



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

HSE Performance and Delivery Committee Meeting

Minutes

A meeting of the HSE Performance and Delivery Committee was held on Friday 17th September 2021 at 8:00am via video conference.

Committee Members Present: Brendan Whelan (A/Chair), Fergus Finlay, Sarah McLoughlin, Brendan Lenihan, Louis Flynn, Sarah Barry.

HSE Executive Attendance: Anne O'Connor (COO), Dean Sullivan (CSO), Stephen Mulvany (CFO), Niamh Drew, Jaymie Crone

Apologies: Tim Hynes (PD Committee Chair) Fran Thompson (CIO), Patrick Lynch (ND GR)

Joined the meeting: Liam Woods (ND Acute Operations), Yvonne O'Neill (ND Community Operations), Orla Treacy, Marie Carroll (Planning Specialist), John Smith (Assistant ND), Valerie Plant (Assistant CFO)

1. Governance and Administration

1.1 Welcome and Introductions

Brendan Whelan took the Chair and welcomed the Committee members to the meeting. The Committee held a private session where the Chair provided a brief summary on the agenda, the relevant papers and approach to conducting the meeting, noting that the focus of the meeting would be to receive updates on key items and to put forth relevant actions as they became apparent.

1.2 Declarations of Interest

No conflicts of interest were declared.

1.3 Approval of Minutes

23rd of July 2021 minutes were approved by the Committee

EMT members joined the meeting at 8.20am

2. National Service Plan / Estimates 2022

The CSO introduced and presented an outline of the National Service Plan (NSP) and Estimates 2022 to the Committee. He noted that the preparation of the National Service Plan (NSP) is a legislative requirement, setting out the type and volume of health and social care services to be provided by the HSE in a given year in response to the funding made available and the level of staff to be deployed.

The CFO proceeded to present the estimated financial requirements noting that in relation to COVID-19, despite the uncertainty, it seems there is clear basis for the assumption that there will be a need to retain a significant element of the current COVID-19 response in 2022 albeit the precise nature and extent of that is unclear and in part will be influenced by policy decisions, including whether it is disease prevention or infection prevention that is to be the key focus.

He informed the Committee that further enhancements to reporting of COVID-19 costs will need to be developed along with a wider engagement process, probably in early 2022, to establish a shared internal and external view on what elements of the ongoing COVID-19 response should be considered to be structural rather than temporary in clinical, operational and then financial terms as part of planning for Estimates 2023.

He noted that in overall terms the 2022 Estimates submission is seeking to balance the need to set out the full requirement with the need to be clear on the subset of that requirement that can realistically be made available and effectively deployed in a single year. He noted that WTE summary data and also the ICT Capital and Estates Capital estimates will be incorporated into future iterations of this Financial Overview. The committee proposed that its role and that of the Board in the Estimates process be reviewed for 2023.

Valerie Plant joined meeting at 09:40am. Louis Flynn re-joined at 10:00am.

3. Performance Oversight

The COO presented the Performance Profile's (May, June and July 2021) to the Committee which provides updates on key performance areas across the four domains of the National Scorecard for Community Healthcare, Acute Hospitals and National Services, Quality and Patient Safety and Finance and Human Resources.

The COO noted there are still challenges to accessing all data (acute and community including back-dated data from May 2021) due to the impact of the Cyber-Attack. The July report has no community services data but there is expectations to have it for the August dataset noting that collection/reporting of back-dated data from May 2021 will continue to be prioritised.

The COO discussed with the Committee the pressures on recruitment of home supports, unscheduled care activity and capacity issues in the acute systems due to significant challenges this winter in providing emergency care whilst also dealing with COVID-19 in addition to the normal challenges of the winter period. She highlighted the increase in the number of people on trollies and the challenges that the ambulance services is under. She noted there will be challenges in the coming six months with regard to reducing waiting lists, albeit significant focus is being applied to mitigation measures.

The Committee discussed the expected demand on the system to year-end and the COO noted that many of these issues arising now are usually not seen until December in other years which highlights the pressures the health system is currently under.

The ND Acute Operations updated the Committee on scheduled care stating volumes of outpatient attendances and workload has increased over the last month. Waiting lists remain challenging noting that updates with regards to plans to improve urgent scopes and colonoscopies had been brought recently to the Safety & Quality Committee. The ND Community Operations spoke of the challenges in the community noting in particular the waiting lists for Home Support challenges with recruitment of staff and capacity issues relating to acute mental health units and CAMHS due to the lengths of stay and new admission levels. The number of people not attending for community appointments or not showing up for digital appointments is increasing. There is also increased demand for more emergency residential care and supports for people with disabilities including people reaching 18 years coming into adult service provision.

In response to questions from the Committee on how the challenges in Mental Health services will be addressed the COO informed the Committee that the Winter plan has an enhanced focus on service

restoration in disability services, mental health, services for older people and social inclusion care groups.

The COO discussed the proposed Winter Plan with the Committee noting that it includes a range of initiatives to be undertaken which will aim to enhance community capacity, decrease acute hospital demand through the prioritisation of Primary Care and Community Services and advance the goals of Sláintecare and mitigate the impact of COVID-19. The Committee asked when the Winter Plan will be finalised and in operation and if it requires Departmental approval. The COO said a draft of the Winter Plan will be considered by the EMT and then to the Board prior to being submitted to the DoH.

Fergus Finlay left meeting at 11:40am

4. Risk Management

The COO presented CRR Q2 2021 Report to the Committee focusing on Risk 8 and 11. The COO stated the dates and timescales in relation to these risks have been changed.

In relation to Risk 8 capacity access and demand, she informed the Committee that there is a risk of poorer outcomes for patients and service users due to the insufficient capacity across community and acute services which has been impacted by COVID-19, the cyber-attack and changing demand patterns for scheduled and unscheduled care.

In relation to Risk 11 Disability Service Risk, the COO noted that there is a risk to service continuity and the provision of appropriate, safe, and quality care for people with disabilities as a result of deficits in the current operational delivery model; an absence of agreed multi-annual investment and reform and the impacts that COVID-19 has on the provision of service to children with complex disability needs. Its level on the risk register has therefore changed from 16 in Q1 to 20 in Q2.

5. IFMS Correspondences

The CFO updated the Committee on issues with a voluntary hospital in the initial timeline for implementation and also updated on positive responses from some other voluntary sector early adopters. The Committee discussed the broader issues re adoption of IFMS in the sector. The CFO updated the Committee on the relationship with the systems integrator (SI), and in particular, the ongoing commercial and contract management discussions. The Committee discussed and endorsed the approach adopted to the management of the SI relationship.

6. AOB

The Committee held a private session to debrief post meeting.

The meeting concluded at 12:00pm

Signed: 

Date 10/12/2021

**Brendan Whelan
A/Chairperson**