



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

Minutes of Special HSE Board Meeting

Re NSP 2021

Friday 15th January 2021

A meeting of the Board of the Health Service Executive was held on Friday 15th January 2021 at 12.00 by video conference.

Present: Ciarán Devane (Chairperson), Deirdre Madden (Deputy Chairperson), Aogán Ó Fearghaíl, Brendan Lenihan, Fergus O’Kelly, Fergus Finlay, Fiona Ross, Sarah McLoughlin, Yvonne Traynor, Tim Hynes.

In Attendance for Board Meeting:

Paul Reid (CEO), Colm Henry (CCO), Stephen Mulvany (CFO), Dean Sullivan (CSO), Fran Thompson (ND ICT), Niamh O’ Beirne (National Lead Testing and Tracing), Anne- Marie Hoey (ND HR), Anne O’Connor (COO), Geraldine Smith (ND Internal Audit), Mark Brennock (ND Communications), Dara Purcell (Secretary), Niamh Drew, Amy Phillips.

1. Governance and Administration

The Chairperson welcomed members to the meeting. No conflicts of interest were declared.

2. Approval of National Service Plan (NSP) 2021

The following documentation had been circulated prior to the meeting:

- Correspondence from the Minister Re: National Service Plan 2021 (dated 31st December 2020) and the 2021 Revised Approval level of Net Expenditure (dated 4th January 2021)
- Revised National Service Plan (NSP) 2021
- Revised Capital Plan 2021

The CSO briefed the Board on the areas of the NSP which had been further developed and enhanced to align with the Minister’s letter dated 31st December 2020 and the revised Letter of Determination which set out a revised approval level of net expenditure for the HSE in 2021. Fiona Ross confirmed the work done to reflect the amendments sought by the Minister/Department in the amended NSP had been

reviewed by the Board NSP working group and the working group recommended the approval of the plans by the Board.

The Board adopted the revised NSP 2021 and Capital Plan 2021 for submission to the Minister for Health in line with the Health Act 2004 (as amended) (**Decision no. 150121/01**).

3. Update on COVID-19

The Board considered the briefing note on the Current status and measures to manage COVID-19 Hospitalisations which had been circulated by the CEO prior to the meeting.

The CEO informed the Board that since Christmas there has been a serious deterioration in the trends for COVID-19 in the community and this is having a significant impact on hospital services. He said that while Acute sites are coping, with beds still available in both critical care and in general admission he remains concerned about the impact of projected increases in COVID-19 admissions, coupled with additional winter pressures normally experienced at this time of year. The CEO highlighted the unprecedented absenteeism due to staff cocooning, illness with COVID-19 and isolation due to close contact status with 4,382 staff currently out in the acute sector, which is an additional challenge in delivering unscheduled care services.

He confirmed the situation is being monitored constantly and appropriate actions are being taken to manage the situation such as in order to deliver on the care required, focus has to be put on unscheduled, urgent and time-sensitive care. The Board noted the reasons for the decision to suspend non-urgent care, as communicated to the hospital system by the Chief Clinical Officer and welcomed the fact that guidance on clinical prioritisation is in place to be followed across all sectors relating to day case, in-patient and outpatient treatments/ procedures.

Additional capacity from the private sector will be utilised under a new agreement. The CEO confirmed 14 of the private hospitals have signed the Safety Net Agreement 2 and two more are due to sign. A number of private hospitals are already taking patients from public hospitals this week and beds are available under the arrangement with 16 hospitals.

The CEO advised critical care is in surge and briefed the Board on the surge plans that have been developed by all sites focusing on identifying infrastructure, equipment and staff to provide for a total of 350 critical care beds, with an additional 45 private sector ICU beds. Staff have undergone additional training and surge beds have been opened with staff redeployed from other services that have been stood down. While commending the response to the pandemic situation, the Board discussed the risks, the impact the pandemic will have on the delivery of non COVID services and the recovery challenges

for the health system when the surge subsides noting it will be difficult and having effective primary and community care settings will be crucial.

In response to Board members questions regarding the increasing number of outbreaks in nursing homes, the COO confirmed the operational services are in close contact with all nursing homes and noted they are due to meet with HIQA to discuss this.

Board members discussed the COVID-19 vaccination programme including the need for clear strong communications, potential changes to the time period between vaccination doses, vaccine surveillance, the vaccine prioritisation list, and the role of the Board in supporting this. The CEO highlighted the phenomenal effort of the vaccine rollout, noting 77,000 people have been vaccinated so far including 69,000 healthcare workers across the system. In relation to Board concerns regarding strong communication the CEO advised a joint working group between the HSE and the DoH is in place to improve communication regarding the Vaccine Roll out Programme. The CCO informed the Board NIAC will continuously review the vaccine prioritisation list.

Following questions on the testing and tracing system capacity to test close contacts, the CEO advised the current number of cases is still too high making it impossible to test close contacts but that the system continues to test a specific cohort of close contacts in certain demographics and as cases decrease they will continue to work on testing all close contacts.

Board members discussed the importance of ICU staff and consultants having satisfactory guidelines available in relation to the issue of decision making on the allocation of scarce resources such as ICU beds and oxygen etc and the need to provide more specific guidance if requested. Professor Deirdre Madden informed the Board she had contacted Dr Siobhan Ní Bhriain for an update on the Ethical Framework for Decision Making in a Pandemic published by the Department of Health to support policy makers, planners and clinicians. She confirmed that the guidance issued to the system last July had not changed.

Board members noted the ethical considerations in the paper must be aligned with policy and should be clinically justified, transparent and fair. The Board requested the CCO to write to the National Clinical Advisor in acute hospitals to establish if the ethical framework developed and distributed remains of assistance or if a review is required.

3. AOB

The Chairperson thanked all in attendance for their contributions and robust discussions.

The meeting concluded at 13.30

Signed: Ciarán Devane,

Ciarán Devane

Chairperson

Date: 29th January 2021