



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

Minutes of HSE Board Meeting

Friday 19th November 2021

A meeting of the Board of the Health Service Executive was held on Friday 19th November 2021 at 9:30am by video conference.

Present: Ciarán Devane (Chairperson), Aogán Ó Feargháil, Brendan Lenihan, Fergus Finlay, Yvonne Traynor, Brendan Whelan, Fergus O’Kelly, Tim Hynes.

Apologies: Deirdre Madden (Deputy Chairperson), Anne Carrigy, Sarah McLoughlin

In Attendance for Board Meeting:

Paul Reid (CEO), Anne O’Connor (COO), Dean Sullivan (CSO), Colm Henry (CCO), Mark Brennock (ND Communications), Stephen Mulvaney (CFO), Fran Thompson (CIO), Geraldine Smith (ND Internal Audit), Anne Marie Hoey (ND HR), Philip Crowley (ND Strategy and research), Damian McCallion (National Lead on implementation of COVID-19 Vaccination), Colm Maddox (ACFO - Planning & Performance), Jim Curran (ND capital and Estates), Marie Carroll (Planning Specialist), John Kelly (Corporate Affairs), Yvonne Goff (ND Change & Innovation), Dara Purcell (Secretary), Hannah Barnes.

1. Governance and Administration

The Chairperson welcomed members to the meeting and noted that the meeting had been convened to consider the working draft National Service Plan 2022 (NSP), ICT and Capital Plan, and the Workforce Resourcing Strategy in advance of their adoption in accordance with the legislative requirements later in the month.

No conflicts of interest were declared.

2. National Service plan

Board members reviewed with the CEO and Management Team Members the following documentation

which had been circulated in advance of the meeting:

- NSP2022
- Capital Plan
- ICT Capital Plan
- Workforce Resourcing Strategy

The CEO and CSO provided an overview of the preparation of the NSP which is a legislative requirement, setting out the type and volume of health and social care services to be provided by the HSE in a given year, in response to the funding made available and the level of staff to be deployed. It was noted that the Annual Statement of Priorities was included in the Letter of Determination (LoD) which was received on Tuesday, 2nd November 2021. The HSE is required to submit the NSP 2022 to the Minister for Health within 21 days of receipt of the LoD, which is Tuesday, 23rd November 2021. Board members noted that the draft Capital Plan, an ICT Capital Plan, and Workforce Resourcing Strategy will be submitted alongside the NSP 2022 to the Minister on 23 November 2021, subject to Board approval.

The Board noted that the NSP has been prepared within the strategic context of Sláintecare, the HSE Corporate Plan 2021 – 2024, the Annual Statement of Priorities and the Winter Preparedness Plan October 2021 – March 2022. The NSP 2022 maintains a focus on the delivery and improvement of healthcare services while continuing to manage within a Covid-19 environment. The Board noted that the Performance and Delivery Committee had considered drafts of the NSP 2022 at meetings on the 9th and 16th of November and that Committee feedback had been incorporated into the draft presented at today's meeting. The Board considered the several challenges and risks identified within the NSP, associated with operational delivery, financial planning and financial management in 2022, particularly in the context of significant uncertainty around the course of the pandemic over the course of the coming year and specific risks relating to retention of staff, staff resilience, staff recruitment and service developments.

The Board considered the draft Capital Plan (Building and Equipment) and details on how the allocation of €1.025bn of capital funding is apportioned between projects and programmes, including existing contractual commitments of €707m and other proposed expenditure of €328m. The draft Capital Plan has been prepared in the context of an identified funding requirement of €1.478bn which was submitted as part of the NDP review. The Board noted that the draft of the HSE Capital Plan 2022 had been considered by the Audit and Risk Committee at their meeting on the 17th November. The Committee agreed to recommend the draft Capital Plan to the Board for adoption as part of the National Service Plan but requested that for the Board's briefing additional information is provided regarding overall

prioritisation of projects. The Board noted that every effort has been made to minimise the impact across priority programmes of the reduced level of funding from that sought as part of the NDP review. The Board welcomed the significant allocation of funding to deal with infrastructural risk, climate action & sustainability, and noted replacement of equipment and ambulances had also been included. This investment will provide increased capacity in the health system and will support and aid the delivery of Sláintecare.

The Board noted the draft ICT Capital Plan had been considered by the Performance and Delivery Committee at the meeting of the 16th November and the Committee feedback has been incorporated into the Plan. The CIO confirmed that feedback had been received from the Department on 16th November and has now also been incorporated into the Plan. The Board noted ICT projects will be managed to reach the reduced level of funding allocated and were informed all projects are split into three categories, Foundational Infrastructure & Cyber Technology, Existing National Programs and HSE Transformation Priorities. The Board discussed how cyber security is being addressed in the ICT Capital Plan and noted that investment in several areas is required over a number of years. The Board welcomed that the draft ICT Capital Plan will deliver a range of projects across the eHealth domain, nationally and regionally. A significant allocation of funding is being allocated to deliver on the foundational, infrastructural, and Cyber requirements to deal with legacy challenges and improve the HSE's cyber profile.

The ND HR briefed the Board on the resourcing strategy which provides for an update to the 2021 resourcing strategy and sets out the suite of enhanced developments designed to further strengthen the HSE's recruitment delivery. The Board noted that the 2021 Resourcing Strategy set's out a clear set of principles that underpinned the strategy and that these principles will remain relevant in 2022. Board members discussed with the ND HR the significance of the resourcing challenge going into 2022. The Board welcomed the multi-layered approach as highlighted by the ND HR, which will be used to deliver enhanced capacity and capability as required in 2022, with additional enhancements, based on key learnings from 2021.

The COO briefed the Board on the details within the NSP 2022 on the key areas of reform in line with Sláintecare priorities. It was noted that there is a focus within the NSP 2022 on making progress in these areas which include addressing waiting lists and waiting times in acute and community services, driving improvements in Mental Health and Disabilities services and delivery of national strategies. The Board noted that priorities as set out by the Minister in the LoD have been incorporated within the NSP 2022.

It was agreed that the feedback provided by the Board will be incorporated within the next draft. The Board were informed that the text will be continuously updated following interactions internally and to incorporate feedback from the DoH. Work is ongoing to close out the Appendices of NSP 2022. Additionally, a detailed process is underway between strategy, operations and clinical colleagues working closely with the BIU and Finance, to finalise target levels of performance and activity for 2022.

The CFO provided a briefing on the Financial Management Framework 2022 included within NSP 2022. The CFO noted that set out in the LoD, the 2022 core revenue budget level is €1,007m / 5.3% above this year's starting budget of €18,947m, which was set out in NSP2021. This funding is in addition to the €697m which is provided on a once-off basis for 2022 COVID-19 related costs, including public health measures, and a further €30.7m in technical adjustments. Due to the ongoing pandemic there remains uncertainty and complexity to the planning and delivery of services in 2022, as a result the CFO outlined that it is not practical to provide the usual level of assurance around the overall affordability of likely 2022 activity albeit every practical effort will be made to manage and mitigate the various financial issues and risks.

It was agreed that the next iteration of the draft NSP and accompanying documents would be circulated to the Board on Sunday 21st November ahead of its next meeting on the 23rd November.

3. AOB

The Board received an update on the current impact of COVID-19, the development of the new National Maternity Hospital on the campus of St Vincent's Hospital at Elm Park, and the PwC Post Incident Cyber Review Report.

The CEO informed the Board that the entire health system, both hospitals and community healthcare, are now under very serious pressure due to COVID-19. He informed the Board that he had attended the Cabinet Committee on Monday and had conveyed the seriousness of the situation. He noted that the numbers of people requiring hospitalisation due to COVID-19 infections continues to increase and the modelling suggests that this will not abate, in the short term. The Board were told that a corresponding increase in ICU Cases from 86 to 119 has also been seen. Clinicians in ICU have advised that the system is already facing increasing difficulties in meeting the needs of patients who require specialist high-dependency care. The CEO informed the Board that he had written to the Hospital Group CEOs and Chief Officers requesting them to take further steps to protect and to make the best possible use of the remaining hospital and in particular ICU capacity. He informed the Board that a series of actions have

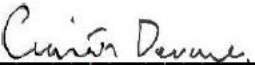
been agreed with CHOs and Hospital Groups including a 14-day period of prioritisation of unscheduled COVID care and urgent time-sensitive work. CEO said that the Booster programme was a positive development which will over time strengthen immunity status at a population level and that they will be continue to highlight the important factors that will help to reduce the transmission of COVID-19 remain, social distancing, vaccination, good cough and respiratory etiquette, meticulous hand hygiene, wearing a face mask/covering and ensuring adequate ventilation.

The CSO provided an update on the development of the new National Maternity Hospital on the campus of St Vincent's Hospital at Elm Park. He informed the Board that progress had been made following engagement with the Audit and Risk Committee regarding the development of the Legal Framework documents and the draft DAC Constitution. The V/Chair of the Audit and Risk Committee advised that a note detailing the Committee's advices on the matters will be circulated to Board members ahead of monthly Board meeting.

The Chairman updated Board members on the PwC Post Incident Cyber Review Report noting that the Board Cyber Oversight Group had considered the final draft of the Post Incident Cyber Review Report and welcomed the recommendations provided within it. The Chair and Chair of Performance and Delivery Committee informed the Board that the report makes a detailed series of findings and recommendations, strategic and tactical actions needed, and it contains many learnings for the HSE and potentially other organisations and makes a detailed series of findings in relation to the circumstances leading up to the attack and the attack itself, including the level of preparedness for and the quality of the response to the incident. It was noted that the report is due to be brought to the Board at its next monthly meeting for consideration.

No further matters were discussed.

The meeting concluded at 11:35.

Signed: 

Ciarán Devane

Chairperson

Date: 17/12/2021