



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

Minutes of HSE Board Meeting

Wednesday 24th September 2021

A meeting of the Board of the Health Service Executive was held on Wednesday 24th September 2021 at 9:00am by video conference.

Present: Ciarán Devane (Chairperson), Deirdre Madden (Deputy Chairperson), Aogán Ó Fearghail, Brendan Lenihan, Fergus Finlay, Yvonne Traynor, Sarah McLoughlin, Brendan Whelan, Anne Carrigy, Fergus O'Kelly.

Apologies: Tim Hynes.

In Attendance for Board Meeting:

Paul Reid (CEO), Colm Henry (CCO), Mark Brennock (ND Communications), Stephen Mulvaney (CFO), Fran Thompson (CIO), Anne O'Connor (COO), Dean Sullivan (CSO), 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), Yvonne Geoff (ND Change and Innovation), Jim Curran (ND capital and Estates), Cathal Morgan (Head of Disability operations), John Kelly (Corporate Affairs), Dara Purcell (Secretary), Niamh Drew, Hannah Barnes.

1. Governance and Administration

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

The Board formally noted the resignation of Fiona Ross and took the opportunity to acknowledge the work carried out by Fiona during her time as a Board member and wished her well in her new appointment as Chairperson designate of the National Paediatric Hospital Development Board (NPHDB).

1.2 Conflict

Prof Fergus Kelly informed the Board that in the context of the discussion on item 4.3 Primary Care Centres Location and Approval Assessment his former GP Practice is now part of the Rialto / Coombe Primary care centre.

The Board noted correspondence that had been received from the Minister since the last meeting.

The Chairman briefed Board members on the Quarterly Meeting he had with the Minister and Chairperson which was attended by the CEO and the Sec Gen of the DoH.

The Board noted the resignation of Ms. Laura Magahy, Director of the Sláintecare Programme Implementation Office, and Dr Tom Keane, Chairman of the Sláintecare Implementation Advisory Council and acknowledged their contribution to the Sláintecare programme to date.

1.4 Approval of Minutes

The minutes from the Board Meeting of the 28th of July were approved.

2. Committee Update

2.1 Audit and Risk Committee

The minutes of the Audit and Risk Committee meetings held on the 9th and 19th July 2021 as circulated were noted.

The V/Chair provided a high-level overview of the Committee meetings held on the 10th and 22nd of September 2021. It was noted that at the Committee meeting of the 10th September the Committee were provided with a briefing on the Internal Audit Report Payroll Irregularities and were joined by representatives of IEGH and St. Columcille's. The Committee were also briefed on the ND Internal Audit's Q2 report and received an update on the implementation of the recommendations in the key reports outlined at the ARC Meeting 11th June. The Committee approved the Revised Internal Audit Plan 2021. The Committee also considered the YTD June expenditure update, the update on the control's improvement program, and the ICQ and Carp process.

At the Committee meeting of the 22nd September the Chair noted that the Committee had received a general risk update before considering the CRR Q2 2021 Report. The Chair highlighted that under the Capital item, the Committee were provided with a briefing on the development of the HSE's property strategy and a verbal update on the Capital Plan 2022. The Committee then reviewed the Primary Care Centre's Location and Approval Assessment and recommended that it be brought to the Board for today's meeting.

2.2 People & Culture

Minutes of Committee meeting of 11th June were circulated in the Board pack and noted. The Committee Chair provided the Board with a briefing covering the key points of the People and Culture meeting that was held on the 3rd September.

The Chair informed the Board that a Committee Performance Review questionnaire was distributed to the Committee and it has been agreed that further training on the organisational understanding of the HR within the HSE and an awareness of the structure and roles would be valuable to all committee members.

The Chair noted that the Committee received updates on the New Consultant Contract, the process for return to work for staff that were redeployed, and suspended employees in receipt of full salary which the Committee noted is an exceptional step to take whilst taking note of the circumstances involved.

The Committee also discussed the HR Dashboard before considering Risk 20 – Individual Performance and Accountability, Recruitment process issues, and the Internal Audit Report on Payroll Irregularities.

The Chair informed the Board that the Committee received an update on the Trust and Confidence programme which included the programme approach, the drivers of public trust, the Action Plan and the programme future. It was noted that good progress is being made.

2.3 Performance & Delivery

Minutes of Committee meeting of 23rd July were circulated in the Board pack and noted.

The Chair of the Committee provided a summary of the Performance & Delivery Committee meeting that took place on 17th September 2021 noting that the Committee received a further update on the current status of the NSP Review, including the Estimate of requirements for an Existing Level of Service (ELS) and for key New Service Developments for 2022.

The Committee were provided with the monthly Performance Oversight update which included performance profiles for May, June, and July. The Committee noted that systems were preparing for Winter and managing those pressures in a COVID-19 environment. Additionally, reviews are ongoing in relation to finalising the Winter Plan. The Committee considered their CRR Q2 2021 report and received further briefings on Risk 8 - Capacity Access Demand Risk and Risk 11 Disability Services Risks. The Chair highlighted that the Committee had reviewed the Oversight Agreement and noted that further discussion would take place later in the Board meeting. The Chair advised that the Committee had received the agreed update on the IFMS. The update provided information on the project status. It was noted that the next updated will be provided to the Committee in December 2021.

2.4 Safety & Quality

The Minutes of meetings from the 20th of April and 13th July as circulated were noted.

The Chair presented the revised Terms of Reference (ToR) for the Safety and Quality Committee, which reflects the Committee's role in relation to oversight of HCA to the Board. The Board approved the amended ToR of the Safety and Quality Committee (Decision no. **240921/38**).

The Chair provided a verbal summary of the Safety & Quality meeting that took place on the 15th of September 2021. She informed the Board that the Committee had received a briefing on People's Experience of Quality: Voices of Syrians: stories from resettled refugees in Ireland and discussed with Board members the merits of listening to, and reflecting on, people's experience to sensitise and provide context in a meaningful way on the impact of Board decisions on patient and staff experience. The Committee received a briefing on the National Complaints report and HIQA Advisory Group National Standards. The Committee considered their CRR Q2 2021 report before receiving a further briefing on Risk 16 - Regulatory Non-Compliance. The ND IA presented the Q2 Activity Report, Q2 Healthcare Audit Dashboard, Q2 Healthcare Audit Reports, and the Healthcare Audit End of Year Report 2020 to be considered by the Committee. The Committee also had a discussion regarding funding priorities for 2022.

3. Chief Executive Officers Update

3.1 CEO Report

The Board discussed with the CEO key aspects from the CEO monthly report which had been circulated prior to the meeting. The discussion focused on the Board Strategic Score card, the current status of the cyber-attack, a finance update, recruitment, and risk management.

The Board agreed to the proposal from the CEO to formally revoke the temporary delegation in relation to COVID-19 expenditure, agreed for the duration of the COVID-19 pandemic (as per decision no. **160320/16**).

The Governance of Sláintecare was considered as part of the CEO report. The Board discussed with the CEO the significance of the resignations. They expressed concern that these issues have materialised and considered the effect they might have on implementing Sláintecare. It was noted that the HSE is committed to major reform of the health services including regional structures which are an essential part of the future. However, while the COVID-19 response has regrettably impacted the capacity to implement Sláintecare at the pace that might be preferred, significant progress has nevertheless been made in delivering the vision for the future of the health service outlined in Sláintecare.

3.2 Board Strategic Scorecard

The CEO and CSO presented the September Board Strategic Scorecard Report advising the Board that completion of the report has been challenging due to the ongoing impact of the cyber-attack, the

diversion of staff due to COVID-19 pandemic and the Vaccine Programme, and the preparation of Estimates and NSP 2022. The Cyber Attack has affected the gathering of 9 KPIs across 5 Strategic Scorecards but there is a high level of confidence that this data will be available for the October Scorecard submission. The Board were informed that plans are continuing to track financial expenditure carefully, both in general and in relation to the specific reforms and capacity-building initiatives being progressed in 2021. Additionally, work will continue with colleagues in the Department to discuss further the content and presentation of the Scorecard and how this might evolve in the coming months. The Board discussed the implementation of appropriate targets on the scorecard and noted the actions

The Board agreed to adopt the Scorecard and send to the Minister.

3.3 Vaccination Programme and 3.4 Transitioning from the Pandemic

The Board noted the paper circulated in advance of the Board meeting detailing the transition from the Pandemic to living with endemic COVID-19.

The CEO provided an update on the vaccination programme noting that it continues to perform beyond expectations having surpassed the 7m vaccination mark as at 16 September. The Board noted that there continues to be 37 central vaccination centres sites operational across the country. Activity is being maintained at similar levels to previous weeks, with approximately 90,000 appointments planned to be offered in vaccination centres the week of the Board meeting. The centres are currently focused predominantly on vaccinating 12-15-year olds.

3.5 Cyber Update

The Board noted the briefing note on the cyber-attack update which was circulated ahead of the Board meeting.

3.6 Winter Plan

The CEO and COO highlighted the key points in the briefing paper on the Winter Plan 2021/22 which was circulated in advance of the board meeting. Winter preparedness planning is a core component of annual operational planning in the health service and is essential to ensure that service provider organisations are prepared for the additional seasonal pressures associated with the winter period. The Board were informed of the issues and risks associated with the winter months which typically leads to the periods of peak pressure which will be further exacerbated by a potential increase in COVID-19 presentations, flu presentations, emergence of RSV, the potential of further nursing home outbreaks, and the requirement to safely restore health and social care services following the cyber-attack. It was noted that the response required is complex and multi-faceted.

Discussion on the multi-faceted response took place with Board members asking about capacity within

community services. The COO informed Board Members that the HSE will continue to offer as many people as possible home care in line with 2021 allocations and plans. This will help older people to live as independently as possible, helping them to avoid hospital and return home in a timely manner after a stay in hospital. However, it was noted that a key risk of the Winter Plan is the significant risk of not being able to attract and retain the appropriate number and calibre of staff. This is particularly the case in relation to the home care and nursing home sector. Despite the challenges the Board noted there are a number of actions including the definition of new care pathways which is required to progress recruitment of roles and the implementation of the Home Support pilot program and complete evaluation to inform final design of a new Statutory Home Support Scheme.

3.7 Update on Transfer of Responsibility for Disability Services from the Minister for Health to the Minister for DCEDIY

The Board discussed with the CEO and the COO the current arrangements of the Transfer of responsibility for Disability services from the Minister for Health to the Minister for Children, Equality, Disability, Integration and Youth. The Board were informed that initial observations were provided to the DoH on key planning and reporting processes arising from the Transfer. The Board noted that no final decisions have been made and HSE will be engaging with the Department on any draft heads of bill and the detailed workings on the proposed reporting mechanisms prior to any final decision making. Further discussion on the disability services took place under item 5.1 Objective 5 – Disabilities.

3.7 Estimates and National Service Plan 2022

Following a discussion and analysis of the National Service Plan (NSP) and Estimates 2022 papers at the Performance and Delivery Committee meeting held on the 17th September, the Board noted the finalised paper presented and agreed that next steps will be the delivery of a pre-budget draft National Service Plan 2022 which will be submitted to Performance and Delivery Committee for its meeting on the 22nd October.

3.8 Scheduled Care: 2021 Short-Term Waiting List Action Plan

The Board noted the paper on the 2021 Short term waiting list action plan circulated in advance of the meeting.

4. Reserved Functions of the Board

4.1 Property Transactions

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

Lease of ground at Scoil Chiaráin, St. Canice's road, Glasnevin, Dublin 11 and 'Licence to Build' a special school on the property. **(Decision no. 240921/32)**

Sporting Lease of land at St. Ita's Hospital, Portrane, Co. Dublin. (Decision no. **240921/33**)

Sub-lease of ground at Cottage Hospital, Scarlet Street, Drogheda, Co. Louth. (Decision no. **240921/34**)

Lease of ground at Annagry Health Centre, Co. Donegal. (Decision no. **240921/35**)

4.2 Contract Transactions

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

Contract Award for Extension & Improvement works to Residential Care Centre at Kanturk Community Hospital, Kanturk, Co. Cork. (Decision no. **240921/36**)

4.3 Primary Care Centres Location and Approval Assessment

The Board reviewed with the CSO and ND Capital and Estates the papers on the Primary Care Centres Location and Approval Assessment which were circulated in advance of the Board meeting. The CSO briefed the Board on the Primary Care Centres that are currently operational or in development. It was highlighted that an assessment has been completed in terms of both establishing whether the appropriate approvals are in place for PCCs which are operational, in progress or planned and more generally considering the extent to which there is adequate PCC coverage across the country. This process has identified that 10 of the primary care centres within the 292 total which are operational or being progressed were not previously approved by the HSE Board. These include 4 locations that are replacements for previously approved locations. A further 37 primary care locations require approval for changes made subsequent to their initial Board approval (ie: size and/or rental cost). This gives a total of 47 primary care centre developments for which additional approval is now required and sought from the Board.

The Board noted the Audit and Risk Committees recommendation of approval for the 47 primary care centres identified in the assessment and for the scoping of a more comprehensive review of future primary care centre requirements taking account of geographical coverage, population need, service requirements and other relevant factors. The Board approved both. **(Decision no. 240921/37)**

5. Board Strategic Priorities for 2021

5.1 Objective 5 – Disabilities

The Board discussed with the COO and Head of Disability Operations the papers on objective 5 disabilities, of the HSE's Corporate Plan which were circulated in advance of the Board meeting. The

objective featured in the Corporate Plan commits the HSE to work to reimagine disability services to be the most responsive, person-centred model achievable with greater flexibility and choice for the service user. The Board were informed of the achievements to date in support of Objective 5 including improved access to assessment and intervention, operational delivery reform and stability and sustainability, collaborative working and service user engagement, and critical sustainability measures.

In response to questions discussion on the operational delivery of disability services in Ireland took place, noting that the challenge of sustaining the current operational delivery system is a key concern given the scale and complexity of this sector at present combined with the level of policy ambition as set out in Transforming Lives and the UN Convention on the Rights of People with a Disability. The Board discussed with management plans to develop the structures to enable service users to become active participants in their care and support, not only through the use of personalised budgets but also in the co-design of their services. The Board welcomed plans to significantly increase personal assistant and home support hours as well as increased and improved day services. It was noted that the HSE is moving towards the implementation of a refreshed and responsive New Directions policy, seeking to ensure access to appropriate and innovative developmental services and social activities.

The Board acknowledged the work undertaken by Cathal Morgan, Head of Disability Operations and him well in his new appointment with the WHO.

6. AOB

No further matters were discussed.

The meeting concluded at 13:00.

Signed: Ciarán Devane

Ciarán Devane

Chairperson

Date: 29/10/2021