practice is shared with other hospitals. The Board was advised that an Achievers List is to be published in November with a list of those hospitals hitting their targets. A high level strategic view will be completed for each hospital, and brought back to the Board.

Disability services

The CEO advised the Board that the implementation of the Progressing Disability Services for Children & Young People (PDS) programme is currently being implemented across the country by HSE Disability teams and partner organisations. This policy supports the reconfiguration of children's disability services to provide equitable, child and family centred services based on need rather than diagnosis.

The Board discussed their concerns regarding people not being able to access the disability services, and the perceptions that some families feel that they are forgotten about. The age limit to access residential services was queried and the challenges with recruitment and retention of staff in the disability services was highlighted. A request was made for the Disability Roadmap to be shared with the Board.

Ukraine

The CEO advised the Board that the HSE is endeavouring to respond in a planned and coordinated manner to the needs of people fleeing Ukraine and arriving into Ireland. This is part of a much wider cross governmental response and the HSE requires ongoing support and inputs from other government agencies etc. to ensure that we can respond effectively and as appropriate. He advised that HSE Capital & Estates are liaising with other government agencies and organisations and sharing details of vacant buildings and land.

Reconfiguration of Services at Our Lady's Hospital Navan (OLHN)

The CCO joined the meeting.

The CEO advised the Board that following the Board meeting on the 30 September 2022, and the Special Board meeting on the 5 October 2022, the Chair submitted the OLHN Reconfiguration National



Working Group Review and Implementation Plan to the Minister for Health, which the Minister then requested clarity on a range of issues. A response issued to the DoH which included an investment summary in relevant regional healthcare facilities and a Communications plan. He advised that a response from the Minister is awaited, but work is ongoing, led by the ND Acute Operations in relation to implementation of the Reconfiguration Plan.

The Board agreed that the implementation of the Reconfiguration Plan should proceed with ambulance bypass to take place from 12 December 2022, and that the CEO and Chair will continue to deal directly with the Minister. It was agreed that further correspondence should be sent to the Minister setting out the Board's concerns for patient safety and reinforcing the Board's decision.

CCO left the meeting.

The Board noted a recent a high court settlement concerning the death of a patient with cervical cancer. It was agreed that the ND of Communications would review how the HSE communicates in an appropriate manner on such cases.

The CEO provided a briefing to the Board on the financial position year to date and stated that the draft revenue I&E financial position at the end of August 2022 shows an YTD deficit of €844.5m or 6.3%. A significant element of €665.4m of this is driven by the direct impact of COVID-19 expenditure with the remainder of €179.1m in Core (ie non COVID-19).

He advised that work is ongoing in the preliminary drafting of the National Service Plan (NSP) 2023, which is required to be submitted within 21 days of receipt of the Letter of Determination from the Department of Health, which was received on 20 October 2022. He noted that the EMT are due to meet next week to look at key issues, and further engagement will be required with the Performance and Delivery Committee and the Board in the preparation and finalisation of the NSP 2023 over the coming weeks.

Scorecard

The Board held a discussion in relation to the Scorecard ratings and KPIs and Ambition Statement not being achieved. It was agreed that the scorings would be reviewed by EMT before resubmission to the Board for sign off. It was also agreed that a more detailed review is to take place at the November Board meeting, and more time on the agenda to be given to discuss the Scorecard.

Fergus Finlay left the meeting.

5. Board Strategic Focus

5.1 Regional Health Area's Update



The CSO, Yvonne Goff, National Director and Liam Woods, National Director provided the Board with an update on the Regional Health Areas (RHAs), which included an update on the timelines for the implementation of RHAs. The CSO advised that RHAs will provide for the alignment and integration of hospital and community healthcare services at a regional level, based on defined populations and their local needs, making this a multi-year plan with the first elements due to go live in January 2024. The project overall will run until at least 2025-2026. RHAs are made up of six regions, as set out by the government in 2018/2019.

Yvonne Goff updated the Board on the regional events. The events involved circa 600 HSE staff over a number of sessions. The CSO advised that feedback from the regional meetings with staff concerning RHAs was largely positive; that there is a research office and Personal and Public Involvement (PPI) planned in each RHA; and that the governance structure for the RHAs has yet to be confirmed. The CSO reiterated the importance of communication and engagement with stakeholders throughout the implementation process

On Population-Based Resource Allocation (PBRA), which underpins RHAs. Concerns were expressed about the lack of a unique patient identifier and the limited availability of population-level data that is required for a robust PBRA model, and the impacts of a data-limited PBRA model. The CEO stated that PBRA is a complicated model, and it will take time implement. Additionally, the CEO stated that the end goal of RHAs is integrated care, and that currently, the focus is on what we can get from existing systems, while we wait for the full implementation of the new system. The importance of building a relationship with the voluntary sector and voluntary hospitals was also noted in implementing the RHAs and to ensure their success was highlighted by the Board, and noted by the CSO and CEO.

The Board discussed the update with management and expressed a number of views about important aspects of how the project might progress .

6. AOB

The Chair thanked Board Members and Management Team members for their time.

The meeting concluded at 4pm, and Board members held a private closing session.

Signed:

Deirdre Madden

Deputy Chairperson

Date: **25th November 2022**