



## HSE Safety and Quality Committee Meeting

### Minutes

A meeting of the HSE Safety and Quality Committee was held on Thursday 18 January 2024 at 09:30 via video conference.

**Committee Members Present:** Deirdre Madden (Chair), Cathal O’Keeffe, Anne Kilgallen, Mary Culliton, Anne Carrigy, Margaret Murphy (joined approx. 10.05), Yvonne Traynor, Fergus O’Kelly, Jacqui Browne.

**HSE Executive Attendance:** Martina Queally (CO Community Healthcare East), Orla Healy (ND QPS), Niamh Drew (Deputy Corporate Secretary), Rebecca Kennedy (Office of the Board).

**Joined the meeting:** Louise Hendrick (Clinical Lead QPS Intelligence – Item 3), Joe Ryan (ND Operational Performance and Integration - Items 4-9), Chris Rudland (AND Complaints, Governance and Learning – Items 4 and 5), Anne Marie McMahon (National Complaints, Governance and Learning Team – Items 4 and 5), Suzanne Moloney (National Complaints, Governance and Learning Team - Items 4 and 5), Mary Leahy (Patient Experience and Complaints Saolta University Health Care Group - Item 5), Gemma Moore (Item 5), Iolo Eilian (AND Patient Engagement - Items 6-9), Sarah McLoughlin (Board Member – Items 6 and 7), Anne Lawlor (Co-Chair National Patient Forum - Item 7), Colm Henry (CCO – Items 7-10), Sharon Hayden (CCO Office – Items 7-10), Mary O’Kelly (CO CHO 7 - Item 8), JP Nolan (Head of QPS Community Operations - Item 9).

#### 1. Committee Members Private Discussion

The Committee held a private session where the Chair provided a summary of 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 declarations of interest were made.



## 2.2 Minutes

The minutes of 13<sup>th</sup> December 2023 were approved.

## 2.3 Matters for Noting

i) *Report on the Implementation of the HSE Framework for the Governance, Management and Support of Research RGMS Framework*

The Committee noted the above report which had been circulated in advance of the meeting.

ii) *Committee Correspondence*

The Committee noted the following correspondence:

- Letter from Cork County Council to Chair dated 14<sup>th</sup> December 2023
- Letter from HSE CEO to Deputy Neasa Hourigan dated 8<sup>th</sup> January 2024

iii) *Healthcare Audit (HCA) Plan 2024*

The Committee noted further information provided on the HCA Plan 2024 which had been requested at the December Committee Meeting. The Committee agreed that the level of detail provided in this information should be provided as part of HCA briefings going forward.

## 3. Quality Profile

*O Healy and L Hendrick joined the meeting*

The Committee discussed the Quality Profile and considered how it would be used in the upcoming year.

The Committee expressed concern about the impact the ongoing FORSA action is having on the collection and reporting of this data. The Chair advised that she would not be able to give assurance to the Board in relation to the indicators in the Quality Profile due to the absence of complete data.

The Committee agreed that until the FORSA action is resolved, the Quality Profile should now come to the Committee quarterly instead of monthly.

*L Hendrick left the meeting*



#### **4. Your Service Your Say**

*ND OPI, AND Complaints, Governance and Learning, AM McMahon, and S Moloney joined the meeting*

The AND Complaints, Governance and Learning, AM McMahon, and S Moloney presented an overview of their work as part of Your Service Your Say (YSYS) with a focus on how learning from the system is utilised. Their presentations focused on the systems, tools and supports developed by the National Complaints Governance and Learning Team to deliver an enhanced service user feedback process and the mechanisms that enable the narrative and data from feedback to drive learning and quality improvement.

The Committee discussed the methodology used for validating the complaints made to YSYS and was advised that all responses must be issued in compliance with the legislative timeline of 30 working days. The Committee also discussed the methodology used to direct people to the correct party if a complaint cannot be dealt with by the HSE.

The Committee queried the accessibility of the YSYS service for people who are visually impaired or have a low level of English proficiency. The YSYS resources have been redesigned with input from the National Adult Literacy Agency, Inclusion Ireland, and Youth Advisory Council, and it is intended to add Irish Sign Language. The Committee discussed the Ombudsman's Report "Learning to get Better" and requested a summary of actions taken to implement its 29 Recommendations.

#### **5. Staff Experience**

*M Leahy and G Moore joined the meeting*

M Leahy presented to the Committee on a recent anonymized case which provided an example of the complexity of the complaints that the HSE manages. The presentation reflected the issues that can arise at the initial investigation phase and highlighted the complainant/family experience. She explained how engagement with the family, increased communication, and contact, restored trust and addressed and explained all issues as well as identifying changes to be replicated across the Hospital Group with relevant learning for other Hospitals Groups.

The Committee thanked M Leahy for her presentation and her work as a complaints officer. The role of good communication throughout the patient or service user experience and the importance of early recognition of an incident as necessary was discussed. The Committee expressed concern that



complaints officers do not usually deal with complaints fulltime. This puts them under significant pressure considering the amount of time and resources required by the process.

*AND Complaints, Governance and Learning, AM McMahon, S Moloney, M Leahy and G Moore left the meeting.*

## **6. Patient Engagement Roadmap**

*AND Patient Engagement and S McLoughlin joined the meeting.*

The AND Patient Engagement I. Eilian presented progress on the implementation of the Patient Engagement Roadmap to date to the Committee. An action plan for the implementation of the Roadmap has been developed through the Steering Committee and is being tracked at each steering group meeting. It is primarily based on a Partnership, Education and Training package which will be co-designed and delivered for Service Users, Carers, Public Representatives, staff and managers. The Committee was advised that it is anticipated that this work will be completed and piloted within one of the new Health Regions by Q4 2024.

The Committee discussed the level of engagement with advocacy services during the development of the action plan and highlighted that disability organisations appear to have not been engaged with. The AND Patient Engagement acknowledged this and advised that engagement with all groups has not begun yet. The Committee also discussed the importance of using existing resources and the AND Patient Engagement confirmed that work previously completed in this area will be used if applicable.

The AND Patient Engagement highlighted that support for this initiative at Board level is critical for its success. The Committee expressed its full support for this work and requested that an update be provided in 6 months.

## **7. National Patient Forum**

*A Lawlor, CCO and S Hayden joined the meeting.*

A Lawlor presented to the Committee on her work with 22q11 Ireland and as Chair of the National Patient & Service User Forum (The Forum). The Forum was set up to support patient and service user partnership through advocacy, engagement, consulting and co-design and does not provide any services. It completed 2 significant pieces of work in 2023, namely the development of the document



'Our vision for partnership across our HSE' and the first ever Patient Partnership Conference which took place on October 12, 2023, in the Convention Centre Dublin.

The Committee discussed the level of consultation which goes to the Forum and whether there is any media engagement. A Lawlor advised that there is good level of consultation but it can at times feel tokenistic rather than reflective of true partnership/co-design; there is very little media interest. The Committee queried how the Forum will function under the new Health Regions. The ND OPI advised that this question has gone to Regions Steering group and he would revert to the Committee with more information when available.

It was highlighted that the Forum undertakes a large volume of work and all of its members are volunteers. This impacts existing members and also the age profile of potential new members. The Committee discussed how remuneration would potentially work for the Forum and noted the Department of Health (DoH) is currently formulating a policy on this matter.

The Committee thanked A Lawlor for her time and her advocacy work and expressed their full support for the Forum.

*A Lawlor and S McLoughlin left the meeting*

## **8. Engagement with service users on changes to services**

*M O'Kelly joined the meeting*

The ND OPI and M O'Kelly gave a verbal update to the Committee on what procedures are engaged when a transfer of service user from their residence to another becomes necessary either on a temporary or permanent basis. The ND OPI advised that there is no standard national policy in place but there is one in development which will incorporate HIQA and other external guidelines and engage with services users as part of its development. It was agreed that this draft policy would come to the Committee for feedback at its April meeting.

*M O'Kelly left the meeting*



## **9. Adult Safeguarding Review**

*Dr JP Nolan joined the meeting.*

The Committee provided feedback on the draft Adult Safeguarding Review (the Review) which had been circulated for feedback in advance of the meeting. Dr Nolan confirmed that the report has been submitted to the CEO as the commissioner, who is now considering same. In particular, the Committee discussed the governance of safeguarding in the upcoming Health Regions and the likely accounting lines. Dr Nolan advised that safeguarding will need to have a prominent position but governance and accountability will need to be aligned to a new Performance Accountability Framework which sets out the relationship between the regions and a reformed HSE center.

The Committee discussed the proposed timelines for availability of the implementation plan for the Review. Dr Nolan advised that while this was a matter for the CEO as commissioner, the implementation plan will likely need to be developed in line with a new DOH safeguarding policy currently in development which will launch a public consultation at the end of January 2024.

*ND OPI, AND Patient Engagement, JP Nolan left the meeting.*

## **10. Chief Clinical Officer**

The CCO presented his monthly report which included an update on Winter Viruses and vaccination uptake. He confirmed that with the level of both Covid and flu there will be continued pressure on the hospital system for the next few weeks. He gave an update on the children's nasal flu vaccination campaign which saw an uptake of 19% which, though an improvement from 2022, is still disappointing.

In relation to Unscheduled Care, the CCO advised of ongoing system wide escalation with some areas using Full Capacity Protocol. The Committee queried whether some of these measures could be utilised long-term and the CCO advised this is not possible as system won't respond after a certain point, and it would create an undue burden on staff. The Committee also discussed the use of transitional care beds and were advised that these beds tend to be in nursing homes as outflow to reduce risk in hospital.

The CCO updated the Committee on the National Screening Services, highlighting the impact of the ongoing FORSA Action. The Committee also discussed the issue of access to theatre and potential



impacts for breast cancer surgery patients. The CCO agreed to provide further data in relation to waiting times and access in the next report.

In relation to the CHI, the CCO confirmed the HSE and CHI oversight group continue to meet and separately the Independent Review is progressing under Mr Nayagam's leadership. The risk assessment from the Independent Review is due in Q1 2024. The CCO confirmed that the Committee's suggestion that the oversight group include the AND for Patient Engagement has been progressed. The Chair requested that a patient representative join the HSE Oversight group, which will be progressed by the CCO.

Regarding organ retention, the CCO confirmed that the stronger assurance requested by the Committee at its December meeting should be available for the February meeting.

The CCO also reported to the Committee on several other areas including:

- National Women and Infants Health Programme - Irish Maternity Indicator System
- Termination of Pregnancy Review
- Our Lady's Hospital Navan (OLHN)
- Clinical Governance for Integrated Health Areas

## 11. AOB

O Healy advised the Committee of a potential patient safety notification which had been recently received and will keep the Committee informed of developments.

The meeting ended at 15:25.

Signed: Deirdre Madden

**Deirdre Madden**  
Chairperson

**15 February 2024**

**Date**