



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, 26 September 2019 at 12.30pm in Indigo Room, Dr Steevens Hospital, Dublin 8

Members Present: Prof. Deirdre Madden, , Mr Mark Molloy, Dr Yvonne Traynor(joined by teleconference), Dr Cathal O’Keeffe

HSE Executive Attendance: Dr Philip Crowley, Mr Patrick Lynch, Dr Colm Henry

Joined the Meeting: Ms Ann Carrigy (Incoming Member), Ms Bernie McNally (Item 2), Ms Anne O’Connor (Item 3), Ms C Tully and Dr. B Creedon (Item 5), Dr Jennifer Martin and Ms Gráinne Cosgrove (Item 6)

Secretariat: Ms Niamh Drew, Ms Joanne Lee

Apologies: Prof Fergus O’Kelly, Ms Margaret Murphy, Dr Chris Luke

1. Introduction and Chairperson’s Remarks

D Madden took the Chair and welcomed members to what was the second formal meeting of the Committee and welcomed those attending for the first time. Prior to senior managers joining the meeting, the following matters were considered:

- Minutes of the Meeting on 22 August 2019 were approved.
- Review of the Action Log and Draft Workplan for the Committee.
- Corporate Risk Register (CRR) was discussed. It was agreed to have the CRR as a standing agenda item at the Safety and Quality Committee Meetings. Chairperson will speak with Chair of HSE Audit and Risk Committee in relation to risks that the Committee feel should be assigned to it. It was also agreed that as and when required, a risk can be escalated to the HSE Board.

No conflict of interest was declared.

2. National Independent Review Panel (NIRP)

B. McNally, Chair of the panel joined the meeting and presented an overview of the National Independent Review Panel (NIRP). The HSE, in agreement with the Minister, established NIRP to review serious incidents that occur in disability services. The Panel has an Independent Chair and Members who conduct these serious case review. The first major Review into the care of “Amy” was completed in 2018.

The presentation provided the Committee with information on the scope of the work of the NIRP which is committed to promoting learning and best practice by reviewing cases in a professional and

timely manner, with a view to assisting the disability sector to improve its services and prevent similar situations occurring in the future.

It was agreed that once the current Review report was concluded B. McNally would come back and update the Committee on the findings.

3. Termination of Pregnancy

A report on the Termination of Pregnancy Services from A. O'Connor, Chief Operations Officer, was presented to provide an update to the Committee in relation to the implementation of services and an overview of the pathway of care for women accessing this service and to provide information on governance, leadership, training, clinical guidance, compliance with legislation, service availability, implementation challenges and next steps.

She outlined a number of challenges that are impacting implementation of the service in full such as: issue of conscientious objection; recruitment of staff and also there are infrastructural/logistical challenges that hinder the provision of the service in a sensitive and appropriate manner such as the limited number of single rooms, difficulty in setting up dedicated clinics when the demand for the service is low (particularly in smaller units), and access to theatre slots in an already busy maternity unit.

Services, as prescribed in the Health (Regulation of Termination of Pregnancy) Act 2018, have been available for nine months. Implementation is in line with expectations of the implementation plan except for full roll out in the acute setting. Acute Operations continue to engage with hospital groups on the barriers to the full provision of service and of overcoming these.

The appointment of a clinical lead, establishment of a clinical advisory forum and training provided by the Institute of Obstetricians and Gynaecologists will further support the roll out of termination of pregnancy services nationally.

4. Report from Chief Clinical Officer (CCO)

C. Henry presented the Chief Clinical Officer's Report providing 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 Breast Implant Associated Anaplastic Large Cell Lymphoma which is an emerging issue. Letters are to issue to patients on 7 October 2019 to explain the incident and to provide reassurance. A phone line will also be open for queries from those affected.

C. Henry outlined the Expression of Interest process for New Clinical Leads. The position of Clinical Lead for Disabilities will shortly be advertised. The post holder will provide clinical leadership and guidance to lead on the development and implementation of best practice care, pathway and models for integrated, persons centred support for all people with disabilities. A Clinical Lead for Lymphedema and Lipoedema Services will also be sought shortly. The National Clinical Lead will be responsible for clinically overseeing the implementation of the proof of concept sites and the roll out of the model of care. An update was provided on the Patient Strategy 2019-2024 and it was agreed this would be brought to the October Safety and Quality Committee meeting as an agenda item.

HSE Incident Management Framework (IMF) which is led by the National Quality Assurance and Verification Division was discussed and a copy is to be issued to the Committee.

Staff from the Department of Health Patient Safety Office will provide an update on the Patient Safety Bill at the October meeting.

The issue of medical recruitment, HSE National Doctors Training and Planning (NDTP) and Consultants not on Specialist Division of the Register of Medical Practitioners will also be brought to the October Committee meeting as an agenda item.

5. Clinical Audit

Dr. P Crowley welcomed Ms C. Tully, Executive Director and Dr. B Creedon, Clinical Director from the National Office of Clinical Audit (NOCA) to the meeting to present on the work of the office.

He provided an Overview of Clinical Audit Process with audits being carried out at local and National level. Local Clinical audits are selected and carried out based on local and clinical priorities and available resources. They are also based on national clinical guidelines and standards. The final report on the National Review of Clinical Audit was discussed.

Ms C. Tully and Dr B. Creedon gave a presentation and provided the Committee with information on the scope of the work of NOCA and a review of an Audit Cycle, the challenges for Clinical Audit, reporting and the impact of Clinical Audit. An example of a Hip Fracture Audit Cycle was reviewed.

D. Madden thanked NOCA for the good work and offered the support of the Committee to help with driving the improvement agenda.

6. Quality Profile

Dr J. Martin and Ms. Grainne Cosgrove joined the meeting and presented a tutorial on Measuring to oversee and improve Quality using a Quality Profile approach. The session provided a purpose for learning together on "understanding" SPC charts and funnel plots.

One to one session with Committee Members not in attendance will be arranged. It was agreed that the Committee is supportive of the approach to prioritising quality on its agenda.

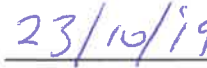
7. Any Other Business

It was agreed that guidance on the content of papers being presented to the committee will be given to senior managers and more concise information should be provided to the Committee on serious incidents, major adverse events and identifying and highlighting areas of risk.

Date of Next Meeting: 23 October, 11:00 am, Indigo Room, Dr Steevens Hospital.

The meeting concluded at 5.45 pm.

Signed: 
Deirdre Madden
Chairperson


Date