



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

Special HSE Performance and Delivery Committee Meeting

Minutes

A special meeting of the HSE Performance and Delivery Committee was held on Wednesday 18 November 2020 at 5.30 pm via video conference.

Members Present: Tim Hynes (Chair), Fiona Ross, Sarah McLoughlin, Brendan Lenihan, Fergus Finlay, Regina Moran, Louis Flynn, Sarah Barry, Ciarán Devane, Deirdre Madden, Yvonne Traynor, Fergus O’Kelly.

Apologies: Aogán O Fearghaíl.

In attendance: Paul Reid (CEO), Dean Sullivan (CSO), Stephen Mulvany (CFO), Anne O’Connor (COO), Fran Thompson (CIO), Stephanie O’Keeffe (ND Strategic Planning and Transformation), Pat Healy (ND Community Strategy and Planning), John Hennessy (ND Acute Strategy and Planning), Yvonne Goff (Integrated Information Service and Scheduled Care), Jim Curran (ND HBS Estates), Justine McCarthy (EY), Dara Purcell (Secretary), Rebecca Kennedy.

1. Governance and Administration

As agreed at the last meeting, Fiona Ross, who is the Board member leading on NSP, took the Chair for this meeting.

The Acting Committee Chair welcomed members and thanked everyone for their input to the NSP 2021 planning process so far. She noted that the purpose of this meeting was for the CSO to update members on where the process stands and on the new draft documents circulated to members prior to the meeting. The majority of the time was to be used to provide feedback to the CSO directly.

No conflict of interest was declared.

2. National Service Plan

2.1 National Service Plan Update

The CSO briefed the Committee on Draft 2 of the NSP 2021 and companion documents circulated prior to the meeting: Draft ICT Capital Plan 2021, Draft Capital Plan, Draft Access to Care Action Plan, and Resourcing Strategy. He outlined the steps of the process which have been completed to date and, noting the exceptionally tight statutory timeframe for completion, gave an indicative timeline of actions due to be completed prior to submission of the Final NSP 2021 to the Minister on Tuesday 24 November. He confirmed that frequent discussion and sharing of drafts with DoH colleagues continues to be prioritised to facilitate the timeline and that every effort is being made to respond to feedback from EMT, P&D, Board and DoH in a timely manner. The Committee then provided feedback on the draft documents.

The Committee discussed the NSP measurement and reporting methods for existing levels of service and how the baseline for 2021 in terms of existing levels could be determined in light of the impact of COVID-19 on planned level of services in NSP 2020.

The Committee stressed that substantial efforts in recruitment and resourcing will be required to increase capacity and permanent staffing levels to deliver the NSP. It was recognised that the correct selection of metrics will be especially important in this area to ensure that staffing levels and expenditure on agency and overtime are fully aligned with available funding throughout 2021.

The importance of the alignment of the plan with wording of the Sláintecare Report and its vision of universal healthcare was highlighted, particularly with regards to integrated care as this is a key element of Sláintecare. CSO acknowledged these points and confirmed that Sláintecare wording will be captured appropriately in the NSP.

The Committee discussed the provisions in the NSP in relation to disability services and recommended that they be reviewed in the context of the priority in the LoD to improve access and enhance specialist disability services with a focus on the implementation of the *Transforming Lives* programme. It was agreed that there would be a further follow up on this area with Fergus Finlay.

The Committee then discussed the Access to Care Action Plan noting that it deals with access to scheduled care and does not directly address unscheduled services. The CSO advised that enhanced access to scheduled care has been highlighted by the DoH as a priority for inclusion in the NSP 2021 but that addressing unscheduled care access challenges is also a key priority. It will be achieved via a significant uplift in acute bed capacity, the introduction of alternative pathways and processes for assessing care, and other measures, aligned to Sláintecare, the Corporate Plan and Winter Plan.

The patient engagement element of the NSP was considered and the CSO acknowledged that this is an area with potential for further development and he confirmed that this is currently being undertaken and discussed at EMT level.

The Committee discussed the priority in the Letter of Determination to roll-out key e-health initiatives in 2021 and emphasised the importance of the plan for the roll-out of Individual Health Identifiers and Electronic Health Records.

The Committee raised the issue of the relationship structure with Section 38/39 organisations and suggested there is need to commit to a serious dialogue of reform with these organisations. The CSO noted that there is a commitment to engage with the Section 38/39s in the Corporate Plan and a similar commitment would be reflected in the NSP.


In relation to the format of the NSP, the Committee suggested adding an Executive Summary to relay key messages and highlights from the Plan, and support navigation of the document itself. The Executive Summary should also help to emphasise the ambition and degree of transformation to be undertaken in 2021.

The Acting Chair thanked all members for their contributions as well as the EMT and their teams for the work completed to date. The CSO confirmed that any amendments to the draft NSP 2021 will be clearly highlighted to the Board at its meeting on 20 November.

3. AOB

Date of Next Meeting: 11 December 2020 (TBC).

The meeting concluded at 6:30pm.

Signed: 
Tim Hynes
Chairperson

11/12/2020

Date