

### **Minutes of HSE Board Meeting**

Friday 28 January 2022

A meeting of the Board of the Health Service Executive was held on Friday 28 January 2022 at 9:00am by video conference.

Present: Mr Ciarán Devane (Chairperson), Prof Deirdre Madden, Mr Aogán Ó Fearghaíl, Mr Brendan Lenihan, Mr Fergus Finlay, Dr Yvonne Traynor, Dr Sarah McLoughlin, Mr Brendan Whelan, Prof Fergus O'Kelly, Ms Anne Carrigy, Mr. Tim Hynes.

In Attendance for Board Meeting:

Paul Reid (CEO), Dr Colm Henry (CCO), Mr Stephen Mulvany (CFO), Ms Anne O'Connor (COO), Mr Dean Sullivan (CSO), Dr Geraldine Smith (ND Internal Audit), Ms Anne Marie Hoey (ND HR), Mr Fran Thompson (CIO), Mr Mark Brennock (ND Communications), Mr Damian McCallion (National Lead on implementation of COVID-19 Vaccination), Mr Dara Purcell (Corporate Secretary), Ms Niamh Drew, Ms Hannah Barnes.

Joined the meeting:

Mr Philip Crowley (ND Strategy and Research) (item 3), Mr Jim Curran (ND Capital and Estates) (item 4.1), Ms Yvonne O Neill (ND Community Operations) (item 5), Mr Jim Ryan (AND Mental Health) (item 5), Mr John Kelly (Corporate Affairs), Ms Jean Neary (CEO Office).

# 1. Governance and Administration

The Chair welcomed the Board members to the meeting and held a private session to consider the agenda and papers for the meeting.

The correspondence from the Minister to the Chairman circulated prior to the meeting was noted.

Board member Brendan Lenihan absented himself for an item relating to a lease in Ballincollig Co. Cork to be considered by the Board. He has no current conflict of interest in this matter but had been a Director of companies within the lessor group up to 2015 and wished to avoid any perception of a conflict

of interest.

# 1.4 Approval of Minutes

The minutes from the Board Meeting 17 December 2021 and the additional meeting held on the 17 January 2022 regarding contracts for the provision of additional antigen testing capacity were approved.

It was noted that the Chair had decided not to publish the November Board meeting minutes until the engagement with stakeholders on the National Maternity Hospital Legal Framework has concluded.

## 2. Committee Update

#### 2.1 Audit and Risk Committee

The V/Chair provided a high-level overview of the Committee meeting held on 20 January noting that the Committee considered a Procurement Pipeline Briefing, the Revised Corporate Risk Register and the recruitment of Risk Support Staff. Property and contract papers were also reviewed and approved for recommendation to the Board. The V/Chair advised that the Committee had approved the Internal Audit plan for 2022 following previous feedback provided by the Committee at their December Committee meeting.

#### 2.2 People & Culture

The Chair of the Committee noted that there was no Committee meeting scheduled for January but that the Committee were due to meet on 11 February and would be considering the following areas: an overview of covid related absences, medical workforce staffing, trust and confidence along with their standing agenda items.

# 2.3 Performance & Delivery

The minutes of the Committee meetings of 10 December were noted.

The Chairman of the Committee provided a verbal report on the matters considered at the Committee meeting that took place on the 21 Jan 2022. He informed the Board that the Committee reviewed updates on the Conti Post Incident Review (PIR) implementation plan, Performance Oversight reports for September and October, and received updates on the Risk Management including the Risk Appetite Statement (RAS), and the preparation of the Annual Report.

In relation to the HSE Board Conti Cyber Attack Post Incident Review, the Committee Chairman reported that the Committee provided feedback on the implementation plan to address the gap between the 2

paper presented and a level of assurance that would satisfy the Committee that the recommendations of the report are being implemented as a matter of priority. He also noted that the scale of the ICT Cyber transformation planned requires significant detailed planning and that the Committee requested that the draft job descriptions for the Chief Technology & Transformation Officer and Chief Information Security Officer be prepared and presented to the Committee.

# 2.4 Safety & Quality

The Minutes of the meeting from the 20<sup>th</sup> October as circulated were noted along with HSE Quality Profile for October. The Chair provided a verbal summary of the Safety & Quality meeting that took place on the 11<sup>th</sup> of January 2022. She informed the Board that the Committee had received the CCO's report, a briefing from the Mental Health Commission (MHC), a briefing on the HSE Interim Mental Health Action Plan, an overview of the HSE Clinical report on the Cyber Attack which was a review of the clinical impact of the Conti cyber-attack on patient safety, the mitigations staff put in place, and the key learnings from front line staff affected by the attack.

The Chair informed the Board that the MHC briefed the Committee on safety and quality recommendations such as having a WTE dedicated to Mental Health Planning. The Chair also highlighted areas of the Quality Profile Summary, noting that the Committee had requested further information in the area of staff absenteeism.

The Chair informed the Board that an update was presented on Risk 15 Screening Services and that the Committee were informed that even though there is no immediate patient safety issue that Screening Services risk is a long-term red risk and that there are many challenges in running the service with impacts on recruitment, high cost from legal issues, and continued lack of trust in screening. Currently there are three main actions being reviewed to help improve outcomes, these include uninterrupted Lab Services, engagement with the public to reduce misinformation, and the third is the implementation of the Expert Reference Group Interval Cancer Report's recommendations review and proposal of new legal framework or alternative.

# 3. Chief Executive Officers Update

The Chairman informed Board members that the NSP 2022 and associated Plans had been submitted to the Minister for approval on 23 November 2021, following adoption by the Board. A formal response was received from the Minister, advising that the Minister had approved the NSP 2022 subject to the amendments contained within the letter being made. A meeting of the Board will be arranged to consider and adopt the final version of NSP 2022 during the week beginning 7 February.

The Board discussed with the CEO and EMT the key aspects from the CEO Report which had been circulated prior to the meeting. The discussion focused on Our Lady's Hospital Navan, South Kerry CAHMS Look Back Review, the Health and Safety Authority prosecution involving Our Lady's Hospital Navan, the Board Strategic Scorecard, the Implementation and Reporting on Conti Review Report, an update on the transfer of policy and funding responsibility for the Specialist Community Based Disability Services from the DOH to DCEDIY, an Omicron Variant Update, a on the 'Brandon' Report, and Health Sector Resourcing.

The CEO informed the Board that the key test and trace indicators over the last week are showing a rapid downward trend in demand and positivity relative to the previous week and that community referrals have decreased by 55% compared to the previous week. The CEO noted that despite the rapid increase in positive cases in the country, the number of patients in hospital and in ICU has remained stable.

The Board were informed that in light of the current trends the Test and Trace Programme have commenced a review of the National Test and Trace strategy, previously developed by the HSE. The Board emphasised that given the scale of the programme with over 3,000 staff, multiple partners and a nationwide infrastructure that is in place until June 2022 at a minimum, it is important that any major changes in testing strategy are fully cognisant of any possible future requirement to flex upward.

The Board discussed with the CCO the paper on COVID-19 Omicron variant which assessed the current understanding of the variant and the impact of Omicron on the pandemic. The Board considered the potential and challenges for a reduction in testing to lead to a possible increased spread of infection, resulting in increased illness and death despite a variant with lower death rates, as well as the potential impact as a result of waning immunity and immune evasion. It was requested that that future updates on the impact of Covid might consider the issue of Long Covid and the impact on the health of HSE staff and the limitations of antiviral therapeutics for certain populations who are at risk such as pregnant people. In response to questions from Board members on the overall level of risk to public health associated with the continuing spread of the Omicron and the available evidence from the current situation, the CCO informed the Board that the current risk profile for Ireland, based on this variant's epidemiological course, is lower compared to previous waves but there is little reason to expect that the virus can be eradicated in the medium term.

The CEO informed the Board that cyber security resilience, multi annual funding for waiting lists, enhancement in primary care services through the Enhanced Community Care (ECC) programme and

development of community health networks, improvements in mental health services, and the further building of trust and confidence in the health service are key areas of focus for the Executive.

The CEO reported on the engagement with St Vincent's University Hospital (SVUH) and the National Maternity Hospital (NMH) on the concerns raised previously by the Board in regard to the legal and governance framework for the new hospital to be located at SUVH. He confirmed that the Board's concerns regarding the current legal and governance framework had been outlined at a meeting on 21 January, which he had attended with the Secretary General, the Chair and CEO of both hospitals, and the Chief Strategy Officer. He reported that all parties expressed a desire to work cooperatively with a view to getting to a stage where any impediments to progressing with this crucial infrastructure are resolved.

The Board discussed with the CEO the extent of the patient safety and clinical governance concerns that continue for as long as OLHN continues to operate as a Model 3 Hospital, in circumstances where its staffing and its infrastructure and its resourcing generally is more consistent with that of a Model 2 Hospital. The HSE's plans to move OLHN to a model 2 level hospital are clinically led and are fully aligned to Government policy as outlined in the Framework 2013 Government policy document of 2013 Securing the Future of Smaller Hospitals – A Framework for Change. The Board was informed that engagement with Oireachtas members needs to be scheduled as a matter of priority and the Chair will confirm this with the Minister. The Board requested a full briefing paper on the matter.

The Board discussed with the CEO the ongoing work around the recommendation within the Brandon Report. The CEO informed the Board of the Attorney General's advice in relation to not publishing the full report and thanked the Safety and Quality Committee for their work on the matter. The Board discussed the progress of a confidential informal scoping exercise which aims to determine key learnings to improve service and patient safety. The ND HR informed the Board that the process remains ongoing and noting the importance of ensuring proper and fair due process and fair procedures are adhered to at all stages. The Board agreed that discussion on this matter highlights the need to review the Serious Incident Management Team process and the importance of communication of regulatory issues with the relevant professional bodies. The Board noted that the CCO is working on a revised process for informing regulatory bodies at an earlier stage.

The CEO informed the Board that following concerns raised about the clinical practice of a Non-Consultant Hospital Doctor in prescribing, care planning and diagnostics in CAMHS Area A by a NonConsultant Hospital Doctor (NCHD2) and again by a Locum Consultant, Child and Adolescent Psychiatrist (CP1) in September 2020.

The Chief Officer of Cork Kerry CHO formally commissioned the Look-Back Review (LBR) in April 2021 and received in January 2022. The report was reviewed nationally by the National Director Community Operations, Chief Operations Officer, National Clinical Director Quality & Patient Safety, Head of Quality & Patient Safety and the National Clinical Advisor and Group Lead Mental Health, with any issues clarified. The Board discussed the concerns surrounding the environment which exists to allow such events to happen.

The CEO informed the Board on the ongoing legal matters arising out of an incident which took place in the former Department of Psychiatry, Navan prior to its closure. He noted that having considered the issues arising a decision has been taken to concentrate our efforts on improving the situation rather than seeking to enter a defence.

The Board discussed the role and objectives of the new Sláintecare Programme Board, noting that the Programme Board is to ensure clear oversight and alignment between the DoH and the HSE and that all programme matters are dealt with in a coordinated and timely manner between all relevant stakeholders.

The Board requested that a paper on the overall Sláintecare governance and reporting arrangements and the HSE Board's role in same be provided for the next Board meeting.

The issue of the need to strengthening the HSE accountability process was discussed by the Board. The CEO referred to the work on the paper Strengthening Accountability in the HSE which was presented to the Board in November 2019 and update on in December 2020. It was agreed that a further update would be brought to the Boards February meeting.

The CEO informed the Board that Anne Marie Hoey has been officially appointed to the position of ND HR on a permanent basis following the PAS recruitment campaign. The Board welcomed this appointment.

The Board discussed with the CEO and ND HR the paper on the HSE's Workforce resourcing which had been circulated in advance of the meeting. The ND HR informed the Board of the key actions underpinning the resourcing strategy for 2022 and outlined the key learning from 2020/2021 that have influenced the approach to these actions in 2022. The Board noted that health service employment

levels, show an increase of +12,506 WTE up to and including December 2021 and welcomed this level of unprecedent recruitment, particularly in the context of the HSE's average turnover levels during this period that requires in the order of 9,500 staff to be recruited each year in order to stand still, before any net growth is realised. The ND HR updated the Board on current recruitment initiatives being progressed in 2022 as part of the overall Resourcing strategy and the challenges in the context of the global shortage of the health care professionals.

The Board reviewed the scorecard which reports on the full year 2021 performance including November and December 2021, which was circulated in advance of the Board meeting and agreed its submission to the Minister in accordance with the reporting requirements set out in the Letter of Determination of 3 November 2020. The Board noted that the summary of the ratings across the December Board Strategic Scorecard reflected an increased rating to 3.05 from 2.95.

# 4. Reserved Functions of the Board

ND capital and Estates and the Chief Architectural Advisor joined the meeting at 12:35.

# 4.1 Property Transactions & 4.2 Contract Award

The Board considered and approved the following for reasons outlined in the briefing papers.

- 50-Year Lease by the HSE of Beaumont Convalescent Home (which comprises of Beaumont House, St. Anne's and Rockfield) and Beaumont Convent (Decision no. **280122/03**).
- Lease of additional floor and re-negotiation of existing Leases to enter into a new 15 Year Lease
  at Primary Care Reimbursement Service (PCRS), J5 Plaza, North Park Business Park, Finglas,
  Dublin 11 (Decision no. 280122/04).
- Acquisition by way of lease of an office suite at 52 Broomhill road, Tallaght Dublin 24 to provide fit for purpose Business Support/Administrative space (Decision no. 280122/05).
- Acquisition by way of lease of office accommodation at Hawthorn House, Millennium Park, Naas,
   Co. Kildare to provide fit for purpose Business Support/Administrative space in CHO7 serving
   Dublin South, Kildare and West Wicklow (Decision no. 280122/06).
- Proposed lease of additional space at the intended new Primary Care Centre, Tyone, Nenagh,
   Co. Tipperary (Decision no. 280122/07).
- Acquisition by way of lease of a two-floor office suite at The Iveagh Building, Carrickmines, Dublin
  18 to provide fit for purpose Business Support / Administrative space in Community Healthcare
  East (CH East) (Decision no. 280122/08).
- Proposed Lease of Primary Care Centre ('Galway City West') at Seamus Quirke Road, Galway (Decision no. 280122/09).

- Proposed Lease of Primary Care Centre at Swords PCC, Airside Business Park, Swords, Co
   Dublin (Decision no. 280122/10).
- Proposed Lease for additional space at Primary Care Centre Kevin Barry St., Ballina, Co. Mayo (Decision no. 280122/11).
- Proposed Lease of additional accommodation space adjacent to the new Primary Care Centre Kilkenny City East, New Park, Kilkenny City, Co. Kilkenny (Decision no. 280122/12).
- Proposed Lease of additional accommodation space at 1 Westfield, Ballincollig, Cork as part of the delivery of Primary Care Services in Cork City (Decision no. 280122/13).
- Acquisition of lands for the development of a Primary Care Centre at Finglas, Dublin 11 (Decision no. 280122/14).
- Contract Award 50 Bed Ward Block Development at Portiuncula University Hospital, Ballinasloe,
   Co. Galway (Decision no. 280122/15).

# 4.3 Recording of written procedure decisions

The Board noted that the contract for Covid 19 Therapeutics had been approved via written procedure on 10 January 2022 (Decision no. **100122/01**) and the contract for the Self-Isolation Facility at The Address at Citywest was approved on 22 December 2021(Decision no. **221221/57**).

# 5 Board Strategic Priorities for 2022

# 5.1 Corporate Plan 2021-2024: Strategic Objective 4: Priorities early interventions and improve access to person-centred Mental Health Services.

The Board discussed with the ND Community Operations and AND Mental Health the progress being made to deliver on the Corporate Plan Strategic Objective to prioritise early interventions and improve access to person-centred Mental Health Services.

The discussion focused on the on the development of supports and services across levels 1 to 4 of our planning model aimed at supporting the population-planning approach to mental health policy guiding the implementation of 'Sharing the Vision – A Mental Health Policy for Everyone'. The Board reviewed the activity data related to mental health promotion, early intervention and improved access to personcentred mental health services which had been circulated in the briefing paper prior to the meeting.

The AND Mental Health presented the development of supports and services of the Community Operation's Mental Health planning model aimed at supporting the general population.

The Board were informed that through significant investment, there has also been increased development and improvements across specialist mental health services and in line with service users' feedback. Over the last two years there has been an increased focus on prevention and early intervention in order to provide more timely support across the population and reduce the requirement in as far as possible for specialist, secondary services.

The Board discussed the challenges in providing a range of services for users which are delivered directly by the HSE and a range of other organisations including community and voluntary sector partners, particularly the benefits and challenges with the outsourcing of services to community partners in the voluntary sector compared with widespread public model of care. The discussion also considered the dependency of many voluntary organisations on charitable donations. The potential for differing goals or values of voluntary organisations to lead to conflicts in providing services was also discussed and whether this is an appropriate model of service for the delivery of mental health services.

The AND Mental Health Services informed the Board that further development of community-based and Primary Care Mental Health Supports is a priority under 'Sharing the Vision' as reflected in the imminent establishment of a 'Primary Care Mental Health Specialist Group' by the National Implementation Monitoring Committee overseeing the implementation of the policy, and that current resources and supports in this area are delivered by both the HSE and a range of other organisations, including those in the Voluntary space.

In response to questions on funding the AND Mental Health advised that nearly 77% of the overall Mental Health annual expenditure is relating to pay and noted that services are provided by a highly skilled workforce although, the availability of skilled staff is a significant issue in Mental Health services, where demand outstrips supply in both the national and international contexts and the workforce are availing of employment opportunities outside of Ireland.

In response to questions on the effects of Covid 19 on Mental Health services, the ND Community operations confirmed that in order to adapt and improve accessibility of the services, the HSE and many of its funded NGO partners have successfully fast-tracked new digital health options including innovative online, text and phone supports. It was noted that many of these have been in development for some time, as part of a range of digital mental health service developments planned since 2018. However, it was also noted that the overall effects of the pandemic may be seen in the longer term noting that young people were disproportionately affected. The Board were informed that 90% of services were

maintained throughout the pandemic.

The Board welcomed the progress to date in the area of mental health services and asked to be provided

with regular updates on mental health service development and improvements which continue to be

reflected in annual national service planning. For the next update on this strategic matter, the Board

requested it would include expenditure/investment being made in mental health, including expenditure

with regards financing Section 39 / charitable and voluntary sectors partners listed in the papers and

would contain an estimate of expenditure at each of the 5 levels around which the January Board paper

was based. In response, the ND Community operations agreed to provide the Board with details on the

Annual Report on delivering Mental Health specialist services report.

6 AOB

The Chair thanked Management Team members for their time.

Cinion Devane.

No further matters were discussed.

The meeting concluded at 15:50.

Signed:

Ciarán Devane

Chairperson

Date: 25/02/2022

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