Feidhmeannacht na Seirbhíse Sláinte Health Service Executive

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

Friday 17 December 2021

A meeting of the Board of the Health Service Executive was held on Friday 17 December 2021 at 9:00am by video conference.

Present: Ciarán Devane (Chairperson), Aogán Ó Fearghaíl, Brendan Lenihan, Fergus Finlay, Yvonne Traynor, Sarah McLoughlin, Brendan Whelan, Fergus O'Kelly, Tim Hynes.

Apologies: Deirdre Madden, Anne Carrigy.

In Attendance for Board Meeting:

Paul Reid (CEO), Colm Henry (CCO)), Stephen Mulvany (CFO), Anne O'Connor (COO), Dean Sullivan (CSO), Geraldine Smith (ND Internal Audit), Anne Marie Hoey (ND HR), Fran Thompson (CIO), Mark Brennock (ND Communications), Philip Crowley (ND Strategy and research), Damian McCallion (National Lead on implementation of COVID-19 Vaccination), Patrick Lynch (ND Governance and Risk), Dara Purcell (Secretary), Niamh Drew, Hannah Barnes Secretariat

Joined the meeting

Jim Curran (ND capital and Estates) (item 4), Paul de Freine (Chief Architectural Advisor) (item 4), Enda Saul (Communications, Programme Manager) (item 5), Fidelma Browne (Programmes and Campaigns) (item 5), John Kelly (Corporate Affairs).

## 1. Governance and Administration

The Chairperson welcomed members to the meeting and the agenda was agreed.

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

No conflicts of interest were declared.

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The Chairman updated Board members on the ongoing Committee review process, which will also need to take an account that an additional Committee has been recommended in the HSE Independent Report on the Conti cyber-attack.

The Chairman informed the board that the following strategic objectives would be covered in Q1;

- Prioritise early interventions and improve access to person-centred mental health services
- Patient and service user quality and safety
- Prioritise prevention and early intervention services focusing especially on children's health,
   obesity and alcohol harm

The Chairman briefed Board members on meetings with the Minister including their formal quarterly meeting held on held on 13 December. He informed the Board that the Minister conveyed to him the Government's appreciation for the extraordinary response from staff across the Health service during the Covid pandemic noting that staff have met the challenges of the pandemic and delivered services under extreme pressure. On behalf of the Government, the Minister expressed his appreciation for the hard work and dedication of all healthcare workers throughout the health service. The Minister will be writing formally to convey this satisfaction and appreciation for this hard work and dedication and the letter will be shared with staff.

# 1.4 Approval of Minutes

The minutes from the Board Meetings 19, 23, and 26 of November were approved.

### 2. Committee Update

#### 2.1 Audit and Risk Committee

The minutes of the Audit and Risk Committee meetings held on the 12<sup>th</sup> and 17<sup>th</sup> November 2021 as circulated were noted.

The V/Chair provided a high-level overview of the Committee meeting held on the 13<sup>th</sup> of December noting that the Committee was joined by John Crean of the C&AG to discuss the C&AG Audit Memorandum. The Committee also considered an update on the Controls Improvement programme, the YTD Expenditure, a Risk Management update, a paper on Enhanced Community Care Developments, and an Internal Audit update including the approval of the Internal Audit Plan for 2022. The V/Chair noted that as part of the Committee's deliberations it was highlighted that going forward the Committee has asked for earlier visibility for larger property transactions including highlighting problem areas, and

directions of travel a problem statement and a paper for the Committee's evaluation in advance of its proposed final consideration. It was pointed out that a property strategy is also expected to be brought to the Committee in the New Year. The V/Chair advised that the next Committee meeting was scheduled for 10<sup>th</sup> February 2022.

## 2.2 People & Culture

Minutes of Committee meeting of 8<sup>th</sup> October 2021 were circulated in the Board pack and noted. The Committee held a discussion on the proposed draft work plan and requested that the area of Culture and a benchmarking exercise on workforce against international norms be added.

The Committee Chair provided the Board with a briefing covering the key points of the People and Culture meeting that was held on the 3<sup>rd</sup> December 2021. The Chair stated that the Committee had reviewed the HR dashboard with the ND HR and had noted the levels of absenteeism and recruitment in the organisation. The ND HR had advised the Committee that mitigation actions are underway and that the vaccine and booster rollout should also mitigate for levels of absenteeism.

The Chair also informed the Board that the Committee were provided with an update from National HR on various topics which included Consultant Contract discussions, Resourcing Strategy & People Strategy, October 2021 Staffing levels and an update on the NiSRP system rollout. The Chair advised the Board that the Committee had discussed the Staff Survey 2021 Results, having been presented with an analysis of the results by staff category. In response to questions from Board members the ND HR advised that further analysis will be carried out on the results which currently sit at organisational level but, in the following weeks this information will be broken down to Hospital group (HG) and CHO level and shared with the relevant stakeholders. Each Service will be then asked to develop actions plans in response to their results, noting that some results will require national action plans which will then be followed up upon during 2022 to ensure implementation.

The Committee were given an update on the Corporate Risk Register Q3 update and the newly approved Risk Appetite Statement, which is to be discussed further at a 2022 Committee meeting.

The Board were informed that a Communications update was provided, where the Committee were informed of a new collaborative recruitment strategy with National HR, to use LinkedIn for the recruitment of potential staff from outside of Ireland. A dedicated link person will be used between the departments to support recruitment campaigns. A Trust & Confidence update was given, and the Committee were advised that a presentation on this item will be made to the Board, and after that to the Committee in 2022.

The Committee Chair informed the Board that presentations were made by Heads of HR from CHO groups and Ireland East Hospital Group on how they have operated through the Covid-19 pandemic and the local initiatives that were introduced during this time.

## 2.3 Performance & Delivery

The minutes of the Committee meetings of 17th September, 22 October, 9 November, and 16 November were noted.

Tim Hynes Chair of the Committee provided a verbal report on the matters considered at the Committee meeting that took place on the 10 December 2021. The Committee Chair noted that that that work was ongoing between the COO and the Committee to examine how performance data might be provided to the Committee in a format which can be clearly understood and highlights key issues for the Committee's attention.

The Chairman informed the Board that the Committee reviewed updates on the IFMS programme, Performance Oversight, Risk Management, and the Transfer of Disability Services to the Department of Children, Equality, Disability, Integration and Youth (DCEDIY).

The Committee Chairman reported that the current overall status of the IFMS project is being reported as off-track as a result of the suspension of the SI contract however, steps to mitigate the impact of this delay, including progressing in parallel the procurement process for a new SI, are continuing. This work is focused on pre-deployment preparation activities and progress with strategically aligned projects which will support the delivery of IFMS. The Committee will receive a further update on the IFMS procurement process for a new SI at the February Committee meeting.

The Performance Profiles, and Operational Services Reports for September and October were reviewed by the Committee. The Chairman noted that levels of performance in the Community and Acute sectors were highlighted and that phase 2 of the OSR Project has been extended and work is ongoing to finalise the dashboard.

In relation to the transfer of disability services to DCEDIY item is to be discussed further at agenda item 3.6 Transfer of Disability Functions from Dept. of Health (DOH) to Dept. of Children, Equality, Disability, Integration and Youth (DCEDIY).

The Committee had reviewed with the ND Governance and Risk all risks on the Corporate Risk Register

which have been assigned to the Committee for oversight including a newly added risk, Governance of Private Nursing Homes (Risk 28).

## 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. A briefing on the 14<sup>th</sup> December Committee meeting will be provided at next months Board meeting.

## 3. Chief Executive Officers Update

The Board discussed with the CEO key aspects from the CEO End of Year Report which had been circulated prior to the meeting. The CEO highlighted several challenges and achievements over the last twelve months including, the resilience of staff in dealing with two significant waves of Covid-19, delivery of the NSP, the Test and Trace programme delivery, delivery within budget, a net recruitment of over 11,500 staff, and progress on the Multi Annual Waiting List Plan. The Board discussion focused on challenges as a result of Covid-19 pandemic response, the Vaccination and Test and Trace programme, the revised format of the Board Strategic Scorecard, the finance update, ICT reform, and the Transfer of Disability Functions to the new Department.

The Board held a discussion on planning assumptions regarding the impact of Omicron in the short term on services and long term in respect of Testing and Tracing and the Vaccination programme. The CEO noted that the HSE does have a modelling team which produces information on the impact of Covid-19 which is reviewed the on a weekly basis and this is shared with NPHET. The CEO advised that the evolving epidemiological situation in South Africa would suggest that the virus is readily transmissible and might have an initial growth rate that is greater than that of previous variants, Alpha and Delta. This would have a significant impact on case levels within Ireland. The Board considered the paper circulated in advance of the meeting which set out the HSE's preparedness plans to respond to an omicron surge including the revised Vaccination Booster Plan and the enhanced capacity on Testing & Tracing in response to Omicron. Given the emergence of recent data on Omicron the CEO advised that the updated Vaccine Booster Programme builds on existing capacity measures and confirmed there has been a change in approach, from the original model in the primary vaccination programme where the HSE worked through groups sequentially using predominantly an appointment-based system and dedicating particularly cohorts to Vaccination Centres or GPs. To increase uptake of the Booster vaccine a mix of appointments and walk in clinics in Vaccination Centres is being used. It has also meant allowing VC's, GP's and Pharmacy to vaccinate the same patient cohorts at the same time, where cohorts were previously directed via specific channels. The Board welcomed the work done with the IMO to support GPs playing a significant role to date in delivering the Booster Programme and noted work is ongoing to increase the number of pharmacies participating in the booster vaccination programme from 550 who are actively providing boosters, to 700 this week. The aim is to increase this closer to 1000 pharmacies in the new year. The contribution made by medical students to the testing and tracing and vaccination programmes was also welcomed.

The Board discussed the challenges the new variant will bring to the test and trace programme and the implications this will have for the spread of the virus. The CEO confirmed that the test and trace programme is under severe pressure and in November the testing pathways were operating at close to maximum surge capacity. Additional capacity has been put in place in recent weeks through utilisation of the Defence Forces, new community swabbing recruitment campaigns and engagement with private healthcare providers. The Board were informed that further plans to grow capacity to 245,000 PCR tests per week by the end of this year are in place.

In response to questions on the transmission of Covid within school communities the CCO informed the Board that the virus appears to have a higher risk of transmission in home and community settings rather than in school settings. It was noted that the provision of antigen tests for asymptomatic children and staff in Primary schools, who are identified as members of a pod with a confirmed Covid-19 case, commenced on Monday 29th November. Over 28,486 antigen test kits have been dispatched to date. A similar pathway for the early childhood learning and care sector is under development and is expected to be implemented next week. Board members emphasised the need to have strong public communications of the changes to the testing and tracing rules and vaccine appointments for 5-11 year olds that are vulnerable or who live with vulnerable people.

In relation to the cyber-attack in the Coombe on 16 Dec the CEO noted that while a number of their services (Servers and Devices) were encrypted overnight, legacy servers were not impacted.

The CEO confirmed that the HSE Independent Report on the Conti cyber-attack was published on 10 December and that work is ongoing to implement the strategic recommendations outlined in the report and he will keep the Board informed.

In response to questions from Board members on the new IPHA Framework Agreement and the savings involved with this programme, the CEO confirmed that it is a consultant led incentives programme which

does bring in cost savings. The CFO noted that a similar scheme is being devised for the private sector to encourage savings for PCRS.

The Board considered progress of a confidential informal scoping exercise underway to advise the ND HR, whether any disciplinary investigation/ proceedings might reasonably be taken in respect of any HSE employee, arising from the Brandon Report. The Board emphasised it is important that the scoping exercise is completed as soon as possible. The CEO and NDHR acknowledged the requirement to complete this exercise as speedily as possible noting the necessity to ensure proper and fair procedures are adhered to at all stages. A further update on the scoping exercise will be provided at the January 2022 meeting.

The Board thanked the CEO and EMT for the information included in the final CEO Report of the year and acknowledged the many challenges that the organisation may face in the following year.

#### 3.2 Finance Update

The CFO spoke to the Summary Finance Report for YTD October 2021 as circulated prior to the Board meeting. The Board were informed that the current expenditure (revenue) financial position at the end of October 2021 shows a YTD deficit of €109.8m or 0.7%, with a significant element of this being driven by the direct impacts of COVID-19, with €430.4m adverse variance on COVID-19 related costs being offset by a positive variance on core costs. The CFO informed the Board that based on current assessments the outturn position for Revenue I&E is expected to be a substantial breakeven, or a small surplus based on ongoing discussions with the Department on contingency of €205m for the Testing & Tracing Programme. He also noted that a small surplus is expected on construction capital programme which is as a result of timings savings on capital projects. The ICT capital is expected to broadly present a balanced position with additional capital costs relating to cyber broadly offset by consequent delays to other initiatives and savings resulting from same. Engagement is ongoing with the Government departments in relation to cash management and reporting.

## 3.5 Board Strategic Score Card (Revised format for 2022)

The CEO and CSO advised Board members as a result of the earlier scheduling of this month's Board meeting there was insufficient time to compile in full the monthly Scorecard for consideration by the Board. It is planned therefore that the December 2021 Scorecard, which will report on full-year performance to December 2021, will be presented to the Board at its January 2022 meeting. The Chair will write to the Minister to inform him of this position.

The CSO informed the Board that to date the scorecards have reported continued progress across the majority of programmes and priorities, although performance in a number of areas has been significantly impacted by the COVID-19 pandemic and the Cyber Attack. Financial expenditure is continuing to be tracked carefully, both in general and in relation to the specific reforms and capacity-building initiatives being progressed in 2021, continuing to revisit the Scorecard in preparation for 2022, to address in particular the requirements of the Letter of Determination.

The Board welcomed the commencement of the process for designing the 2022 Board Strategic Scorecard Report and the individual Scorecards. The Board discussed the individual Scorecards for inclusion in the 2022 Report with the associated draft Ambition Statements and the initial thinking on key deliverables and KPIs. The Board noted that the draft Scorecard Report will continue to be developed in the coming weeks by the EMT and that engagement will also take place with the Department.

Board members discussed with EMT members the KPIs under a number of headings from the scorecard such as Reform of Mental Health, New Drugs, People & Recruitment, and Reform of Disability Services and made suggestions to the measurement criteria. The CSO said that the views of the Board would be considered as part of the process of designing the 2022 Board Strategic Scorecard Report and the individual Scorecards. In response to further questions on the Reform of Disability Services scorecard, the COO advised that funding for the disability assessment officers will remain in HSE disability funding and that one of the key output/deliverable in the scorecard in 2022 is the commitment to reduce the waiting list for Assessment of Need (AON) and compliance with 3 month waiting time.

## 3.6 Briefing note on Transfer of Policy and Funding Responsibilities, Disabilities to DCEDIY

The Board welcomed the progress report provided on the Transfer of Disability Functions from DoH to DCEDIY and welcomed the significant benefits for people with disabilities that can be achieved, through the alignment of Disability and Equality policy and reform noting that transfer is expected to take place at the end of March/beginning of April 2022. The Board were informed that the two Departments have been engaging to plan for the transfer of functions since the Government decision. They have established a Transfer team in each department, and these have been working to agree the scope, the overall legislative approach and the content of an MOU. The Board were advised that the process to develop the MOU is underway. There are a number of complex areas to be considered, notwithstanding the intention to make this process as administratively easy as possible. It will be important that the key stakeholders involved in this work are practical and focussed, having agreement on the primary objectives for March 2022.

# 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**

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

Lease of Enhanced Community Care Hub at Quarrypark, Enniscorthy, Co. Wexford (Decision no.

#### 171221/53)

Proposals for Rotunda Hospital (Decision no. 171221/54)

Lease of HSE lands at Connolly Hospital to the Royal College of Surgeons Ireland (RCSI) (**Decision no.** 

171221/55)

#### **4.2 Contract Transactions**

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

St. Vincent's Community Nursing Unit, Ballycullenbeg, Mountmellick, Co. Laois and Appendix (**Decision no. 171221/56**)

# 5 Board Strategic Priorities for 2021

## 5.1 Trust and Confidence Programme

The Board discussed the development of a plan for building trust and confidence in the organisation, a key Board objective being led by the ND Comms. The ND Comms provided an overview of the Trust & Confidence programme; the drivers of trust within the HSE which are public good, respect, integrity, and competence, a number of public survey findings, and the implications of research for the next steps.

A range of initial actions will be taken in 2022 to build trust and confidence across HSE national services, as well as ongoing listening and both qualitative and quantitative research to further inform the strategy, focusing on people working in healthcare services and our partners and stakeholders.

The Board welcomed the progress to date and reinforced the aim that this programme will provide the HSE and the Board with regular updates on measured trends in trust and confidence in the HSE and noted that a longer-term action plan is due to completed mid 2022.

# 6 AOB

The Chair thanked Management team members for their time.

No further matters were discussed.

The meeting concluded at 14:45.

Signed: Cinich Devane.

Ciarán Devane

Chairperson

Date: 28/01/2022