



Minutes of HSE Board Meeting

Wednesday 27 May 2022

A meeting of the Board of the Health Service Executive was held on Friday 27 May 2022 at 9:00am by video conference.

Present: Mr Ciarán Devane (Chairperson), Prof Deirdre Madden, Mr Aogán Ó Feargháil, 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:

Mr Paul Reid (CEO), Dr Colm Henry (CCO), Mr Stephen Mulvany (CFO), Ms Anne O’Connor (COO), Mr Dean Sullivan (CSO), Mr Tom Malone (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), Paul de Freine (Interim ND Capital and Estates), Mr Brian Murphy (Head of Corporate Services), Mr Dara Purcell (Corporate Secretary), Ms Niamh Drew.

Joined the meeting:

Mr Liam Woods (ND Acute), Ms Mairead Dolan (Assistant Chief Financial Officer), Mr Joe Ryan (ND OPI), Mr Michael Redmond (Chief Operating Officer – eHealth).

Minutes reflect the order in which items were considered and are numbered in accordance with the original agenda.

1. Governance and Administration

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

1.3 Chairperson’s Remarks

The Chairperson updated the Board on the following matters;

- Senior Managerial changes.
- Quarterly performance meeting with Minister Donnelly held on 18 May 2022.



- Meeting with Minister O’Gorman and Minister Rabbitte regarding the Transfer of Disability Services from Department of Health (DoH) to Department of Children, Equality, Disability, Integration & Youth (DCEDIY) held 19 May 2022.
- Establishment and next steps with regard to the Technology and Transformation Board Committee. The draft Terms of Reference were noted and will be considered by the Performance & Delivery Committee for recommendation to Board at the meeting scheduled in June 2002.
- Ministerial approval of the Capital Plan 2022.
- Allocation of Board members on Committees.
- Annual Financial Statements, the Chair acknowledged and thanked the Audit and Risk Committee for their work in this area.

1.4 Ministerial Correspondence

The following Ministerial correspondence was noted:

- Correspondence from Minister Donnelly regarding Our Lady’s Hospital Navan 18 May 2022.

1.5 Minutes of Board meeting

The minutes from the Board meeting 27 April 2022 were approved.

2. Committee Update

2.1 Audit and Risk Committee

The minutes of the Committee meeting of 14 April 2022 were noted.

The ARC V/Chair informed the Board that the Committee had met twice over the last month, with regard to the meeting held on the 24 May to review the AFS, this matter would be covered off later in the meeting and the V/Chair would address it there.

The V/Chair informed the Board that he had written to the Board Chair with regard to Board membership of the ARC Committee noting that there are currently only two Board members serving on the Committee and that the Committee had requested that consideration is given by the Board to adding an additional Board member.

The V/Chair of the Committee provided an update on the matters considered at the Committee meeting of 12 May 2022. He highlighted the work done to develop the HSE Property Management Strategy and informed the Board that this would be coming back to the ARC committee in July for further discussions.



The Committee received updates on the HSE's draft HSE Corporate Procurement Plan (2022-2024). He informed the Board that while a lot of good progress has been made in both of these plans the committee were seeking further discussion with regard to areas such as allocation of resources to enable delivery of objectives to be met in line with the strategies. He also noted that a discussion on the approach for the auditing of Funded Agencies had taken place and that it was proposed that there would be a CRR workshop organised over the coming months. He mentioned that two new risks were discussed at the Committee, Invasion of Ukraine, which ARC will maintain oversight of, and Assisted Decision Making & Deprivation of Liberty Safeguards, where it was agreed that the SQ Committee would be allocated oversight of. He noted commencement of work on the Governance and Compliance Framework project and the discussion on the memorandum of understanding with the Charities Regulator.

2.2 People & Culture

The Chairperson of the Committee noted on the agenda for the forthcoming Committee meeting which is due to be held on June 10.

2.3 Performance & Delivery

The minutes of the Committee meetings of 11 March were noted. The Chairperson of the Committee provided a verbal report on the matters considered at the Committee meeting that took place on the 20 May 2022.

He reported that the Committee were briefed on the review of the National Service Plan (NSP) which was undertaken as requested by the Minister when he approved the NSP and that the Committee discussed the level of confidence of management that minimum recruitment target would be achieved and to what extent progress toward the upper target might be achieved through the year. The Committee also discussed the impact of the Haddington Road revised hours and the Ukraine Response impact.

The Committee considered the report of the Winter Preparedness Plan Oct 2021 – March 2022 and that the review highlighted that despite there being unprecedented levels of activity and the COVID-19 surge that was not responded to with any social restrictions, the key performance indicators remained stable.



The Chair informed the Board that the Committee had received an update on implementation of the strategic and tactical recommendations contained in the cyber attack - Post Incident Review report and that work remains ongoing in this area. He noted that he has had ongoing engagement with the Board Chairman on the establishment of the Board Oversight Committee with a view to bringing proposals to the Board and that he would report back to the Committee with an update at the next meeting.

The Committee also received updates from the CFO on the IFMS programme and the National Medical Laboratory Information System (MedLIS) which would be discussed later at the meeting.

The Committee also discussed and reviewed the key performance messages in the Operational Services Report (OSR) relating to scheduled and unscheduled care in the acute sector noting the total number of ED attendances and admissions for March 2022 was higher than the NSP targets. The Committee noted that this was due to the impact on access to GPs arising from their participation in vaccination programmes and the gradual return of patients to EDs as lockdown measures are eased and vaccination levels increase.

The Chair informed the Board that the Committee had agreed to allocation of substantial time at its next meeting to discuss Disability Services and that members of the Board were welcome to join the meeting for this item.

2.4 Safety & Quality

The minutes of the Committee meeting of 12 April were noted.

The Chairperson of the Committee provided a verbal report on the matters considered at the Committee meeting that took place on the 10 May 2022. She informed the Board that the Committee reviewed an update from the NIRP Chair on its most recent completed review. The purpose of the review was primarily to ascertain if any learning could be gained that would inform the treatment and care plans for young people with similar presentations in the future. The Committee were also briefed on a review of the NIRP terms of reference and that it was agreed that the terms would broadly remain as they are, but that consideration was to be given to aligning the timing of other processes such as HR investigations and referrals to regulatory bodies. The Committee also recommended that while this can be very complex, all such processes should be carried out in a timely manner.

The Committee also considered the April quality data profile and noted the indicators in relation to the percentage of all attendees aged 75 years and over at ED who are discharged or admitted within 6 hours,



and CAMHS referrals, both of which were below target. The Committee requested that the indicator relating to attendance at EDs would be the subject of a detailed focus at its June meeting, and that CAMHS would be an agenda item for the July meeting.

ND Acutes provided a briefing on the implementation of the recommendations of the findings of the Internal Audit Report on Compliance with Post-mortem Practices and Procedures, and Prof Ó Laoide provided an update to the Committee on the Implementation of quality care: Cancer services. The Committee also received a presentation on the National Clinical Programme (NCP) for Ophthalmology.

The Confidential Recipient presented her annual Report to the Committee and the Committee noted that she would be resigning from this role in September. The Committee requested that she be invited to attend the September Board meeting to share her experience as the Confidential Recipient over the last eight years, the themes of the complaints she had handled, and any learnings from these complaints and from her role in general.

The Committee Chair also briefed the Board on the proposed amendment to the Patient Safety Bill and the introduction of a notifiable incident directly related to cancer screening services at Report Stage. The Board agreed that the Chair should write to the Minister setting out the strong view of the Board that such an amendment would have negative consequences for the screening services.

3. Chief Executive Officers Update

The Board reviewed with the CEO and EMT the key aspects from the CEO monthly report and supporting papers, which had been circulated prior to the meeting.

The CEO presented the Board Strategic Scorecard Report, noting that we are approaching the half year mark and overall good progress continues to be made. The Board asked the CEO to consider adding in an area that looks at Chronic Diseases and he agreed that this could be facilitated under areas such as older persons or community networks.

The Boards discussion focused on the following areas;

Regional Health Areas (RHAs)

The CEO confirmed that work remains ongoing with regard to the development of an implementation



plan for RHAs, which is due to be prepared by the end of the year. He informed the Board that a design workshop had been held with the DoH during the month and the Board requested that the outputs from the workshop would be shared.

Recruitment

The Board noted the progress to date made in recruitment and noted that as of 31 March staffing levels YTD are above the minimum resourcing target. The Board discussed the ongoing challenges with regard to recruiting healthcare staff noting that it is currently a worldwide problem and that there is now a growing dependency on overseas recruitment. The ND HR confirmed that going forward she will be presenting a turnover report to the People and Culture Committee which will monitor turnover on a quarterly basis.

The Board were also briefed on the impact that the recommendation contained in the report of the Independent Body Examining additional working hours (Haddington Road Agreement) will have and the plans that are being put in place to implement the recommendation.

Bed Capacity

The Board noted that there was slippage on 2022 plans to enhance bed capacity and sought further discussion on this area. The CEO confirmed that recruitment and retention of skilled staff to support the increase in bed capacity remains challenging. He also highlighted the real challenges associated with costs and availability of contractors for those beds requiring a capital build. He noted that the impact of mobile diagnosis teams attending patients in nursing homes will have a positive impact on bed capacity however, it will take time to grow and develop this further and Bed Capacity will continue to remain challenging.

Test & Trace

The Board noted that the Test and Trace is currently in phase 1 of a transition plan to move from the mass testing model to a surveillance led model with GP clinical pathways and that demand continues to reduce in line with public health testing advice and decreasing disease prevalence. It was noted that a surge response model will be required as part of the GP pathway for Winter 2022/23 and the response will be triggered by an agreed set of early warning criteria such as a surge in the disease in the community or pressure on GP activity. The Board also discussed the importance of taking the learnings from the Covid pandemic and using them to understand and support emergency planning going forward.



New Drugs

The Board noted that so far in 2022, 16 new medicines and 14 new uses of existing medicines have been approved. The Board noted that the score for new drugs on the Board Score Card remains at 4 which provides strong assurance that the 2022 ambition statement will be substantially achieved, however it was agreed that the demand will always be higher than budget allocation but that the allocation of €30m in the 2022 plan for investment will address some of the challenges.

HSE's response to the Ukraine Crisis

A briefing was given to the Board with regard to the HSE planning and service delivery response for people fleeing from Ukraine and seeking refuge in Ireland. The Board were informed that as of the 16th May, 30,597 people from Ukraine have entered Ireland. 21,501 of those have sought emergency accommodation in IPAS.

The Board queried if the HSE had any vacant properties that could be used in any way to support the refugees. The CEO confirmed that the ongoing work on the development of the HSE Property Strategy could assist in identifying potential properties. The Board welcomed the continued work done by the HSE to respond to the Ukraine crisis.

Finance

The CFO provided an overview to the Board on the March YTD figures. He noted that the draft revenue I&E financial position at the end of March 2022 shows an YTD deficit of €250.9m or 4.96%, with a significant element of this being driven by the direct impact of COVID-19, as reflected in the €224.1m adverse variance on the COVID-19 reported costs and €26.8m adverse variance on core (Non-COVID-19) related costs. He noted that from an overall perspective, it is expected over the coming weeks and months, that the core (non COVID-19) activities will naturally increase and the impact of "delayed" care will also increase demand for core services.

He also highlighted that work on the full year forecasts is currently underway, which is a bottom-up exercise based on first three-month actuals (Jan-Mar 22), with substantial divisional oversight and engagement. This forecast will be used to inform and realign, if needed, the 2022 budget profile to year end. The consolidated full year I&E forecast will be available for circulation in May, with a full year cash forecast being prepared in line with the overall I&E forecast timeline.



Meeting with Minister Rabbitte and Minister O' Gorman

The CEO provided an overview of a meeting held with the two Ministers on the 19 May with regard to the transfer of disability services from DoH to DCEDIY. He confirmed that a good discussion took place and that there was a roadmap of shared understanding. The Board welcomed the update.

Data Protection notification process ongoing pursuant to the Cyber Attack on the HSE

ND OPI provided an overview on the briefing that has been prepared for the Minister on the Data Protection notification process and legal proceedings ongoing pursuant to the Cyber-attack in the HSE, noting that the number of affected data subjects is still being determined as the team works its way through the data set and will continue to have a degree of flux as the notification process is worked through. The ND OPI also briefed the Board on the interactions with the Data Protection Commission regarding the attack and the process in regard to the notification of data subjects.

The Board sought further information and assurances with regard to appropriate support being in place to support individuals who require support. The ND OPI confirmed that the team is supplemented with the appropriate skills to support this matter.

National Service Plan (NSP)

The CEO informed the Board that as per correspondence from the Minister on the 18 February 2022 to conduct a first quarter review of the National Service Plan as it relates to recruitment targets and their impact on the delivery of reform in light of the recruitment challenges identified in the National Service Plan 2022, that the review had been carried out.

The CEO reported that there remain particular professions where the recruitment challenge is greatest and this challenge can be exacerbated in attracting professionals to dense urban areas and some remote rural locations. He noted that the HSE is conducting significant work both nationally and locally, examining posts that are unable to be filled and identifying clear pathways for same.

The Board were also informed that in order to meet the needs of standard staff turnover as a result of replacements due to retirements, resignations and promotions that this will equate to circa 9,500 appointments to maintain existing staffing levels. However, the HSE has committed to a recruitment target beyond this to meet the commitments in the National Service Plan and is confident that at a minimum this will result in an additional 5,500 new WTE's by year end but will strive towards the stretch target of 10,500 additional WTE.



The review also recognises the additional challenges of the impact of the recent Government decision in relation to the reversal of the Haddington Road Agreement as well as the impact and service implications of the response to people arriving in Ireland from Ukraine.

Genomics

The Board were informed that the 12 May saw the HSE take an initial step toward developing a National Genetic and Genomic Strategy for Ireland, with the inaugural meeting of the HSE National Genetic and Genomic Steering Group. The Board welcomed this initial step but noted the importance of getting a sense of funding requirements for this strategy and it was agreed that further information and updates would be provided in the coming months.

Industrial Action by MLSA (Medical Laboratory Scientists Association)

The CEO reported to the Board that the MLSA suspended their Industrial Action for 25 May, after accepting an invitation to attend the Labour Court for exploratory talks on the dispute. He noted that Industrial action would lead to significant disruption and service delays in both hospitals and GP services, while Emergency Departments would operate as normal, but there would be an impact which would lead to delays for patients with non-urgent care needs.

He also noted that patients would be advised that appointments and procedures disrupted by the strikes will be rescheduled as soon as possible.

Our Lady's Hospital Navan (OLHN)

The Board considered the letter received from the Minister dated 18 May, with a request to the Board to pause its decision that the planned reconfiguration of Our Lady's Hospital Navan (OLHN) in line with the Smaller Hospital Framework agreed by Government in 2013 would take place by 7th June 2022. The pause is to allow for local political and public engagement.

The Board were informed that the Minister has re-arranged a postponed meeting with the Oireachtas Committee and Meath Oireachtas members for 13th June to brief them on the planned reconfiguration.

The Board confirmed its decision made on the 27 of April to proceed with the planned reconfiguration of Our Lady's Hospital Navan as there remains very serious patient safety issues which presents significant risk to some categories of patients presenting to the Emergency Department at the hospital.



The Board expressed disquiet that four previous meetings to engage with local representatives have been cancelled and emphasised that it is imperative that this meeting with Oireachtas members goes ahead as planned on 13th June to allow for the required engagement. The Board agreed that the reconfiguration of OLHN will take place no later than 30th June.

It was agreed that the Chair will write to the Minister to convey this Board position.

4 Reserved Functions of the Board

4.1 Annual Financial Statements

The V. Chair confirmed that the Committee had met on the 24 May to review the final draft AFS and associated documents following the conclusion of the C&AG formal audit and that these were to be re-presented to the Board for final approval prior to submission to the Minister.

The CFO confirmed there are no unresolved accounting matters and the audit file had been presented to the C&AG for certification. He indicated it is expected that the audit opinion will be clean and unqualified confirming the accounts are properly presented in accordance with the accounting standards specified by the Minister for Health.

An outline of the position on the Annual Financial Statements was provided by CFO and the Board were briefed on the requirement for the adoption of the Annual Financial Statements (AFS) in accordance with the requirements of Section 36 of the Health Act 2004. Section 36 of the Health Act requires the AFS to be adopted by the Board on or before the 1st April annually. Once these are adopted and signed by the Chairperson on behalf of the Board they are then submitted to the Minister for Health and to the Comptroller and Auditor General for formal audit. The HSE Board adopted the Annual Financial Statements (AFS) in accordance with the requirements of Section 36 of the Health Act 2004 on 25 March 2022.

The Board proceeded with their re-adoption of the AFS and related documents on the grounds that they have been recommended by the Audit & Risk Committee as confirmed by the Audit and Risk Committee and nominated the Chairperson and the CEO to be the signatory on these documents.

(Decision No:270522/39)



4.2 Property Transactions

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

- Proposed acquisition of the Freehold of the Day Care Centre, Timahoe Road, Portlaoise, Co. Laois. PRG ref: M/A/0422/2655 (**Decision no. 270522/40**).

4.3 Contract Transactions

4.3.1 MedLIS

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

- National Medical Laboratory Information System (MedLIS) (**Decision no. 270522/41**).

4.3.2 CHI EHR

The CIO updated the Board on the on the Children's Health Ireland (CHI) Electronic Health Record (EHR) procurement process which is now completed and confirmed that following a memo to government the CHI will sign the contract with the successful vendor.

4.4 Donations

The CFO presented this item to the Board noting that as set out in Section 17.5.2 of the HSE National Financial Regulation 17 – Voluntary Donations, Gifts, Bequests, Membership of Boards and Committees, gifts in excess of €100k must be approved by the Board of the HSE.

The CFO informed the Board that a donation of €110k have been made to the HSE to be used by the Office of Nursing and Midwifery Services solely to support ongoing education and training of nursing and midwifery staff in recognition of their response to the Covid 19 pandemic.

The Board welcomed the donation and thanked the donor for the gift. (**Decision No:270522/42**)

4.5 Audit and Risk Committee Membership reappointments

The ARC V / Chair requested that the Board approve the reappointment of Ms Ann Markey, Mr Pat Kirwan, Brigadier General Colm Campbell and Mr Martin Pitt as external members of the Audit and Risk Committee for two years until June 2024.

The Board acknowledged the work to date that the Committee members had carried out and approved the reappointments (**Decision No:270522/43**).



5. Board Strategic Priorities - ICT and eHealth

The Board considered the briefing paper, circulated in advance of the meeting, on eHealth and Innovation. The paper outlined the strategic direction in relation to required EHR/eHealth transformation and provided updates to the Board on other elements of eHealth activity, including Sláintecare progress; Cyber Security; Digital Innovation; ehealth governance; Investment.

The Key Issues considered included:

- i) Competing demands between short-term delivery of tactical ICT projects and the long-term transformational programmes
- ii) Agreement between all the stakeholders on a funded strategy including eHealth Capital and associated revenue, Service Resources being made available to agreed programmes
- iii) Governance of national ICT programmes across the health service, especially in the voluntary system
- iv) Complexity of Health ICT programmes
- v) Challenges in managing Cyber security within the requirements of the health system
- vi) Continually ensuring that all our 2500+ systems are secure
- vii) Length of time it takes to bring a project from idea to delivery, through the approval process, procurement process and internal resourcing process.
- viii) Recruitment of ICT specialists in a very competitive market
- ix) The impact of unforeseen service lead demands on ICT resources

The CIO noted that the leading Sláintecare action for eHealth is implementation of an electronic health record system but that approval of this was deferred in 2019 until after reviewing the outcomes of the CHI EHR and that current funding does not provide for implementation of a national plan. The Board discussed the proposed solutions where patient data and records were shared across care settings to enable integrated care and supported the proposed plan A and the suggested governance model.

The Board noted that currently the HSE runs and manages the largest ICT estate in the country, and manages and delivers over 800 projects and programmes, from the very small to some of the largest in the country. Each major project has its own governance, mainly chaired by the relevant service lead or EMT member.



The Board endorsed the recommendation on revised governance arrangements to provide an assurance process for the Board noting the new governance model will provide a single oversight for all eHealth, Cyber and Innovation aspects of eHealth within the Health Service. This oversight group will be chaired by the CEO.

6. AOB

The Chair thanked Board Members and Management Team members for their time.

No further matters were discussed.

The meeting concluded at 3:53pm.

A handwritten signature in black ink, reading 'Ciarán Devane', is written over a horizontal line.

Signed: Ciarán Devane
Chairperson

Date: 29 June 2022