

### **HSE Performance and Delivery Committee Meeting**

#### **Minutes**

A meeting of the HSE Performance and Delivery Committee was held on Friday 18 September 2020 at 9:00 am via video conference.

Members Present: Tim Hynes (Chair), Sarah McLoughlin, Brendan Lenihan, Fergus Finlay, Louis Flynn, Sarah Barry.

Apologies: Regina Moran

In attendance: Stephen Mulvany (CFO), Dean Sullivan (CSO), Anne O'Connor (COO), Dara Purcell (Secretary), Rebecca Kennedy.

Also, in attendance:

- Item 2: Yvonne Goff (Scheduled Care), Justine McCarthy EY, Pat Healy (ND Community Strategy and Planning, Stephanie O'Keeffe (ND Strategic Planning and Transformation), John Hennessy (ND Acute Strategy and Planning), Connor Cleary.
- Item 3: Orla Treacy
- Item 4: Patrick Lynch (ND QAV)
- Item 5: Fran Thompson (CIO)

### 1. Governance and Administration

The Chair welcomed members to the meeting and in advance of the arrival of EMT, the Committee discussed and agreed the agenda and approach to the meeting.

The Committee approved the minutes of the meeting of 24 July 2020.

No conflict of interest was declared.

# 2. Corporate Planning

### 2.1 Update on Corporate Plan including Board briefing on 11 September

The CSO presented a final draft of the full Corporate Plan document and its supporting content which had been updated to reflect feedback from Executive Management Team, Performance & Delivery Committee, the Board of the HSE and Department of Health.

The CSO confirmed that pending sign off by the Performance & Delivery Committee on 18 September, the final Corporate Plan document would be submitted to the Board for final approval on 25 September.

The Committee discussed some final changes and agreed to send these to the CSO for incorporation into the final draft. The Chair acknowledged the work that had been carried out and completed by the Executive Management Team during the Corporate Plan process and subject to minor amendments requested by the Committee, it was agreed that the Corporate Plan should now be forwarded for approval by the HSE Board at its meeting on 25 September 2020.

#### 2.2 National Service Plan 2021: Estimates 2021

The CSO presented an outline of the National Service Plan (NSP) and Estimates 2021 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. It is informed by the preparation of the annual estimate of funding requirements and is the benchmark against which performance is measured throughout and at the end of the year. Under legislation, submission of the Service Plan is required within 21 days of receipt of the Letter of Determination (LoD), post Budget 2021

The CSO outlined the current position noting that a pre-budget draft of the NSP is in development and that its content is closely aligned to the Corporate Plan, the 2020 'Planning for Health Services Delivery in the COVID-19 Pandemic — Winter 2020 to End 2021' and the Winter Plan - with a focus on COVID-19 implications and highlighted that consideration will also be given to the Annual Statement of Priorities which is normally provided by the Department of Health. He also confirmed that work is underway on the preparation of the National Scorecard which will support the finalisation of the NSP and that further engagement will be required with the Performance and Delivery Committee and the Board in the preparation and finalisation of the NSP over the coming weeks, particularly post Budget 2021 and prior to its submission to the Minister for Health.

The CSO also advised that preparation of the Estimates is a key component of the annual service planning process which incorporates two elements: an estimate of requirements for an existing level of service (ELS) for 2021 which will set out the cost of services in 2021, informed by the forecasting of expenditure to the end of 2020, which is currently underway; and an estimate of requirements for key new service developments (NSDs) for 2021.

He emphasised that the National Service Planning and Estimates process for 2021 is significantly more complex than usual due to the parallels with Pandemic Planning and Corporate Planning but work on refining and prioritising the Estimates is continuing with a view to submitting a final Estimates bid by end of September 2020. In the interim, working draft elements will continue to be shared with DoH colleagues.

It was agreed that on outline on these processes should be brought to the Board at its meeting on 25 September.

J McCarthy, Y Goff, P Healy, S O'Keeffe, J Hennessy and C Cleary left the meeting

### 3. Performance Oversight

O Treacy Joined the meeting

# 3.1 Performance Profile July 2020 / 3.2 NPOG Escalation Report – September 2020

The COO provided a high-level overview of the monthly July 2020 report. She informed the Committee the Performance Profile is published on a quarterly basis and provides an update on key performance areas for Community Healthcare, Acute Hospitals and National Services in addition to Quality & Patient Safety, Finance and Human Resources. It was noted that some areas of reporting remain heavily impacted by the COVID-19 pandemic.

The Committee discussed the reporting from a number of areas including mental health, community care and screening, and expressed particular concern at reported underperformance in relation to cancer services. The Chair requested that a paper on predictions for delayed cancer diagnoses as a result of COVID-19 be submitted to Committee.

#### 3.3 National Scorecard Dashboard

The Performance & Delivery Committee had requested the development of a new National Scorecard for the Health Service Executive that will assist the Committee and Board in their oversight and governance role. The COO presented the draft scorecard which was prepared based on: Feedback from Board and Committee members; Engagement with all Board Committees; International Research; A Safe Return to Health Services — focus areas across all phases; Outcome focussed KPIs available in the current suite; and The National Performance Indicator Suite and available data-sets.

The COO noted that the Performance data and results are displayed including trends and the text box on slides will facilitate a brief service overview of key strategic points of interest for the Committee/Board including remedial actions to address underperformance and is intended to include COVID-19 related KPIs and to reflect the outcome of the recalibrated NSP 2020 activity levels, Corporate Plan and Risk Register work once completed.

She also briefed the Committee on the work that has being undertaken by the Department of Health (DoH) to develop a Health Systems Performance Assessment Framework (HPSA) for Ireland, noting that the piece of work is on schedule and due to conclude in Spring 2021. She confirmed that the DoH is available to the Committee to present on this programme of work and that the outcome should inform a robust assessment of our National Performance Indicator Suite, the streamlining of same and development of aggregated measures. Once the NSC content is signed-off by the Committee and Board it is intended to put the NSC into an automated Power BI Dashboard format.

The Committee agreed that a workshop would be scheduled to decide which metrics should be highlighted on the scorecard. Following the discussion, the Chair agreed that he would speak with the COO directly on this matter and the update at the October meeting should be substantial.

### 4 Corporate Risk Register

CIO and ND QAV joined the meeting

### 4.1 Review of Risks assigned to Committee

### 4.1.1 Risk 13 - Cyber Security

The CIO briefed the Committee on the Corporate Risk Register (CRR) risk of Cyber Security providing an update on the risk mitigation actions as set out in the paper circulated prior to meeting. he outlined the ICT capacity constraints due to focus on COVID related activities.

While the Committee welcomed the update with regards to system recovery, they sought clarity on what systems are prioritised for recovery. The Chair also sought clarity on where Cyber security sits in the overall ICT priorities for the health service and questioned its position with regards to it being a number 1 priority. The importance and urgency of undertaking comprehensive penetration 'red hat' testing was raised by the Committee.

CIO left the meeting

# 4.1.2 Risk 8 - Capacity access and demand

The COO gave an update on the controls and actions set out in the Q2 2020 version of the Corporate Risk Register. The Committee requested that the Executive ensure that the plan and actions to mitigate this risk do not just focus on COVID response but should also ensure it is addressing the underlying capacity and access risks that were evident before the emergence of COVID.

It was noted that the Winter Plan actions have a number of dependencies which are outside of the control of the HSE [e.g. funding etc] and that it needs to be clear what mitigating actions are outside of the control of the organisation. The Committee discussed that a lot of the actions are intended to address short term issues and that strategic actions envisaged under Sláintecare remain critical to fundamentally addressing capacity and access issues and that these need to be reflected.

The COO confirmed that this risk is undergoing a significant revision to be completed by the end of September 2020 and will reflect the actions set out in the Winter Plan which will be the key mitigation plan for this risk. The Committee requested that the revised risk to be presented at the October meeting of the Committee.

### 4.1.3 Risk 11 - Disability Services

The COO also provided an update on the controls and actions set out in the Q2 2020 version of the Corporate Risk Register and noted that plans for the reform of the sector are central to mitigating this risk.

She highlighted that mitigating the risk requires both shorter and longer-term actions [including implementation of Sláintecare]. The Committee felt the risk description could more appropriately reflect that the HSE is funding for 'quality services' rather than 'organisations' and strongly emphasised the precarious position of a number of S38/39 agencies and the financial challenges they are facing could have a serious impact on their on-going viability. The Committee requested that progressing the move to 'individualised funding' should be maintained as a priority goal.

# 5 AOB

The Committee agreed that it will continue to hold other special meetings outside of its usual monthly meeting to provide the required oversight on corporate planning processes.

It was also agreed that the connection between and overlapping of the Board Committee's responsibilities should be discussed at Board level.

Date of Next Meetings: 23 October 2020 (TBC).

The meeting concluded at 12:05pm.

Signed:

Tim Hynes

Chairperson

Date

24/10/2020 (T)