

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

Friday 24 February 2023

A meeting of the Board of the Health Service Executive was held on Friday 24 February 2023 at 9:00am via video conference.

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

# In Attendance for Board Meeting:

Mr Stephen Mulvany (Interim CEO), Mr Damien McCallion (COO), Mr Dean Sullivan (CSO), Ms Mairead Dolan (Interim CFO), Dr Colm Henry (CCO), Ms Anne Marie Hoey (ND HR), Mr Joseph Duggan (ND IA), Mr Fran Thompson (CIO), Mr John Ward (CTTO), Ms Caitríona Meehan (AND Communications), Mr Brian Murphy (Head of Corporate Affairs), Mr Dara Purcell (Corporate Secretary), Ms Niamh Drew (Office of the Board).

#### Joined the meeting:

Mr Patrick Lynch (ND Governance & Risk)(Item 3), Dr Philip Crowley (ND Strategy & Research), Ms Miin Alikan (AND Strategy & Research) and Lorraine Murphy (Strategy)(Item 3), Yvonne Goff (ND Change & Innovation)(Item 3), and Paul de Freine (ND Capital & Estates)(Item 4).

Minutes reflect the order in which items were considered and are numbered in accordance with the original agenda. All performance/activity data used in this document refers to the latest information available at the time.

#### 1. Governance and Administration

# 1.1 Board Members Private Discussion

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

The Board discussed the outcome from the meeting with the Minister on 20 February 2023 which had considered key priorities for 2023 including: access; outcomes; workforce; infrastructure; and reform. A special meeting of the Board will be arranged to agree the role of the Board in delivering these priorities in 2023.



No conflicts of interest were declared.

### 1.3 Chairperson's Remarks

The Chairperson provided an update to the Board during their private session.

### 1.4 Correspondence

The Board noted correspondence received relating to:

Ministerial Correspondence

- Transfer of Functions of Specialist Community Based Disability Services from DoH to DCEDIY
  - Minister for Children, Equality, Disability, Integration & Youth dated 13 February 2023
  - Minister for Health dated 22 February 2023
- Minister for Health re 2022 Final Approved Level of Net Expenditure dated 22 February 2023

# Correspondence

- Cathaoirleach JCH re Closure of Owenacurra Centre, Midleton and standards of alternative placements – 3 February 2023
- Irish Dental Association 06 December 2022 & 17 February 2023
- Voluntary Healthcare Forum 20 February 2023

### 1.5 Minutes of Board meeting

The Board approved the minutes of 13 and 27 January 2023.

# 2. Committee Updates

#### 2.1 Audit and Risk Committee

The minutes of the Committee meeting of 08 December 2022 were noted and the Audit & Risk Chairman provided a verbal report on the matters considered at the Committee meeting that took place on 10 February 2023. The Committee are reviewing its Terms of Reference and doing a review of Committee effectiveness for 2022. The updated Terms of reference will come to the Board for approval.

The Committee Chairman advised the Board that C&AG officials were in attendance at the Committee meeting and presented an update on the C&AG Audit Planning Memorandum - the audit plan for year ended 31 December 2022. This matter will be on the Committee agenda until the final audit report in May 2023.



The Committee were provided with a briefing on the AFS Significant Issues and Judgements which may impact the AFS 2022 financial results, and the Committee requested that the CFO provide a paper with regard to the overall write down in respect of COVID-19 vaccines. The AFS 2022 updated report will be presented to the Committee in March.

An update was received by the Committee on the National Procurement Approach - Dynamic Purchasing System. The Committee noted that procurement is a significant area of risk for fraud and the Committee discussed the measurement of effectiveness, performance of suppliers and financial thresholds and advised that the Committee suggested that input from the ND IA on the new arrangement might be appropriate.

The Committee had received an update on Procurement Compliance (Statement of Internal Controls SIC) 2022, and the Controls Assurance Review Process, both of which are important processes for the assurance to the Board in signing off on the AFS's. This will be matters on the agenda until the AFS process is complete.

The Committee had received an update regarding the outturn for the Capital Plan 2022 expenditure. The Committee was also presented with an update in relation to two capital projects; the Children's Hospital Project & Programme (CHPP) – Programme Assurance Plan where the Committee requested clarity on the role of the Audit & Risk Committee and the Board, and the National Maternity Hospital at Elm Park where the Committee requested further information on the governance arrangements for construction of the new hospitals. Further updates will be brought to the Committee in March on both projects.

The Committee reviewed and recommended 4 properties which would be discussed later at the Board meeting, and the Committee plan to review the approvals thresholds concerning properties at their next meeting.

The Committee received a number of briefings under Internal Audit, and was presented with the Internal Audit Annual Report, the Internal Audit Q4 Report, the Review of Internal Audit KPI's and a detailed breakdown of any outstanding 2020 and 2021 recommendations by division.

He advised the Board that updates were given on the Corporate Risk Register Q4 2022 Report and the Committee noted CRR 020 Workplace Violence and Aggression Violence.



The Committee were provided with an update on the Draft Enterprise Risk Management Policy, Process and Guidance 2023, to which the final draft is due back at their March meeting and will then be brought to the Board. The operation of the risk management system in relation to the Mental Health Committee CAMHS report was also discussed.

The Committee were presented with briefings concerning Protected Disclosures and reviewed the Half Year Status Report, the Statutory Return to the Minister of DPER and the HSE Protected Disclosures Annual Report which is to be published by 31 March 2023.

The Committee Chairman advised the Board that he attended the Safety & Quality Committee meeting on 8 February 2023 to discuss correspondence in relation to the Owenacurra Centre, Midleton, Co Cork. The ARC plan to discuss the property and financial aspects of the closure at the next meeting.

# 2.2 People & Culture Committee

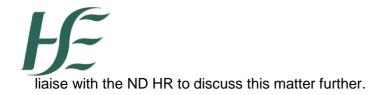
The People & Culture Committee Chairperson informed the Board that the Committee were not due to meet in February, and the next meeting will take place on 10 March 2023.

The Chair shared with the Board a briefing in relation to recent discussions on recruitment targets for 2023 as set out in the National Service Plan.

The Board were informed that despite the significant growth in staffing over the last number of years, resourcing challenges remain in what is a competitive global recruitment market with emigration and many other factors impacting overall growth coupled with an ageing workforce, competition from abroad and the availability of affordable accommodation.

The Board held a discussion on the range of initiatives that are being progressed for recruitment in 2023 and noted that the recruitment requirement is currently in the region of 11,991 WTE with the labour market estimated to supply 6,010 net additional WTE in 2023. The Board noted that given the multifactorial influences on recruitment such as candidate preferences, types of roles and geographical preferences, it may not be possible to predict which posts for which initiatives may be delivered in 2023, but that all posts are being progressed.

The Board discussed the role and impact that management and administrative staff in healthcare have vis á vis the investment and growth in these roles, compared to the investment and growth in healthcare professional roles. It was agreed that the Chair of the People & Culture Committee would



# 2.3 Performance and Delivery Committee

The minutes of the Committee meeting of 25 January 2023 were noted and Committee Chairman provided a verbal report on the matters considered at the Committee meeting that took place on 17 February 2023.

The Committee was presented with the monthly COO Report, the Operational Services Report (December Data), Performance Profile (December Data), Draft National Performance Oversight Group Meeting Notes (December Data) and the PMO Report – Winter/NSP 2022-23 was also noted.

The Committee supported the Waiting List Action Plan 2023 to reduce waiting lists in primarily acute settings by 10% this year through additional investment. The aim is to reduce both the number of people on waiting lists and the length of time they are waiting. The Committee noted that this plan will not meet with Sláintecare targets and does not address waiting lists in the community.

The Transfer of Functions in relation to the Specialist Community Based Disability Services from the Department of Health (DoH) to the Department of Children, Equality, Disability, Integration and Youth (DCEDIY) was also reviewed, this is to be discussed later at the Board meeting.

The Committee was informed that the draft Progressing Disability Services Roadmap for improved disability services for children, was being reviewed by both the DoH and DCEDIY. Members of the Committee had previously provided feedback on a draft of the roadmap and the COO confirmed that the Committee would be presented with further drafts.

The Committee received verbal briefings on the Annual Report 2022 and NSP 2023.

The Committee was presented with the draft End of Year Sláintecare Action Plan Report 2022 and the draft Sláintecare Action Plan 2023 and agreed they should be presented to the Board for consideration. These were to be presented by the CSO later at the Board meeting.

The Committee Chair presented to the Board the amended version of the Terms of Reference and requested approval for a name change to Planning & Performance Committee, which were both approved by the Board. **Decision No.: 240223/03** 



The minutes of the Committee meeting of 20<sup>th</sup> January 2023 and the December Quality Profile were noted.

The Safety and Quality Committee Chairperson provided a verbal report on the matters considered at the Committee meeting that took place on 10<sup>th</sup> February 2023. In relation to the Quality Profile, the Chair advised that a detailed discussion was held and the Committee had expressed concerns on a number of the profiles, particularly in relation to ambulance turnaround times.

The Committee received an update on Our Lady's Hospital Navan and had requested a written briefing on this for the Committees March meeting.

The Committee also received briefings on the food supplement Cariban, and a briefing on an Open Disclosure issue which related to University Hospital Waterford.

The Committee received a presentation from a HSE nurse following her experience as a heart surgery patient, which focused on three key themes: deteriorating patients, communicating with patients and families, and the long-term effect on identity and work. The Chair advised the Board that the ND OPI presented to the Committee the implementation of the Patient Engagement Roadmap and that a working group has been established with both Patient and HSE representation.

The Chair advised that the Committee was briefed on a governance review that had been requested by the HSE following a serious reportable event (SRE) in a HSE Community nursing home for older people. Several key issues were subsequently identified and the NIRP made nine recommendations to the HSE. A response setting out progress of implementation was provided by management and the Committee requested regular updates with regards to the implementation of the recommendations. The Chair advised the Board that a Safeguarding Report is due in the coming weeks and that the Executive Summary would be published shortly following this. She advised that the Committee requested a written update on the implementation of all NIRP recommendations for its next meeting.

The Board expressed its serious concern regarding the events that had occurred in this home and was advised that correspondence had been issued to residents and their families. A Sexual Safety Policy is currently being developed, and structures to share the lessons learned throughout the organisation are already in place from previous reports. The COO advised that an audit of record keeping is also being carried out.



The Board highlighted the importance of in-person training and education to instigate a change in culture. It was suggested that the learnings should also be communicated to the private sector, to heighten the general awareness and understanding of the potential of such incidents.

The COO assured the Board that all recommendations from the report are being implemented with urgency, citing the development of the protocol with An Garda Síochána as an example. He advised that this protocol had been completed and was currently with An Garda Síochána for review and sign-off.

It was agreed that the Executive Summary of the NIRP Report would be published in line with the Terms of Reference for NIRP Reviews.

The Committee reviewed the CRR 08 "Safety Incidents Leading to Harm to Patients" and welcomed the new NDIA and the AND IA to the meeting to present the Health Care Audit. The Committee had requested updates with regards to implementation of recommendations assigned to relevant individuals who are accountable in future reports and requested that consideration be given to auditing the implementation of the Assisted Decision-Making (Capacity) Act.

The Chair advised that the Committee was joined by a number of members of the ARC Committee for a high-level presentation from the State Claims Agency (SCA) on recent litigation trends. A further SCA presentation on catastrophic injury claims in obstetrics will be made to the Committee later in the year.

## 2.5 Technology and Transformation Committee

The minutes of the Committee meeting of 19 January 2023 were noted.

The Committee Chairman thanked the Chairperson of the of the People & Culture who attended the Committee meeting on 3 February, and had provided an overview on the work of her Committee, regarding its Workplan and HR Resourcing Strategy.

The Committee Chair informed the Board that work is ongoing to identify all elements of the Transformation Roadmap and highlighted the importance of the Board's input in building it. He invited each Board member to attend a T&T Committee meeting over the coming months to provide input.

He advised that the Committee received a verbal update on Regional Health Areas (RHAs) and were briefed on the RHA key actions including work on proposed governance arrangements with



voluntary groups. He noted that ongoing engagement with the voluntary sector through the voluntary dialogue forum is taking place and a further planning session has been scheduled with the forum.

The Committee will receive a further status briefing on the implementation plan at its next meeting.

The Committee also received an updates regarding the MSc Digital Health Transformation and the development of the Transformation dashboard.

The Chair advised that the CTTO presented on the assessment frameworks that have been applied in external reviews of the HSE's Cyber position to date. He informed the Board that the HSE commissioned PwC to complete an Independent Post Incident Review (PIR) of the Conti cyber-attack on the HSE. As part of PwC's review of the HSE's preparedness to manage cyber risks, they used a Cybersecurity Framework for the HSE which was based on the National Institute of Standards and Technology (NIST) Cyber Security Framework (CSF) and the Information Systems Audit and Control Association (ISACA) Control Objectives for Information and Related Technologies (COBIT). He noted that the Committee supported the use of these frameworks for further proposed procurement processes.

The Chair advised that the CRO provided a presentation on the Risk Appetite Statement and discussed CRR Risk 11 Digital Environment and Cyber Failure.

The CISO briefed the Committee on the HSE cyber security ecosystem. The Committee discussed the metrics highlighted and it was agreed that an amended version of this presentation should be brought to the Board for the upcoming cyber education session.

The Chair presented to the Board the Committee's Terms of Reference which were approved by the Board. **Decision No.: 240223/04** 

#### 3. Chief Executive Officers Update

The Board reviewed and discussed the key aspects of the CEO monthly report and supporting papers, including the Board Strategic Scorecard Report, which had been circulated prior to the meeting.

### **Unscheduled Care Pressures**

The CEO advised the Board that there is now a concern regarding increasing levels of congestion for patients accessing care across the system, despite activity levels remaining relatively stable in



comparison to previous weeks and significantly reduced demand due to respiratory viruses.

The Board were informed that the COO and the CCO are communicating with the system to ensure that all appropriate measures are in place to mitigate risks and improve performance, and that meetings have been held with sites in high levels of escalation to review performance, identify causative factors and provide appropriate supports. The National Crisis Management Team will continue to monitor the overall situation.

The Board were informed that the After Action Review (AAR), which is currently in progress which will ensure that we can identify and act on learnings over the last two months is expected to be finalised by the end of June. The AAR will be shared with the Board for advice and guidance before finalisation.

#### **Test & Trace**

The Board were informed that the preparations for the final phase of the transition to the arrangements for a clinical, public health and surveillance led model for Testing and Tracing retaining some components of the current model for surge and emergency situations. It was noted that the key indicators over the last month show a downward trend in demand and lab testing relative to the previous month. The Board welcomed the significant engagement and actions taken to improve the uptake of vaccinations in healthcare workers (HCW) and a programme of work is prioritised to enhance this uptake going forward.

### Sláintecare Consultant Contract

The ND HR outlined the terms of the new public only consultants contract noting that implementation has been deferred for a short period to allow the representative bodies process to progress. The Board were informed that the HSE has established governance structures for implementation of the new contract, including a national steering group and local implementation group.

# Draft End of Year Sláintecare Action Plan and Report 2022

The Board noted that the 2022 Sláintecare Action Plan (end of year report) and the 2023 HSE Sláintecare Action Plan which had been provided in the Board meeting pack had been considered by the Performance and Delivery Committee and subject to finalisation with the DoH will be published.

#### **Waiting List Action Plan 2023**

The Board noted the update provided on the draft Waiting List Action Plan 2023 as the next stage of



multi-annual approach to reducing waiting lists and achieving maximum waiting time targets. The Board welcomed the significant investment that is being made available to support the delivery of additional in-year activity to clear waiting list backlogs, progress key strategic reforms and implement sustainable solutions to address capacity deficits.

## Appeal of Decision Office of the Information Commissioner (OIC) -124624-M7Z3K8

The Board noted that the HSE has lodged an appeal in relation to a decision of the Commissioner further to a request pursuant to the 2014 Act for the disclosure of records. The Board sought clarification that efforts were made to mediate, arbitrate or otherwise to resolve the matter in line with the Code of Practice for the Governance of State Bodies. The ND HR agreed to provide further information on this request.

# Year End Financial update

The Board were provided with an update on the YTD expenditure at the end of 2022, and advised that at present more analysis is required and that the year-end figures for 2022 are still to be finalised but the expected end of your position is substantial breakeven. When the end of year position is finalised a decision may be required on what level of deficit funding can be provided to voluntary organisations.

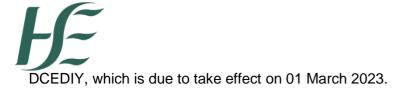
#### National Service Plan (NSP) 2023

The Board were provided with an update on the ongoing engagements with the DoH to address issues raised by the Minister in correspondence to the Board prior in relation to how to manage and present the financial position for 2023 in the Service Plan. Once these discussions are finalised the revised NSP 2023 (and associated ICT, eHealth and Capital plans) will be brought to Board for consideration and approval.

The Board expressed concerns that not having an approved Service Plan in place to date could have an impact on service delivery and performance for the year and noted that this is a risk that needs to be addressed urgently. The Board emphasised that the financial risks associated with the Service Plan need to be clearly documented in the engagement with the DoH.

Transfer of Policy, Functions and Funding Responsibility for Specialist Community-based Disability Services to the Department of Children, Equality, Disability, Integration and Youth (DCEDIY)

The CEO advised the Board that arrangements are being finalised for the transfer of policy, functions and funding responsibility relating to specialist community-based disability services (SCBDS) from the



The Board noted the correspondence received from both the Minister for Children, Equality, Disability, Integration and Youth and Minister for Health on these arrangements and shared the priority for a seamless delivery of service to be maintained throughout the transfer process. It was agreed that the Board and Performance & Delivery Committee will be kept updated on the transfer.

### Board Strategic Scorecard 2023 - January data

The CEO presented the February Board Strategic Scorecard (BSS) 2023, as circulated prior to the meeting. In consideration of the Board's request to review the rating criteria, a two-fold approach from the original BSS guidance document was presented to the Board for their consideration. Firstly, for in-year monthly ratings, percentage-based considerations would be included in the RAG ratings for greater objectivity. Secondly guidance for the assessment of 'full', 'substantial', or 'partial' or 'not achieved' year-end ratings relative to the annual ambition statement will be provided. Year-end ratings will be informed by November-December data reported on in January of the next annual cycle.

Following discussions, it was agreed that some detail within the Scorecard blueprints will evolve in the coming weeks.

The Board approved the BSS for February 2023, reflecting January data, for submission to the Minister for Health.

### 3.2 Regional Health Areas Implementation Plan

Yvonne Goff, ND Change & Innovation joined the meeting

The Board considered and discussed the key aspects of the draft Regional Health Areas (RHAs) Implementation Plan, which had been circulated prior to the meeting. It was noted that the draft Implementation Plan had not yet been reviewed by the incoming HSE CEO.

The CSO advised that the Implementation Plan outlines the approach to RHA planning and design in line with the overall design principles and objectives of Sláintecare and sets out a high-level programme of work for 2023, with a view to establishing the RHAs from 01 January 2024, and will continue to progress throughout 2024.

The Board noted that during 2023, the responsibilities and boundaries of the existing six Hospital Groups and nine Community Health Organisations will be changed in line with the new RHA boundaries. By 01 January 2024, the aim is to have the six RHA Chief Executive Officers and, as far as possible, their Senior Management Teams in place and fully accountable for the delivery of



services and associated resources within their regions, which is dependent on early approval from DPER to allow recruitment processes to proceed. During 2024, the existing Hospital Group and CHO structures will be stood down on a phased basis as the new RHA arrangements are established.

The Board observed and discussed the key next steps in 2023 which included:

- Impact assessment of the geographical alignment of current structures to new RHA structures,
- Establishment of an implementation infrastructure to support the change process at regional and national levels,
- Agree workforce transition approach and principles for fulfilment of future structures,
- Move to the new regional geographical boundaries redefining the existing CHO/HG boundaries,
- Develop the organisational design for RHAs and National HSE,
- Further engage with the voluntary sector to agree the future relationship and working arrangements with the sector in the context of RHAs,
- Agree approach for the transfer of functional responsibilities to RHAs, i.e. appropriate functions within Finance, HR, ICT, Capital, etc., within national frameworks,
- Agree approach to the development of national frameworks and pathways aligned with local and regional service delivery,
- Establish processes for Population Based Resource Allocation and Health Needs Assessment.

The Board highlighted the importance of the engagement with the Voluntary Hospitals in the process, and the roles between the DoH, HSE and RHAs with feelings that there were large degrees of autonomy in the plan. The board noted that there are plans to include the voices of patients and service users in the RHA process through partnership with the HSE National Patients Forum. It was suggested by the Board it may be opportune to involve the public in the process of naming the RHAs and queried if discussions had taken place concerning the naming, logo and where the CEO and RHA will reside.

The Board welcomed the update, and the CSO advised that the next draft will include the Board's comments and a further update will be brought to the meeting in March 2023.

## 4. Reserved Functions of the Board

## 4.1 Delegation by the Board of the HSE to the Chief Executive Officer

The Board approved the Delegation of functions to the CEO, as of 6<sup>th</sup> March 2023, pursuant to Part 3B Section 16P (4) of the of the Health Act 2004. **Decision No.: 240223/05** 



# 4.2 Properties

The Board approved the following property transactions which were recommended by the ARC for approval:

- i. St Luke's Radiation Oncology Centre at Beaumont Hospital and Annex Decision No.:
  240223/06
- ii. SVUH Surgical Ward and Critical Care Unit development and SAR Decision No.: 240223/07
- iii. Proposal for Development at St. James's Hospital and SAR Decision No.: 240223/08
- iv. Women's Health Hub Tallaght Cross West Decision No.: 240223/09

# 5. Board Strategic Focus

### 5.1 Disability Services

The Board agreed to defer the Strategic discussion item on Disability Services for 2023 and referred it to the Performance & Delivery Committee requesting a rewrite of the paper combining two things together in one paper, an overall approach to reform of disability services, and a new version of the roadmap towards improved disability services for children, which will also take account of the Minister's feedback. The Chair of the Performance and Delivery Committee will engage with the COO to bring a revised paper to the Committee and the Board.

## 6. AOB

The Chair on behalf of the Board thanked both the Interim CEO and the Interim CFO for their work and commitment over the past 5 months.

The meeting concluded at 14.50.

Signed: Ciarán Devane

Chairperson

Date: \_31st March 2023