

Minutes of the HSE Directorate Meeting
held on
Tuesday 14th and Tuesday 21st February, 2017

Directorate Members Present: T. O'Brien (Chairman), S. Mulvany, A. O'Connor, J. Hennessy, P. Healy, L. Woods, S. O'Keeffe* and P. Crowley

Members of Leadership Team present: J. Carolan, P. Connors, R. Mannion, P. Lynch, R. Corbridge**.#
 J. Coffey**, M. Flynn, Á. Carroll** and D. McCallion

Joined part of the meeting by teleconference

Apologies: *14th February 2017: J. Ryan and S. O'Keeffe
 **21st February 2017: J. Coffey, R. Corbridge, Á. Carroll

In attendance J. O'Sullivan and D. Purcell (Secretary)
 S. Bushnell (14th February 2017 only)

Joined the Meeting: 14th February 2017
 M. Queally (Chief Officer), M. Day (Hospital Group CEO), J. Curran (HBS), S. Flanagan (Primary Care), E. Hardiman, J. Pollock (Children's Hospital Group) and H. Byrne (Acute Hospitals Division).
 21st February 2017 – N. Gogarty (HR) and C. Morgan (Social Care)

Time & Location: Boardroom, 3rd Floor, HSE Offices, Civic Centre, Bray, Co. Wicklow
 Indigo Meeting Room, Dr. Steevens' Hospital, Dublin 8 at 10am

Items are presented here in the order in which they were discussed and are numbered according to the order they appeared on the agenda.

Item	Discussion / Comments	Action
1	Directorate Members' Discussion	
	A number of topical issues within Divisions were discussed including the publication of the Devine and Resilience Reports on Foster Care in the South East which is being managed by C. Morgan, Head of Operations, Disability Services and issues regarding the National Counselling Service. The Directorate noted that a letter of apology had issued to M. McCabe.	
2	Reports form Directorate Committees	
	2.1 Audit Committee - Annual Report of the Audit Committee 2016 The Annual Report of the Audit Committee 2016 circulated prior to the meeting was reviewed. The report provided a summary of the principal advice and activities of the Committee during the year. The focus of the Committee on the preparation of the Annual Financial Statements 2015 and measures to strengthen and improve control issues and stronger internal financial controls was welcomed. Following consideration the report was welcomed and noted. <u>Action agreed:</u> Chair of Audit Committee to be invited to attend future meeting.	
3	Approvals in accordance with the reserved functions of the Directorate	
	Directorate Committee Membership 3.1 Audit Committee The nomination of R. George as an external member of the Audit Committee was proposed by A. O'Connor, seconded by L. Woods and agreed. <i>Directorate Decision No.14.02(09)2017</i> 3.2 Risk Committee The reappointment of M. Murphy, S. Kelly and P. Kirwan to the Risk Committee was proposed by P. Crowley, seconded by L. Woods and agreed. <i>Directorate Decision No.14.02(10)2017</i>	

Health Business Services

J. Carolan joined the meeting for consideration of this item and briefed the Directorate on the capital approval and property transaction papers circulated prior to the meeting. These were considered as follows:

3.3 Capital Approvals

3.3.1 Ward Block and Palliative Care Development University Hospital Waterford

J. Carolan confirmed that the expenditure for this project is within the Capital Plan 2017-2021. Approval to award the public works contract for the construction of a ward block and Palliative Care (Hospice) development at University Hospital Waterford to the preferred tenderer was proposed by P. Crowley, seconded by L. Woods and agreed. *Directorate Decision No.14.02(11)2017*

3.3.2 Construction of the National Forensic Mental Health Services Hospital (NFMHS) at St. Ita's Hospital Campus, Portrane, Co. Dublin

The Directorate approved the awarding of a public works contract for the NFMHS Hospital to preferred tenderer on 13th September 2016 on the basis that the first variation to the contract would be the omission of the ICRU from the tendered bid.

J. Carolan reported that the omission of the ICRU would result in less of a saving than had been expected and that the credit offered on the ICRU building does not represent value for money. Furthermore, should the ICRU building be required to be constructed at a later date, a significant premium will be required to deliver same, over and above the returned tender figure. As a result of current market conditions, there would be significant increase in inflation costs, and considerable programme implications and sequencing costs.

Further consideration regarding the award of the public works contract to the preferred tenderer for the construction of Phase 1 and Phase 2 of the NFMHS Hospital was deferred to Item 8.5: Mid-Term Capital Review below.

3.4 Property Transactions

3.4.1 Transfer of low and medium support HSE Mental Health properties to Approved Housing Bodies

A. O'Connor reported that in line with the Government's National Housing Strategy for People with a Disability (2011) the a pilot project was set up to examine the transfer of the freehold title of existing low and medium support HSE community residences to the management of Approved Housing Bodies, to facilitate the effective transitioning of people from HSE mental health facilities to appropriate community settings. The pilot project was run in Laois/Offaly a review of which provided a basis to proceed with the national roll-out.

Action agreed:

- J. Carolan to review and amend the conditions of the freehold transfer to ensure the use of the properties to accommodate people with mental health issues to be considered by the Directorate at the resumed meeting on the 21st February 2017.

3.4.2 Kenmare Health Centre, Henry Street, Kenmare, Co. Kerry

The transaction to lease of Kenmare Health Centre, Henry Street, Kenmare, Co. Kerry to Kenmare Family Resource Centre Ltd. for ten years at a nominal rate was reviewed.

Action agreed:

- J. Carolan to provide an amended paper for consideration by the

	<p>Directorate at the resumed meeting on the 21st February 2017 clarifying the position in relation to Tusla's funding arrangement with the Kenmare Family Resource Centre Ltd.</p> <p>3.5 National Integrated Medical Imaging System (NIMIS) Contract Change S. Mulvany spoke to the paper circulated prior to the meeting setting out the change required to the NIMIS contract with McKesson Ireland arising from plans for its parent company, McKesson Corporation, to merge with another company and transfer a number of its subsidiaries to the new company being formed. It was noted that there is no public procurement issue with this contract novation as no new business is being placed in the market and the HSE's position is appropriately protected in the upcoming changes.</p> <p>Following consideration the paper was noted and no issues raised.</p>	J. Carolan Agenda Item 21/02/17
Leadership Team Members Joined the Meeting		
4	Welcome and Introduction from Chief Officer, CHO 6, and Chair and CEO, Ireland East Hospitals Group	
	<p>M. Queally, Chief Officer, CHO 6, members of the CHO 6 management team and M. Day, CEO Ireland East Hospital Group joined the meeting</p> <p>The Chief Officer and Hospital Group CEO made presentations setting out the progress to date to establish the Hospitals Group and Community Healthcare Organisation and on all operational aspects of acute and non-acute health services in their areas of responsibility.</p>	
5	Minutes of Directorate Meetings on the 17th and 30th January 2017	
	<p>The minutes of the Directorate meetings on the 17th and 30th January 2017 were approved. The Secretary reported the drafting changes which had been notified to him in relation to items 7.2 and 11.2. These would be included in the final version.</p> <p><u>Matters arising</u></p> <ul style="list-style-type: none"> Item 7.3: Human Resources – It was noted that the appointment of the key additional posts is progressing, but that the HR post would be established on a temporary basis pending final approvals. Any other matters arising were dealt with under relevant agenda items. 	
6	Chairman's Remarks	
	<p>The Director General briefed the Leadership Team on the items considered by the Directorate at its meeting, on two matters:</p> <ul style="list-style-type: none"> Issues regarding the National Counselling Service and the letter of apology which had issued to M. McCabe. The proposal to establish a National Leadership Council circulated prior to the meeting. <p><u>Actions agreed:</u></p> <ul style="list-style-type: none"> Establishment of a National Leadership Council to be progressed and consideration to be given to collective meetings between the Leadership Team, Hospital Group CEOs and CHO Chief Officers Consultative Forum to discuss comments on the proposal and issues arising. 	Secretary Secretary
7	Ministerial Correspondence – for Noting	
	<p>7.1 Waiting Lists Initiatives – Letter dated 23rd January 2017 The letter from the Minister in relation to waiting lists initiatives dated the 23rd January 2017, circulated prior to the meeting was noted. A reply to this letter is currently being drafted and will be circulated when issued.</p> <p>7.2 National Service Plan 2017 - Letters dated 31st January 2017 The letters to the Minister and Secretary General regarding the HSE National Service Plan 2017 circulated prior to the meeting was noted. It was also noted that Operational Plans are due to be published on the 20th February 2017.</p>	

8	Performance Reporting	
	<p>8.1 Performance and Escalation Report December 2016 P. Lynch presented the December 2016 Performance Report. He outlined the key performance issues in month and the service issues that have been or remain in black or red escalation following the National Performance Oversight group (NPOG) meetings with National Directors. The actions taken and the progress made to improve performance in the areas in escalation were reviewed in detail.</p> <p>8.2 Finance S. Mulvany reported on the financial performance as set out in the Performance Report and in the Finance summary report circulated prior to the meeting. It was noted that at the 31st December 2016, there was a deficit of 0.09% (€11.9m), primarily due to overspends in Acute Hospitals, Overseas Treatment and pensions which were offset by surpluses in all other divisions. The definitive amount of any 2017 first charge will be known when the HSE Annual Financial Statements are audited by the C&AG and therefore this issue will be reviewed again in late April with a view to determining any implications at that stage for the 2017 HSE National Service Plan (NSP).</p> <p>The key focus and key messages for 2017 in the Finance summary report were also noted.</p> <p><u>Action agreed:</u></p> <ul style="list-style-type: none"> • Following consideration, the Performance Report December 2016 was approved. <p>8.3 Human Resources R. Mannion reported on the workforce position as set out in the Performance Report. The increase in wtes of 0.31% from the previous month was noted.</p> <p>8.3.1 Employment Monitoring Report & Health Service Personnel Census Report to be included in HR monthly report to the Leadership Team.</p> <p>8.3.2 Public Service Pay Commission</p> <p>8.3.3 Update on Industrial Relations Matters R. Mannion provided an update on the ongoing Industrial Relations matters, mentioning in particular; the job evaluation scheme for support staff; financial impact of the Lansdowne Road Agreement provisions not being fully funded.</p> <p><u>Actions agreed:</u></p> <ul style="list-style-type: none"> • Matters to be considered further by the ER/IR Engagements Committee of the Directorate being arranged for the 16th February 2017 and at the resumed Directorate meeting on the 21st February 2017. <p>8.3.4 Reference Group to Support National Industrial Relations Related Processes The proposal regarding the establishment of an ER/IR Committee of the Directorate tabled at the meeting was considered in detail.</p> <p><u>Action agreed:</u> The draft Charter for approval to be circulated for consideration at the resumed Directorate meeting on the 21st February 2017.</p> <p>8.4 DoH Management Board/HSE Leadership Team Performance Review Meeting 16th February 2017 The actions arising from the DoH MB/HSE Leadership Team Performance Review meeting on the 19th January 2017 and draft agenda for the meeting</p>	<p>ER/IR Committee Agenda 16/02/17</p> <p>Agenda Item 21/02/17</p> <p>Agenda Item 21/02/17</p>

	<p>on the 16th February 2017, circulated prior to the meeting were reviewed in detail.</p> <p>It was noted that the DoH/HSE Programme for Health Service Improvement workshop scheduled for the 23rd February 2017 is being rescheduled.</p> <p><u>Action agreed:</u></p> <ul style="list-style-type: none"> J. Ryan to engage with the DoH to reschedule the workshop. <p>8.5 Mid-Term Review of Capital Plan</p> <p>J. Curran joined the meeting for consideration of this item. J. Carolan presented the report circulated prior to the meeting on the capital envelope that the HSE requires in order to deliver both the Government and its own priority projects which will require a significant increase in capital over the period of the Capital Plan 2017-2021 which was reviewed. She provided an update on the process to review the Capital Plan which is ongoing with the DoH; including the detailed information sought by DPER and upcoming meeting with the DoH. J. Carolan to keep the Directorate updated on progress.</p> <p>Resumed consideration of NFMHS – ICRU</p> <p>It was noted that the majority of costs associated with the project will occur in 2019.</p> <p><u>Action agreed:</u></p> <ul style="list-style-type: none"> Following consideration, the Directorate was in favour of proceeding with the ICRU. HBS to pursue sanction with DoH 	<p>J. Ryan</p> <p>J. Carolan</p>
9	Primary Care – Drugs Committee Recommendations	
	<p>S. Flanagan joined the meeting for consideration of this item. J. Hennessy and S. Flanagan presented the recommendations of the Drugs Committee in relation to the following four drugs. The Leadership Team considered the recommendations as follows:</p> <p>Resprezza – The Leadership Team accepted the Drugs Committee’s recommendation not to reimburse Resprezza as the evidence of a clinically meaningful benefit is not sufficiently robust to support reimbursement.</p> <p>Orkambi – It was noted that the negotiation process with Vertex had concluded and that the terms now offered were a significant improvement on the 2016 offering. The Leadership Team was conscious of the potential clinical benefits for certain Cystic Fibrosis patients, and of the vulnerability of both the patients concerned and their families. Following detailed discussion and consideration of the issue, the decision was in accordance with the report of the Drugs Committee. The Leadership Team noted that the Drugs Committee has never made a recommendation in favour of reimbursement at the combined levels of clinical evidence, cost effectiveness and budget impact presented for these Cystic Fibrosis medicines/indications.</p> <p><u>Action agreed:</u></p> <p>J. Hennessy to advise the DoH of the position as presented by the Drugs Committee.</p> <p>Brivaracetam and Daclizumab – The Leadership Team accepted the Drugs Committee’s recommendations to reimburse both of these medicines.</p>	<p>J. Hennessy</p>
10	Acute Hospitals – Children’s Hospital Definitive Business Case	
	<p>E. Hardiman, J. Pollock and H. Byrne joined the meeting and R. Corbridge joined by teleconference for consideration of this item.</p> <p>L. Woods updated the Leadership Team on the current position in relation to the tenders for construction of the NCH which were higher than expected. H. Byrne presented the briefing paper summarising the findings and observations of the HSE Review Group as they pertain to the updated Definitive Business Case of the 31st January 2017 which reflects the cost of the new Children’s Hospital</p>	

	<p>subsequent to a tendering and review process.</p> <p>E. Hardiman acknowledged the input provided by the Acute Hospitals Division support team. J. Pollock described the design process which included input from HBS Estates which was welcome.</p> <p>J. Curran and R. Corbridge spoke to the National Electronic Health Records (EHR) project and the new National Children’s Hospital. It was noted that the National EHR Business Case is currently with the DoH and is expected to go to DPER this week.</p> <p>HSE to agree to engage with the DoH to address the concerns that are outside the control of the HSE including; remaining aspects of the Business Case and Managed Equipment Services costs and cost of new Model of Care; as well as full adoption of HSE strategies and national frameworks e.g. finance reform, ICT and HBS.</p> <p><u>Actions agreed:</u></p> <ul style="list-style-type: none"> • L. Woods to consider decision making process once project is approved by Government. • The Leadership Team accepted the recommendations outlined in the briefing note subject to the clarifications above. • Approval of the updated Definitive Business Case for the new National Children’s Hospital was proposed by L. Woods, seconded by P. Crowley and agreed. Directorate Decision No.14.02(12)2017 	<p>L. Woods</p>
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The meeting was adjourned at 2.45pm on the 14th February 2017 and resumed at 10am on the 21st February 2017

Site Visits

National Directors undertook a number of site visits to community and acute hospital locations

Resumed Consideration of Items from Directorate Meeting on 14 th February 2017		
	<p>3.4 Property Transactions</p> <p>3.4.1 Transfer of low and medium support HSE Mental Health properties to Approved Housing Bodies</p> <p>J. Carolan presented the amended paper from that considered by the Directorate on the 14th February 2017. It was clarified that under the Capital Assistance Scheme, a 30 year lien is placed on the property by the Housing Agency. The Housing Agency are agreeable that the wording of this clause, 5(a)(i), can be amended to ensure that the properties are used to accommodate people with mental health difficulties.</p> <p>Approval to engage with the relevant Approved Housing Bodies to arrange transfer of the HSE’s low and medium support HSE community residences under the terms of the National Housing Strategy for People with a Disability was proposed by A. O’Connor seconded by L. Woods and agreed. Directorate Decision No.21.02(13)2017</p> <p>3.4.2 Kenmare Health Centre, Henry Street, Kenmare, Co. Kerry</p> <p>J. Carolan spoke to the amended paper circulated prior to the meeting regarding the transaction to lease of Kenmare Health Centre, Henry Street, Kenmare, Co. Kerry to Kenmare Family Resource Centre Ltd. for ten years at a nominal rate which clarified the position in relation to the role of Tusla in relation to their funding of the service under and SLA.</p> <p>Approval to grant a ten year lease of Kenmare Health Centre, Henry Street, Kenmare, Co. Kerry to Kenmare Family Resource Centre Ltd. at a nominal rate was proposed by P. Healy seconded by J.</p>	

	<p style="text-align: center;">Hennessy and agreed. <i>Directorate Decision No.21.02(14)2017</i></p> <p>8.3.1 Employment Monitoring Report & Health Service Personnel Census R. Mannion presented the key messages from the January 2017 workforce report tabled at the meeting which was noted.</p> <p>8.3.4 Reference Group to Support National Industrial Relations Related Processes The terms of reference for the ER/IR Committee of the Directorate tabled at the meeting was reviewed.</p> <p><u>Action agreed:</u></p> <ul style="list-style-type: none"> Leadership Team to review the terms of reference and provide feedback directly to R. Mannion prior to adoption at a special Leadership Team meeting to be arranged. <p>8.5 Mid-Term Review of Capital Plan J. Carolan presented the Mid-Term Capital Review summary table circulated at the meeting and updated the meeting on the engagement with the DoH on the Review and the submission to DPER which is due shortly. She highlighted the deficit in the Capital funding requirements for 2017-2027 and the effect of the commitment to NCH funding on other priority projects/requirements.</p> <p>It was noted that decisions on the Capital Plan will be made when the Capital envelope is confirmed.</p>	National Directors
12	Key Strategic Priorities	
	<p>Programme for Health Service Improvement</p> <p>12.1 Report from Leadership Team Reform Meeting 31st January 2017 J. Ryan provided an update on the Action Plan Workshop on the 31st January 2017 and the ongoing engagement with the DoH in relation to rescheduling of the joint Programme for Health Service Improvement workshop.</p> <p>12.2 Response re Letter of Approval for Service Plan 2017 J. Ryan presented the paper circulated prior to the meeting in response to the proposal by the Minister in the NSP 2017 approval letter that where the HSE has discretion over expenditure decisions, it considers delaying the initiation of such expenditure until confidence exists that savings targets will be achieved, while delivering on the service levels committed to in the NSP 2017, particularly in relation to the Programme for Health Service Improvement. The paper highlighting the progress of the Programme for Health Service Improvement so far and providing an analysis of the risks posted in pausing the programme was considered in detail.</p> <p><u>Action agreed:</u></p> <ul style="list-style-type: none"> The Leadership Team supported the recommendation outlined in the report to continue to fund the programme, but a 5% reduction in the funding provided for additional staff for the Programme to be examined. <p>Health and Wellbeing</p> <p>12.3 Gap Analysis - Shift to Primary Care S. O'Keeffe spoke to the draft report tabled at the meeting.</p> <p><u>Action agreed:</u></p> <ul style="list-style-type: none"> Feedback to be provided directly to S. O'Keeffe by the 28th February 2017. <p>12.4 Making Every Contact Count – A Health Behaviour Change Framework and Implementation Plan for Health Professionals in the Irish Health Service S. O'Keeffe spoke to the briefing note on the Making Every Contact Count Framework which aims to capitalise on the opportunities that occur for</p>	J. Ryan National Directors

	<p>every health professional to support patients to make a lifestyle behaviour change.</p> <p><u>Action agreed:</u></p> <ul style="list-style-type: none"> The Framework was endorsed by the Leadership Team as part of the final sign off process and prior to publication of the document. <p>12.5 Briefing on Management response to CPE Outbreaks and proposed approach Consideration of this item was deferred and a special meeting will be arranged to consider it, if required.</p> <p>Quality Assurance and Verification Division</p> <p>12.6 Corporate Plan 2018-2020 and KPI Governance P. Lynch presented the paper circulated prior to the meeting setting out options and proposals in relation to the development of the HSE Corporate Plan 2018-2020 and the implementation of governance arrangements to; oversee the KPI process and govern the interaction with the DOH in relation to the Review of the KPI suite scheduled for 2017.</p> <p><u>Actions agreed:</u></p> <ul style="list-style-type: none"> Corporate Plan 2018-2020 The Leadership endorsed the proposal to request an extension to the timeframe for the current plan or for completing a new Corporate Plan, in the context of the need to reflect the work of the Committee on the Future of Healthcare. KPI Governance The proposal to establish a KPI Governance group was agreed, subject to consultation with the Divisional Planning and Performance Leads, for Divisional oversight. <p>Human Resources</p> <p>12.7 Workplace Relations Unit N. Gogarty joined the meeting for consideration of this item. He spoke to the presentation circulated prior to the meeting setting out the context/background and work to date to establish the Workplace Relations Unit.</p> <p><u>Action agreed:</u></p> <ul style="list-style-type: none"> Sub-group of the Leadership Team established to review and finalise the proposal and report to the Directorate meeting in March 2017. Membership of the sub-group to comprise J. Carolan, R. Mannion, J. Ryan, P. Healy and P. Lynch. 	<p>P. Lynch</p> <p>R. Mannion</p> <p>R. Mannion/ J. Carolan J. Ryan/ P. Healy/ P. Lynch</p>
13	<p>Quality, Safety and Risk Matters</p>	
	<p>Divisional Risk Registers</p> <p>13.1 Reporting Schedule 2017 The schedule for Divisional Risk Registers to be reviewed at Directorate meetings in 2017 was noted.</p> <p>Quality Assurance & Verification Division</p> <p>13.2 Confidential Recipient Annual Report 2016 The Confidential Recipient Annual Report 2016 circulated prior to the meeting was reviewed. It was noted that while the number of concerns responded to by the Confidential Recipient had increased in 2016, the number of concerns relating to Safeguarding had decreased.</p> <p>Regulators</p> <p>13.3 HIQA Portlaoise Report - Implementation Plan Progress Report The Implementation Plan Progress Reports up to 31st January 2017 were noted and approved for submission to the DoH oversight group. No issues were escalated for Directorate consideration.</p>	

	<p>13.4 HIQA 2017 Business Objectives and Findings from Monitoring Activities P. Lynch presented the 2017 Business Objectives and Findings from Monitoring Activities circulated by HIQA at a meeting with the Director General and National Directors for Quality Assurance and Verification and Social Care on the 16th January 2017, which were noted.</p> <p>13.5 National Disability Authority - Employment of People with Disabilities - Letters dated 20th and 23rd January 2017 The letters from the National Disability Authority and response from R. Mannion, regarding the employment of people with disabilities, circulated prior to the meeting, were noted.</p>	
14	Executive Accountability - Significant Operational Issues by Division	
	<p>Quality Improvement Division</p> <p>14.1 Operation of Protection of Life During Pregnancy Legislation P. Crowley presented the report circulated prior to the meeting on the operation of the Protection of Life During Pregnancy legislation since its commencement in January 2014. The report set out the procedures in place, issues arising and risks arising around implementation of the legislation. The recommendations as set out in the report were considered in detail.</p> <p><u>Actions agreed:</u> The recommendations set out in the report were agreed, subject to;</p> <ul style="list-style-type: none"> • QID providing input and support for information sessions being delivered in each Division. • Report being provided by L. Woods on the operational issues arising from the implementation of the legislation at the June Directorate meeting. <p>Primary Care</p> <p>14.1 Discretionary Medical Cards J. Hennessy presented the second report of the Clinical Advisory Group in relation to the Group's recommendation to review Discretionary Medical Cards.</p> <p><u>Action agreed:</u> The recommendation from the Clinical Advisory Group was approved by the Leadership Team for implementation.</p>	<p>P. Crowley</p> <p>L. Woods Agenda Item 13/06/17</p> <p>J. Hennessy</p>
11	Items Previously Circulated for Noting	
	<p>The following correspondence previously circulated was noted:</p> <p>11.1 Committee on the Future of Healthcare - Second Interim Report</p> <p>11.2 Memo from Director General re Launch of Integrated Risk Management Policy</p> <p>11.2 Letter from CFO to DoH regarding Pay Increases within the Lansdowne Road Agreement</p> <p>11.3 Office of the CIO Report on Maternity Digital Challenge</p>	
15	Any Other Business	
	<ul style="list-style-type: none"> • Assisted Decision Making P. Crowley provided an update on the meeting regarding Assisted Decision Making (ADM). He emphasised the urgent need to establish the National ADM Unit. • Publication of Devine and Resilience Reports P. Healy provided an overview of the issues presented by publication of the Devine and Resilience Reports. C. Morgan presented the high-level publication plan. <p><u>Action agreed:</u></p>	

	<ul style="list-style-type: none">• The Leadership Team supported and endorsed the publication of the Devine & Associates and Resilience Ireland Ltd Reports.	
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The meeting concluded at 12.30pm

Signed:

Date:

Tony O'Brien
Chairman