HSE Performance and Delivery Committee Meeting

Minutes

A meeting of the HSE Performance and Delivery Committee was held on Friday 22 May 2020 at 9.00 am via teleconference.

Members Present: Tim Hynes, Sarah McLoughlin, Brendan Lenihan, Fergus Finlay, Regina Moran, Louis Flynn, Sarah Barry.

In attendance: Stephen Mulvany, Dean Sullivan (until item 4), Anne O'Connor (until item 4), Dara Purcell, Hannah Barnes.

Joined the Meeting:
HSE: Valerie Plant (Item 3.1), Michael Redmond (item 4).

1. Governance, Administration and Chairperson's Remarks

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 agreed the minutes of the meeting of 21st February and 17th April 2020 subject to amendments.

No conflict of interest was declared.

2. Integrated Financial Management Service

2.1 Update on IFMS programme

S. Mulvany (CFO) presented the update of the IFMS project based on the briefing paper circulated in advance of the Committee meeting. The CFO outlined the impact of the COVID-19 emergency on the project noting Business Case Review is progressing, however, completion of the Benefits Realisation Strategy has been delayed due to the necessity to pause the Confirmation Design Workshops which were to be used to identify and validate benefits with stakeholders. The IFMS project team re-focused some resources towards the SAP Ariba SNAP Project and temporarily redeployed some IFMS project team members to front line support activities. In summary Covid-19 has necessitated a re-planning exercise of the overall IFMS Project. This re-planning exercise will take account of:

- The potential medium-long term impacts of Covid-19 on the project.
- Impact of accelerating SAP Ariba.
- Impact on DXC (Systems Integrator) contract, including consideration of all options available under the contract, e.g. suspension and pause of the agreement by the HSE.

The original 38-month duration of the Phase 1 Plan will be exceeded as a result of the impact of Covid-19. An estimated 8 to 10 weeks have been lost however the detailed re-planning exercise will seek to keep the project as close as possible to the timelines in the original end-to-end plan. He confirmed that aadditional gross costs related to ES2P / DXC will be addressed by available COVID-19 funding to the extent that they cannot be accommodated within the overall IFMS fixed cost. This is the subject of discussion with DXC and is expected to be addressed as part of the overall IFMS re-planning work referred to above.

The CFO informed the Committee The IFMS Project Team was requested to support the Covid-19 response by accelerating the deployment of the SAP Ariba Guided Buying & Invoicing module (i.e. the National Purchase to Pay Process) .He provided a summary of the scope and benefits of the Ariba Project and the governance and project Management structure that the Ariba SNAP project is temporarily under. The objective of which is to reduce the administrative burden associated with our current processes and protect the capacity to continue to order and pay for goods and services. The project is under the direction and project management of the IFMS Executive Advisory Committee (EAC) chaired by the CFO and is temporarily reporting into the Integrated Operational Hub (INOH) chaired by the HSE Chief Operations Officer, who are responsible for co-ordinating HSE Covid-19 workstreams. Daily status reports are submitted to the INOH.

The CFO confirmed that a technical go-live proceeded as planned on the 19th May 2020, with a 'soft' go-live for users to follow. V. Plant provided an overview of the project management side of this operation advising the Committee that working remotely has been successful particularly has everyone on the project team has been working in line with the same project schedule. This element has not hampered the implementation of the project. The main issues have been in terms of engagement with services and achieving buy in from users.

The Committee welcomed the progress with the project and noted the next steps in the project include resolving the industrial relations process, complete user setup, training, and go live, and completion of the Business Case Review.

3. Workplan Review

3.1 Workplan approach to year end – key issues to consider

The Chairman opened the discussion of this item noting a revised workplan to end of year will need to be developed due to the Services response to COVID-19 and the impact this had on business as usual timelines. The key issues for the Committee workplan to year end will be progressing: Corporate Plan, Estimates, NSP 2021 and Annual Report 2020. It will also be necessary to finalise arrangements for Performance reporting and the associated development of a Board performance metrics scorecard.

In response to questions on corporate priorities the CSO informed committee members that the recovery planning work group was informing thinking in this regard for inclusion in the corporate plan and discussion with P&D Committee members.

The CFO outlined the many complexities to be considered on the Funding side noting the scale of the demands on the overall economy due to COVID-19 in 2020 indicates that 2021 is likely to be a difficult financial year. This year a combination of additional approvals and savings not made will require supplementary estimates. Work to quantify the impact on services next year is being carried out by EMT members. The overall funding of the Health Sector has been added as a risk to the Corporate Risk Register.

The Committee noted there are uncertainties in the planning timelines for remainder of 2020 but requested the CSO to prepare a paper setting out the key planning timelines and milestones for 2020 in respect of the finalisation of the Corporate Plan; preparation of the annual Estimates 2021 (these will include an estimate of requirements to provide a similar level of service in 2021, roll over costs of models of care and new priorities for 2020 because of COVID-19, on-going continuity planning post COVID-19 and an estimate of the costs of key new service developments in 2021) the National Service Plan 2021 (indicative) and commencement on the preparation of the HSE Annual Report 2020.

The key milestones and indicative timelines paper will be considered by the Committee at a meeting to be arranged within the next two weeks.

3.2 Correspondence dated 11ᵗʰ May 2020 from Minister Harris

The Committee had a high-level discussion with executive team members regarding the requirements in the Ministerial correspondence relating to performance reporting and the corporate planning processes. A O Connor informed the Committee that formal National Performance Oversight Group (NPOG) meetings have not taken place during the initial phase of the pandemic, a high-level internal performance review meeting took place recently to assess the position based on March 2020 data. Consideration is now being given to how to re-establish internal performance oversight processes including re-establishment of the NPOG process.

In relation to the timescale for the submission of the Corporate Plan the CSO said given the changed complexion of healthcare delivery since the onset of the COVID 19 pandemic it is clear the Corporate Plan which was previously under development and approaching finalisation will have to be fundamentally reviewed. The development of a clear, high-level, post-recovery vision for the organisation is now essential. This should consider the operational and service changes that have been made in response to COVID-19 that should now be mainstreamed. A key emphasis of this will be on learning, with the goal to transition to new and better ways of working, new ways of delivering services and accelerating real change.

Following the discussion, the Committee noted that a draft reply to the correspondence was being prepared by management for consideration at the next Board meeting The Committee noted that an extension from end March 2020 to end July 2020 for submission of the Corporate Plan had been provided by the Minister in the correspondence. The Committee emphasised the need to continue to work to this deadline unless an alternative can be agreed as required.

4. ICT

The Chairman advised committee members that briefing papers presented to the Committee at previous meetings of the Committee when it had considered the ICT strategy were recirculated to the Committee in advance of today's meeting for reference on this agenda item.

The CIO F. Thompson presented an update on the ICT strategy which summarised the two previous presentations to the committee and outlined the COVID solutions which have been put in place, along with the next steps required to progress the ICT challenges across the Health Service. Due to COVID-19 the last 12 weeks have been consumed by the pandemic response and finding solutions for emerging problems. Other projects during this time have not progressed as originally intended. The CIO outlined a number of ICT solutions and projects which have been but in place in response to COVID-19 such as; HealthLink, Swiftque, HSE Bot, and data remediation.

These solutions have been put in place in both the public health system and the private hospitals. A large emphasis has been put on the collection and collation of data with the creation of a data lake. In addition to the work enabling the COVID-19 model of Care, the OCIO have progressed additional initiatives and supported additional activities that align to the existing Health Strategic Goals. This has been achieved through agile work and dealing with a multiplicity of priorities. F. Thompson confirmed that with all new initiatives training has been supplied to users. When asked about ethics. F. Thompson told the committee that a data impact assessment is currently underway which allowing for access points to be considered and restricted when necessary. The committee noted that the solutions which have been put in place are patient focused and requested that going forward when looking at the ICT Strategy the outcome for each project on the patient experience would be reflected.

The CFO commended the work of the CIO and his team. He also outlined that the streamlining of approvals and procurement has made a significant difference and further streamlining will be essential for example the need for a single patient only waiting list and schedule, or the need for visibility of beds and occupancy levels. Such changes will require systems to be responsive and compatible. Committee members held a high-level discussion on the appetite for risk within the organisation and the whether a culture of risk is present.

The Committee discussed the management arrangements for medical technologies and noted the lead executive in this area reported within the Estates function and not within the OoCIO. The Chairman said the Committee will consider at a future meeting the need for greater alignment between medical devises/technology solutions and the ICT strategy. The CIO agreed that digital solutions were essential however often these projects were long term difficult projects, highlighting that these are not just ICT challenges but business transformation challenges. Key to these digital solutions is ensuring that they are independent of the team they are being rolled out to. It is essential that data and information supports the delivery of services. As a result, there is a continuing need to plan and prioritise with the Operations and Strategy what programs and projects to deliver and in what order.

4.2 National Electronic Health Programme – Strategic Investment – European Investment bank Funding
Due to time constraints this item was deferred until further notice.
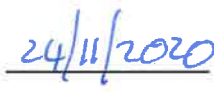
5. A.O.B

No matters were raised under this item.

Date of Next Meeting: 12th June for the next monthly meeting. An additional monthly meeting will be scheduled for August and the Chairman will arrange with the CSO a short meeting in the next two weeks to review corporate planning timelines.

The meeting concluded at 12:20 following a short discussion on the meeting by members in the absence of management.

Signed: _____   24/11/2020

Tim Hynes

Chairperson   **Date**