



HSE Performance and Delivery Committee Meeting

Minutes

A meeting of the HSE Performance and Delivery Committee was held on Wednesday 25 January 2023 at 9:00 via video conference.

Committee Members Present: Fergus Finlay (Chair), Brendan Whelan, Anne Carrigy, Sarah McLoughlin, Sarah Barry.

HSE Executive Attendance: Damien McCallion (COO), Maurice Farnan (AND Community Operations), Mary Day (National Director for Acute Operations), Joe Ryan (ND Operational Performance and Integration), Orla Treacy (Operational Performance and Integration), Niamh Drew (Deputy Corporate Secretary).

Joined the Meeting: Mark Brennock (ND Communications – Item 2.4), Philip Crowley (ND Strategy and Research – Item 4-5).

1. Committee Members Private Discussion

The Committee held a private session to review 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 suggest relevant actions as they became apparent.

2. Governance and Administration

The Chair welcomed executive members to the meeting.

2.1 Declarations of Interest

No conflicts of interest were declared.

2.2 Minutes of Committee Meetings

The Committee approved the following minutes:

- 9 December 2022

2.3 Committee Terms of Reference

A discussion on the Committee Terms of Reference was deferred until the February meeting.



2.4 HSE in the News

ND Communications joined the meeting

The ND Communications gave the Committee a broad update on current HSE media coverage, focusing in particular on the winter crisis, the Mental Health Commission's Interim Report on Child and Adolescent Mental Health Services (CAMHs), and the resignation of the HSE ND Digital Transformation.

The Committee agreed that the format of the discussion was helpful and that HSE in the News would remain on the agenda as a standing item.

ND Communications left the meeting

3. Performance Oversight

All performance/activity data used in this document refers to the latest information available at the time

The COO Report, Operational Service Report (November Data), Performance Profile (November Data), National Performance Oversight Group (NPOG) Meeting Notes (November Data), and the PMO Report – Winter/NSP 2022 -23, which had been circulated prior to the meeting, were noted.

The COO updated the Committee on the key strategic and operational updates outlined in the above documents. He reminded the Committee that as the data is from November, it does not reflect the pressures the service faced in the last number of weeks.

The Committee asserted that while the focus of capacity at an acute level is important, focus should also be put on providing beds in community settings. The COO advised of enhancements in community services being rolled out nationally, however there is a challenge scaling beds in the community due to the requirements for both replacement and additional beds. Regarding Integrated Care Programme for Older Persons (ICPOP), the COO advised that it is a well-structured national programme, however it needs to be developed further. The Chair requested a deep dive into ICPOP at a future Committee meeting.

The Committee discussed the effect of Covid-19 on service demand, and in particular on the upstaging of cancer as a result of people not accessing services to the same extent as pre-pandemic. Although there will be no data to make a concrete assessment on the impact of these delays for roughly 2 years, the Committee expressed concern about anecdotal reports of delayed cancer diagnoses occurring as a result of delays, Covid-19 and the aging population.



Regarding Ambulance Turnaround Times, the COO informed the Committee that a project has been established to improve performance between Acute Hospitals and the National Ambulance Service. Following a workshop that was held on Friday 9th December 2022, a clear action plan has been agreed. Updates will be provided to NPOG on a quarterly basis on progress against this plan.

In relation to waiting lists, the Committee advised it is important that the numbers published should be considered in context of the number of procedures which have been undertaken. The way the numbers are currently presented can make it appear that little progress has been made as numbers reflect new referrals and total numbers waiting but do not reflect people removed from the waiting list due to completion of their procedures. This was acknowledged by the COO. The ND for Acute Operations informed the Committee that to tackle capacity issues, planning is underway to undertake a high level capacity plan which was welcomed by the Committee.

The COO outlined the proposed next steps following the Mental Health Commission's Interim Report on CAMHs. The Committee queried whether there will be a clear learning plan with time frames to implement the HSE recommendation in the report. The COO advised that additional recruitment is required in this area for change to be implemented and this is underway. He also advised that he chaired a Maskey Review implementation group with the CCO and there is a requirement to merge the learnings from that group with learnings from the CAMHs Report.

4. Unscheduled Care

ND OPI presented data circulated to the Committee in advance of the meeting, highlighting that the HSE is facing unprecedented levels of unscheduled care activity with attendances exceeding pre-pandemic levels. He advised that 2019 was the last 'normal' year and it too had a severe flu season. This winter has seen growth in attendance at EDs in all age groups.

The ND OPI advised that planning for next winter needs to start now and the HSE management team is seeking to produce a 3 year plan looking at short term capacity gains and implementing nationally localised, successful initiatives already in place. The aim of this multi-year plan is to improve integration of services.

For longer term planning, the HSE will be waiting on DOH to complete an updated Capacity Review. The HSE understanding is that this will be based on data from the 2022 Census collected by the Central Statistics Office. The COO highlighted that the current practice of recruitment campaigns rolling out in the context of hiring to enable the winter plan is not sufficient.



The Committee posed a number of questions in relation to GP vacancies and working hours, out of hours GP services and their relationship to unscheduled care. The COO confirmed that this is a complex area but further information would be provided to the Committee.

The Committee discussed the importance of ensuring that areas of excellence within the system are rolled out and integrated into the system nationally. The Committee recognised that there is no area of HSE activity where additional short and longer term planning isn't essential. In particular, arising from the performance data provided prior to the meeting, the Committee discussed cancer services which despite an improving trajectory in RAC performance in 2022 there are still some challenges in meeting NSP targets.

Management introduced the concept of a three year plan to address the current crisis in emergency departments and the committee was strongly supportive of the plan.

The Chair agreed to bring this proposal to the Board at its next meeting seeking to add it as a standing agenda item for the Board.

5. National Service Plan 2023

ND Strategy and Research joined the meeting

The ND Strategy and Research provided a verbal update on the updated NSP 2023 which will be submitted to the DOH in the coming weeks. He highlighted the ongoing financial risk discussions and confirmed that feedback from the DOH is currently being incorporated into the new draft NSP 2023.

The Committee noted the predicted timelines and process, noting that if necessary due to time constraints, the updated NSP may go straight to the Board for approval rather than returning to the Committee at its February meeting.

5. Annual Report 2022

The ND Strategy and Research presented the proposed timelines and legislative requirements for the HSE Annual Report 2022 which were outlined in the paper circulated to the Committee in advance of the meeting. He highlighted a number of areas on which the report will focus, including recruitment, retention, and climate action and confirmed that the report will be a digital document only.

The Committee queried whether there is feedback available on who uses the HSE Annual Report and whether this could inform its drafting. ND Strategy and Research confirmed that although this data is not currently available, the development of the Report as a digital document would help have this information for next year.



The Committee supported the timelines and process presented as well as the proposal of developing the Annual Report into a digital document.

ND Strategy and Research left the meeting

7. AOB

No matters arose under this item.

The meeting ended at 13:20.

Signed: 

Fergus Finlay
Chairperson

Date: 17 February 2023