



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

HSE Safety and Quality Committee Meeting

Minutes

A meeting of the HSE Safety and Quality Committee was held on Tuesday 15th February 2022 at 9.00am via teleconference

Committee Members Present: Prof Deirdre Madden (Chair), Ms Anne Carrigy, Ms Jacqui Browne, Dr Cathal O’Keeffe, Ms Yvonne Traynor, Dr Chris Luke, Ms Margaret Murphy

HSE Executive Attendance: Dr Colm Henry (CCO), Dr Orla Healy (ND Q&PS), Ms Yvonne O’Neill (ND Com Ops), Ms Anne O’Connor (COO), Dr Geraldine Smith (ND IA), Dr. Cora McCaughan (AND HCA), Ms Niamh Drew, Mr Pat Galvin.

Joined the Meeting: Ms Gemma Moore (Item 4), Ms Sharon Hayden (Item 2), Ms Bernie McNally (Item 7), Mr Tim Hanly (Item 4), Mr Donal Hurley (Item 4), Ms Kelly O’Rourke (Item 4), Ms Leah O’Toole (Item 3), Dr Brian Kinirons (Item 3),

Apologies: Prof Fergus O’Kelly

1. Governance and Administration

- Following a short private meeting of the Committee, D Madden took the Chair at 9.15am and welcomed members of the Committee and the Executive to the meeting.
- No conflicts of interest were declared and the Minutes from 14th December 2021 and 11th January 2022 were approved.

2. CCO Report

CCO and Ms Sharon Hayden joined the meeting

- The CCO provided a high-level overview on several Covid related areas, noting the figures relating to Covid are stabilising and there is now a lesser impact on hospital services. However, he informed the Committee that there were record attendances at emergency departments last week. Dr Henry also highlighted that the vaccination programme is experiencing a reduction in uptake of the booster dose, especially in the younger cohorts, but planning for this year remains ongoing and consideration is now being given to the need for a further booster dose for vulnerable cohorts. The CCO advised that it is being proposed that if further

booster doses are required, these will likely be administered through GP practices and pharmacies.

- The Committee discussed the possibility of another variant arising and how we would be prepared to deal with it. CCO advised that Public Health Advice would be followed, and that incremental immunity is being built up meaning it is expected that future variants will not have as strong an impact on the population resulting in less of an impact on hospital services.
- New and emerging Covid-19 Therapeutics provide opportunities to combat COVID-19 challenges. These treatments are recommended for use in defined population sub-groups, where the benefits of the treatment have been shown to, or are likely to, outweigh the risk. The evidence base for these therapeutics is increasing rapidly and under active review. As of 7 February 2022, a total of 52 doses of Covid 19 Therapeutic drugs have been administered, more than 90% were administered to those who were immunocompromised, with infectious disease, respiratory and haematology being the main clinical specialties. These are new treatments, and patients who receive them will be actively monitored for effectiveness and patient safety after administration, increasing the evidence base related to their use. The Implementation Group and the Advisory Group are working together to develop the appropriate structures, processes and accountabilities for stewardship and oversight.
- The CCO advised that the fourth wave of Covid-19 has had an unprecedented impact on staff levels. This poses an increased risk to quality and patient safety. However, there has been a continuing improvement in staffing levels over the last number of weeks. Critical care service pressures have stabilised, and scheduled care services are returning to normal.
- Cancer screening Services are seeing a recovery in screening figures with BreastCheck, CervicalCheck and Bowel Screen all showing improvement against targets.
- Cancer services are operating normally, with some ongoing local difficulties related to staffing absences. The key focus now is on continuing to address the backlogs and build future resilience in the system.
- The Obstetric Event Support Team is now running in 3 hospitals; a 6-month report has become available and will be brought to the Committee for the next meeting.
- The CCO discussed perinatal Genetic Services with the Committee and agreed to provide an update as part of the March report. Following an international search campaign and a HR process there has not been success in appointing a Professor in Genomics Medicine. Funding is required for this service in order for it to be successful and to attract appropriately skilled candidates.
- CCO updated the committee in relation to Letterkenny University Hospital, the plan for which has been shared by email.

- Work has progressed in relation to the KPIs for Post-Menopausal Bleeding. Two KPIs have been agreed and are now being operationalised: 1. The number of patients referred to the gynae services with PMB seen within four weeks. 2. The number of patients referred to the gynae services with PMB who required a biopsy and have histological confirmation within twelve weeks. It is anticipated data will be collected for the end of Q1. Work is underway on the revision of the interim PMB guidance.
- The Committee was informed of the ongoing issues relating to Our Lady's Hospital Navan. There are significant concerns about patient safety and clinical governance at the hospital that will continue for as long as OLHN continues to operate as a Model 3 Hospital, in circumstances where its staffing, infrastructure and resourcing is more consistent with that of a Model 2 Hospital. The Committee discussed the fact that local clinicians generally support the reconfiguration, but that the process has yet to be completed. The Committee voiced their support for this change, and it was agreed that the Committee Chair would write to the Chairman of the Board to stress the seriousness of this issue and to express the Committee's recommendation that the reconfiguration should happen as soon as possible.

3. National Doctors Training Programme

Dr Brian Kinirons and Leah O'Toole joined the meeting

- The Committee welcomed a high-level presentation from the National Doctors Training Programme (NDTP). The NDTP perform an annual assessment of needs to ensure a specialized workforce is available and track progress of consultant led training.
- The Committee was informed that while the number of consultant posts has increased over the last 10 years, the proportion of Consultants as compared to Trainee and Non-Training NCHDs has decreased. In 2011 Consultants represented 35% of the medical workforce and it is now 32%. In the last 10 years there has been a 70% increase in the number of non-training NCHD posts. The Consultant Application Approvals Committee (CAAC) approved 550 new posts in 2021 but there was approximately 284 training exits in 2021 so it will prove difficult to fill all approved posts.
- It was noted that Ireland has the highest amount of NCHDs per 100k population, when compared internationally, with a ratio of consultants to NCHDs at 2 to 1. Dr Kinirons advised that there is a need to increase consultants and training doctors, noting that completion of a training programme takes a number of years, and that this will need to be managed in a controlled and incremental way. There are various initiatives being investigated with incentives for recruitment and retention to be considered.

- The Committee discussed the fact that there are not enough full-time contracts available, with a lot of the Non-Training NCHDs on long term temporary contracts, which will not attract some people into the service. The Committee questioned the NDTP on what would be required to bring Ireland in line with comparable jurisdictions. Dr Kinirons advised that a mixture of financial support and reorganising will be required, as Dr Kinirons feels more can be done with what is currently available, but infrastructure support will be required as well. NDTP are looking at data from 2016 to investigate how best to retain staff. The Committee was advised that most of the training programmes allow for trainees to undertake research or fellowships abroad during the training programme. NDTP noted the current focus on the GP training programme as more GP's are required countrywide, with a plan to increase intake to 350 candidates over the next number of years. The Committee acknowledged the work done to date and thanked Dr Kinirons and Ms O'Toole for their attendance.

Dr Brian Kinirons and Leah O'Toole left the meeting

4. Patient & Staff Experience

Gemma Moore, Tim Hanly, Donal Hurley and Kelly O'Rorke joined the meeting.

- Dr Gemma Moore introduced the item of Safeguarding and introduced Kelly O'Rorke, a Safeguarding Manager with Stewart's Care. Ms O'Rorke advised the Committee that the video to be shown refers to a Safeguarding incident that she was involved in with one of the long-term residents, who self-reported an incident she was having with a former resident. The Committee viewed the video, which was made with the resident's help and consent and was being used as a learning video for Safeguarding. The Committee expressed that the video was very helpful and there was a lot to be learned from it. Ms O'Rorke gave an overview of the process involved in having discussions with the resident, considering proposed solutions, the making of the video and the outcome of the incident, which the resident was happy with.
- Mr Tim Hanly gave an update to the Committee on the monitoring of Safeguarding and that he hopes to see legislation for Safeguarding soon. The Committee was advised of the gaps that are being looked at since the Safeguarding policy was introduced. HIQA has carried out inspections in this regard and the reports that are generated are checked for compliance. It was noted that compliance rates have increased from 50% to the current figure of 85/90%. The Committee was also informed that training is being tracked and any feedback is being monitored for any areas of review. Value for money is a topical item to ensure that the investment in Safeguarding Officers and teams is worthwhile. Mr Hanly advised that further investment is required to improve the teams further with evidence showing that the

Safeguarding policy has had an impact. The Committee questioned the challenges within the policy and introducing reforms. Mr Hanly advised that there are good relationships with Stewarts, but it hasn't been easy to make changes, advising that Safeguarding is everyone's concern, and it is not just for Social Workers to implement. Mr Hanly explained that the reporting of any abuse needs to be reported properly so that issues can be corrected, and he felt that this area can be improved upon. The Committee thanked all involved for the presentation and asked for an update in September.

Gemma Moore, Tim Hanly, Donal Hurley and Kelly O'Rorke left the meeting.

5. Chief Operations Officer Update

COO and ND Com Ops joined the meeting

- The COO provided a verbal update to the Committee on the South Kerry CAMHS Review Report. The Committee noted that further meetings are being held with those affected by the Report and a compensation scheme for those who suffered harm/injury while they were under the care of South Kerry CAMHS was being developed. It was also noted that an audit of compliance with CAMHS operational guidelines and a prescribing audit of those with ADHD across CAMHS will be undertaken. In addition, the Committee noted the establishment of the Maskey Report Implementation Oversight Group co-chaired by the Chief Operations Officer and Chief Clinical Officer. It was agreed that a monthly progress report on the implementation of the Maskey Report would be provided to the Committee by the Chief Operations Officer.
- The National Director of Community Operations provided the Committee with an update on the NIRP Brandon Report. The Committee was advised that the recommendations from the report are progressing and being monitored by the Strategic Oversight Group. The National Director of Community Operations advised that the CHO is already in an improvement cycle and this report is included as part of the improvement cycle. A report is to be made available in the coming weeks, relating to the cases outside the scope of the NIRP Review outlining the action for those cases. It was noted that HIQA had undertaken unannounced inspections in residential services in the area and while the full report was awaited, HIQA has indicated that there were no safeguarding concerns arising from their inspections that need to be escalated.

COO and ND Com Ops left the meeting

6. Quality Profile Summary

- ND Q&PS gave the Committee an overview of the Quality Profile Summary noting that the Staff Absences figures are from December, and with the changes in public health advice, these figures have improved. The Committee had concerns relating to Delayed Transfers of Care and the Ambulance Service as the figures relating to those metrics had disimproved. The Committee asked for written updates on these topics to be supplied for the next meeting.

7. National Independent Review Panel

Bernie McNally joined the meeting

- The Chair of the NIRP, Ms McNally, provided the Committee with an update on current case files. The Committee was briefed in relation to 3 current reviews which will likely come to the Committee later this year.
- The Committee discussed the learnings from previous reports and suggestions for future reviews such as the removal of HSE logo and branding from reports to demonstrate and show the independence of NIRP. It was felt that an expansion of the role and function of NIRP is warranted and should be considered. The Committee thanked the Chair of NIRP for her work to date and for her attendance at the meeting.

Bernie McNally left the meeting

8. Internal Audit

ND IA & AND HCA joined the meeting

- ND IA gave an overview of the Q4 IA Activity Report, the HCA Q4 Reports and the HCA End of Year Report. ND IA advised the Committee that there were 24 reports completed in Q4, with 28 in total for 2021, with 115 recommendations contained within. Tracking data available in relation to Healthcare Audit recommendations indicates that 72% (21) of the total 2020 recommendations and 90% (112) of the total 2019 recommendations have been implemented. ND IA informed the Committee that the audit on hospitals' compliance with HSE Standards on Post-mortem Examinations (2012) is currently at an advanced stage. The results of the audit will be provided to the Committee at its March meeting.
- AND HCA advised the Committee that Healthcare Audit is busy with 24 reports being completed in Q4 of last year, with a 26% satisfactory rating.
- There was discussion about how recommendations are monitored. ND IA informed the Committee that there is a tracking process in place and an update is sought from the owner of the recommendation and that is presented to EMT. It was also noted that senior managers

get a regular report via NPOG. The process is self-assessment, and it requires management to supply the information and even though follow up audits are done on a sample basis; it is up to management to follow up on the recommendations.

ND IA & AND HCA left the meeting

9. AOB

- With no further business to be discussed, the Chair thanked the Committee members for their attendance and the meeting concluded at 15.00.

Signed: Deirdre Madden

08/03/2022

Deirdre Madden

Chairperson

Date