



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

HSE Audit & Risk Committee Meeting

Minutes

A meeting of the HSE Audit & Risk Committee was held on Thursday 11th June 2020 at 14:00 via video conference.

Members Present: Ann Markey, Brendan Lenihan (Vice Chair), Fiona Ross (until 15:25), Pat Kirwan, Colm Campbell.

Apologies; Martin Pitt.

HSE Executive Attendance: Patrick Lynch, Geraldine Smith, Cornelia Stuart, Mairead Dolan (from 14:30), Dara Purcell (Secretary), Hannah Barnes.

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

1. Governance and Administration

The Vice Chair welcomed Committee members to the meeting and confirmed that the meeting had been scheduled as a special meeting of the Audit and Risk Committee to consider the revised Corporate Risk Register [CRR]. Ann Markey agreed to chair for the duration of this meeting. No conflicts of interest were declared.

The V/Chair outlined the 5 priorities for the special meeting of the Committee as follows;

- To step back and assess the revised CRR
- Have a deeper understanding of the other pieces of the HSE's risk infrastructure such as the escalation and de-escalation process and the risk appetite.
- Break the CRR down into different areas ie. new risks. Review risks to be allocated to the additional subcommittees of the HSE Board
- Take an in depth look at the risks allocated to the Audit and Risk Committee

2. Risk Management

P. Lynch presented a paper on the updated CRR to Committee members following the quarterly review of the CRR by the EMT which had been conducted during the last week of April and first week of May 2020. In carrying out the review individual members of the EMT were met with in order to fully consider the current risks on the CRR and the impact of COVID-19 on these risks. Additionally, this review sought to identify significant additional risks that have emerged for the health service since the emergence of COVID 19 in Ireland. Following the EMT Corporate Risk workshop held on the 7th May the risk descriptions within the CRR were updated following the decisions taken at the meeting and risk assessments for new risk and risk assessments for pre-existing risks were completed. The final CRR was agreed by EMT at their meeting of the 26th May.

P. Lynch advised the Committee that there are now 26 risks on the register including 6 new COVID-19 specific risks. It was also agreed that in addition to the quarterly CRR review process the CRR would be presented at the monthly EMT meetings for a less extensive review which will then be presented to the Audit and Risk Committee in a report format.

P. Lynch briefed the Committee on the establishment of a Corporate Risk Support Team which would assist the CEO and EMT in meeting their governance responsibilities, within their roles, relating to risk. It is hoped that this will assist in strengthening the risk culture within the organisation as decision making would be consistently linked to the CRR. C. Stuart highlighted that this process will improve the quality and levels of connectivity between regional risk registers and the CRR.

The ARC requested the proposal to bring in some external support for a joint EMT/ Board risk process which as deferred due to the COVID 19 response, be progressed to consider the HSE's risk appetite, risk tolerances, escalation and de-escalation process (e.g. between the divisional risk registers and the corporate risk register plus between the HSE CRR and the DoH risk register) etc. This will allow the Board to decide on its tolerance levels for the identified corporate risks and support more focused reporting to the Board

Committee members welcomed the focus that has been given to risk by the CEO and EMT. They acknowledged that the description of risks has improved significantly. Committee members reiterated their readiness to provide support and advice to the EMT, particularly in relation to risk plans. The Committee agreed a joint sub group of the ARC and Safety and Quality Committee will be established to review the 5 new corporate risks related to COVID 19. These are risks related to testing and tracing, restoration of core service activity, Long term residential care settings, COVID-19 critical supplies

including PPE and Public Health capacity. The financing risk relating to COVID 19 is being retained by ARC. This process will be led by Fiona Ross. It is intended that the relevant EMT risk owners will be asked to meet the sub-group prior to a report being brought back to the ARC by the end of July. The ARC members will be Fiona Ross, Brendan Lenihan, Pat Kirwan and Colm Campbell. Prof Deirdre Madden will nominate S&Q members after their meeting this week and including some clinical expertise in particular. Additionally, the Committee emphasised the need to re activate the process to appoint the Chief Risk Officer and sourcing external support for the risk process.

The Committee discussed the reformulated risks on the CRR.

The ARC had a number of general comments on the revised CRR – these should be considered for inclusion in the next EMT version.

- The risk of the HSE not delivering on its NSP 2020 commitments and objectives.
- The risk of the HSE not having the capacity to deal with both COVID and non-COVID 19 activity [e.g. decision in relation to private hospitals and any change this means for the HSE's risk profile]
- The risk of material and potentially increased cost of claims and litigation – both generally [e.g. from maternity related incidents] plus for example potential judicial decisions in relation to the 'Real rate of Return' that would significantly increase the costs to the health service
- The ARC noted that a number of risk actions on the CRR refer to significant plans in the context of the HSE's response to risk [e.g. testing and tracing, resourcing plans for the National Contact Management Programme]. The ARC would like to have some visibility of these plans to assist them in their work.
- There are a number of risks related to long term residential care including private nursing homes. The ARC is of the view that there needs to be a distinction made between the risks carried by the HSE for its own services and for services that do not fall under the direct governance of the HSE.
- The rating of the Brexit risk appears low given the continuously developing situation regarding implementation of the Withdrawal Agreement.
- The Business Continuity Risk will transfer from the People and Culture Committee to the ARC. This is on the basis that the risk has broadened from its original focus on industrial disputes.

The Committee noted Risk 1 on the new register which relates to COVID 19 transmission increasing as a result of specific circumstances is rated as a '4' which indicates it is likely with a probability of 75%. ARC is interested in how any assessment of the risk of a second wave is being undertaken, the modelling of same and who is undertaking this. The Committee suggested a decision making framework for standing services up and down in response to any major resurgence of COVID 19 would be beneficial with transparent clinical and risk based criteria for moving up and down these levels. This would allow for decision making in different services and geographies depending on the levels of risk.

In relation to the Committee's oversight of risks assigned to it, it was agreed that the committee will review a number of these with the relevant EMT owners at meetings in June and July to assess what actions are required under plans for mitigating the risks. In particular, the Committee will review the risks related to System of Internal Controls, Organisational Reputation, Children's Health Ireland, Brexit and HSE funded agencies.

Following this discussion, the Committee suggested that there would be benefit in conducting an After Action Review in relation to the COVID-19 response. The Committee noted that this was a specific ECDC recommendation in recent days. This would support learning from what worked well and what didn't in the HSE's response. It would also assist in identifying potential risks that may emerge in the context of the response.

Actions:

- Frameworks to be reviewed at next meeting to account for new governance arrangements (July Meeting)
- Proposal for external support for a joint EMT/ Board risk process
- Organise training to provide guidance to subcommittees of the Board to assist them in their role of risk oversight. To be discussed at June Board meeting. (June Board Meeting)
- Schedule reviews of ARC owned risks with the relevant EMT owners at meetings in June and July (July meeting)

3. Any Other Business

The Vice Chair thanked Committee members and Management team members for their contribution to the meeting. The meeting concluded at 15:45.

Signed: 

A/Chairperson

10/07/2020

Date