



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 Thursday, 21st November 2019 at 10.30pm in Indigo Room, Dr Steevens Hospital, Dublin 8

Members Present: Prof. Deirdre Madden, Mr. Mark Molloy, Prof. Fergus O'Kelly, Dr. Cathal O'Keeffe, Ms. Anne Carrigy, Dr. Chris Luke, Ms. Yvonne Traynor

HSE Executive Attendance: Mr. Patrick Lynch, Dr. Colm Henry, Dr. Philip Crowley, Mr. Jim O' Sullivan (Secretary), Ms. Joanne Lee

Joined the Meeting: Agenda Item 3 – Dr. Cora McCaughan, Agenda Item 5 – Ms. Cornelia Stuart, Ms. Catherine Hogan, Agenda Item 6 – Mr. Risteárd O' Laoide and Ms. Deirdre McNamara

Apologies: Ms. Margaret Murphy

1. Introduction and Chairperson's Remarks

D Madden took the Chair and welcomed members to the meeting of the Committee.

Prior to the Executive joining the meeting, the following matters were considered:

- Minutes of the Meeting on 23rd October 2019 - Approved.
- Status update of Committee Action Log – Discussed and Noted
- The Committee congratulated Ms Margaret Murphy on receiving an Honorary Degree from Queens University Canada.
- A short discussion was had in relation to the Patient Safety Bill under Matters Arising. The Chair confirmed that a letter and comments from Committee members were forwarded to the Department of Health with questions for consideration in relation to the Bill. The DoH acknowledged this correspondence.

No conflict of interest was declared.

2. Patient and Staff Stories

Dr Philip Crowley presented to the Committee a video on Patient Experience. The purpose of this item is to ground the committee in the real experience of patients and staff. In this video a family member of a patient, "Patricia" described her father's experience of cancer and the bowel screening programme. The piece raised questions around learning from adverse incidents and open disclosure.

The Committee agreed that the inclusion of such videos at future meetings should be accompanied with a briefing on what happened, what went wrong / right, and what the learning is.

It was agreed that at the next committee meeting Dr. Crowley would bring a plan for a blend of different types of videos and a briefing on how patient stories will be incorporated into the Committee's agenda.

3. Health Care Audit

Dr. C. McCaughan joined meeting for this item.

Mr. P. Lynch provided a brief overview on Health Care Audit which is similar to the design and practice of Internal Audit, as an independent, objective assurance activity designed to add value and improve an organisation's operations. It helps an organisation accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, control and governance processes.

Three reports were presented to the Committee.

- The Health Care Audit end of year Report 2018 (for information)
- The draft Health Care Audit Plan for 2020 (for consideration)
- Status Report: Implementation of Recommendations made in Health Care Audit Reports June – December 2018 (for consideration)

It was agreed that the Committee would receive 2 reports per year on Health Care Audit. The next report will be brought to the Committee as an agenda item for February's meeting.

The draft Health Care Audit Plan for 2020 was brought to the Committee for consideration prior to being signed off by the Executive Management Team. The Committee agreed to endorse the Plan.

The Status Report is critical to improving quality and safety and the implementation of recommendations set out in the audits. The QAV HCA Team are now monitoring the implementation of recommendations.

It was agreed that the Committee would invite the National Director Acute Services and the National Director Community Operations to attend a future Safety and Quality meeting to discuss the next steps that follow once the audit reports are received from NQAV.

It was agreed as an agenda item for the next meeting that P Lynch will provide a paper on the top 5% of recommendations in relation to Health Care Audits that have not been implemented.

It was also agreed that P. Lynch will present the External Report from the Chartered Institute of Auditors at December's meeting.

4. Risk Management

P. Lynch presented information to the Committee on the Corporate Risk Register (CRR) following previous queries from the Committee in relation to how long risks have been on the CRR and how the status of those risks has changed over time.

P. Lynch informed the Committee that a workshop has been arranged with the Executive Management Team and B Semple to review the CRR.

It was agreed that P. Lynch would report to the Committee on the outcome of the workshop at the December meeting.

5. Incident Management Framework

C. Stuart and C. Hogan joined meeting.

P. Lynch briefed the Committee on the Incident Management Framework and discussed the draft response to the Minister's letter that has been prepared.

The Minister for Health wrote to the HSE Chair on the 30th September 2019 in relation to the HSE's Incident Management Framework and in particular, the operation of Serious Incident Management Teams (SIMTs).

The Committee reviewed the draft response and agreed amendments to be made to the letter and forwarded to the Chair of the Safety and Quality Committee for review before being sent to the Chair of the Board for final approval and issuing to the Minister for Health.

C. Stuart and C. Hogan presented to the Committee on Shared Healthcare Learning following incidents. They outlined how improving patient safety involves having strong mechanisms to promote sharing of learning throughout the healthcare system. The HSE is in the process of developing a national System for Shared Learning following Patient Safety Incidents. This system seeks to build on the work already undertaken as well as identifying new opportunities for development of information to inform safety improvement.

The Committee agreed that progress reports on the project should be provided to the committee and the date of the launch to be added to the Safety and Quality Workplan for 2020.

6. Progress Report on Interval Cancer Audit

C Henry, R O'Laoide and D. McNamara joined the meeting

C. Henry welcomed R O'Laoide and D. McNamara to the meeting to discuss the progress report on Interval Cancer Audit.

R. O' Laoide provided context and background information on the Audit. An interval cancer may be defined as a cancer presenting in the interval following a negative screen. Interval cancer rates are recognised quality indicators of screening programmes internationally. Audit is now a fundamental

component of quality assurance and improvement in all healthcare settings. In Ireland all medical practitioners must record audit activity as part of annual registration requirements with the Medical Council. The Chief Clinical Officer and National Director of National Screening Services commissioned a review of audit of interval cancer for all three relevant programmes, cervical cancer, breast cancer and bowel cancer with the aim of producing recommendations based on international experience and practice. This review commenced in November 2018. The report is due to be finalised at the end of November 2019.

The Chair expressed thanks to R O'Loaide and D. McNamara for their time and looks forward to seeing the report at the December meeting.

7. Report from Chief Clinical Officer

The Chief Clinical Officer's Report presented to Committee an overview of current and strategic safety and quality issues from across the functions of the CCO, including: QAV; QID; National Quality Improvement Team; National Women and Infants Health Programme; National Cancer Control Programme; and Clinical Design & Innovation.

A verbal update was provided on the waiting lists of the National Gender Service at St Columcille's Hospital, Loughlinstown. The Hospital recently conducted a full review of their service, including their referral processes. Extra Clinics will be held to minimise any increase in waiting times.

A verbal update was provided on Letterkenny Gynaecological Services. CCO informed the Committee that a full external review has been commissioned and he will revert to Committee when completed.

An update was provided on Breast Implant Associated Anaplastic Large Cell Lymphoma which is an emerging issue.

8. Any Other Business

The Committee noted a briefing paper outlining how the patient representatives are selected for patient engagement and the process around it. Due to time constraints this paper will be viewed at a later date.

A letter of assurance from Prof. F. Murray, National Doctors Training and Planning was provided to the Committee following on from October's meeting in relation to the report on the Employment of Consultants who are not on the Specialist Division of the Register of Medical Practitioners. Committee members sought further assurance on the risks identified in the report.

The Committee agreed an options paper seeking better assurance regarding risk should be an agenda item at the December meeting.

It was agreed at the December meeting that the Safety and Quality Committee workplan 2020 would be added as an agenda item.

Dates for Committee meetings in 2020 to be circulated to Committee members.

Date of Next Meeting: 12th December 10.30pm, Indigo Room, Dr Steevens Hospital.

The meeting concluded at 15:30 pm.

Signed: Deirdre Madden
Deirdre Madden
Chairperson

12/12/19
Date