



28th June 2002

Mr Gerard Barry
Chief Executive Officer
Health Service Employers Agency
63-64 Adelaide Road
Dublin 4



**DEPARTMENT
OF HEALTH AND
CHILDREN**
AN ROINN
SLÁINTE AGUS LEANAÍ

Clinical Indemnity Scheme

Quality and Fairness
A Health System for You

Dear Mr Barry,

I am directed by the Minister for Health and Children to refer to previous correspondence concerning the establishment of the Clinical Negligence Scheme. At its meeting held on 25 June the Government gave formal approval to the establishment of the Scheme. It also authorised the Minister for Health and Children and the State Claims Agency to take such steps as are necessary to establish the Scheme.

Commencement Date

The Scheme will come into effect at midnight on Sunday 30 June for those risks covered by the Scheme. On that date the cover provided by the Medical Indemnity Scheme will cease. All posts presently covered by the Medical Indemnity Scheme will be covered by the Clinical Indemnity Scheme from 1 July. Cover for clinical risks in the public liability policies of health boards, acute voluntary hospitals and other agencies listed in Appendix A to this circular will cease on 30 June. From 1 July agencies covered by the Scheme will be carrying these risks themselves. Claims arising from incidents which occur from that date will be covered by the Scheme and managed by the State Claims Agency.

Consultants

As notified to on in this Department's circular of 31 May agreement has yet to be reached with the organisations representing consultants on their inclusion in the Scheme. The normal arrangements for reimbursing consultants' subscriptions to the medical defence organisations are to remain in place until further notice.

Public Liability Policies

Discussion have almost been completed with the commercial insurers providing public liability cover to health service agencies on the basis on which the Clinical Indemnity Scheme will complement the cover provided by these companies. This process is necessary to ensure that that there are no gaps in coverage between the Scheme and the policies issued by

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the companies to their clients. It has been agreed that the Scheme will cover the clinical risks of health boards and acute voluntary hospitals with immediate effect. An agreement on an exclusion clause to be inserted in policies is in the process of being agreed with the insurers and will be communicated to agencies early next week. Discussions will continue with the insurance companies and agencies in the non-acute sector on the basis on which they will be covered by the Scheme. In the interim they will continue to be covered by their existing policies. 1 October has been set as a target date for the completion of the process of identifying the clinical risks in the non-acute sector that will be covered by the Scheme. Any queries from agencies in this sector should be directed to insurers through brokers.

Notification of Incidents

Agencies are reminded that the Medical Indemnity Scheme and their public liability policies have extended reporting periods that allow them 30 days to report incidents that have occurred before 30 June. Steps should be taken by all agencies to ensure that these provisions are adhered to. Particular care should be taken to ensure that arrangements are in place for the reporting of incidents and claims during the holiday period if the staff who normally undertake these duties are on leave.

Incidents that occur after 1 July should be reported to the State Claims Agency as outlined below:

Post: **Ms Mairead Hughes
Operations Manager
State Claims Agency
Treasury Building
Grand Canal Street
Dublin 2**

Fax: **01 661 8250**

E-mail: **info@stateclaims.ie**

Helpline

Negotiations have almost been completed on arrangements for the provision of a 24-hour helpline for agencies and staff covered by the Scheme. Details of this service will be communicated to you early next week.

IT Survey

The previous circular issued on the Scheme on 31 May requested agencies to complete and return a brief survey on the specification of PCs which are to be used to access the clinical incident/claims reporting software system. The response to this request has been poor. This information is critical to the planning for the implementation of this system. I enclose a

further copy of the survey and would request that every effort be made to have it completed and returned as soon as possible.

Thank you again for your help and co-operation on this project.

Yours sincerely,

Brendan Phelan

Brendan Phelan
Medical Indemnity Project Office

Appendix A

Adelaide and Meath incorporating the	St Michael's Hospital, Dun Laoghaire
National Children's Hospital (AMNCH)	St Vincent's Hospital (Fairview)
Coombe Women's Hospital	St Vincent's University Hospital (Elm Park)
Drug Treatment Centre Board	South Infirmary and Victoria Hospital
Dublin Dental Hospital	The Children's Hospital
Dublin Skin & Cancer Hospital	The Royal Hospital Donnybrook
Mater Misericordiae Hospital	University Dental School & Hospital Cork
Beaumont Hospital	Northern Area Health Board
Irish Blood Transfusion Service	East Coast Area Health Board
Mercy Hospital	South Western Area Health Board
National Maternity Hospital	Midland Health Board
National Rehabilitation Board	Mid Western Health Board
Our Lady's Hospice	North Eastern Health Board
Our Lady's Hospital for Sick Children	South Eastern Health Board
Our Lady of Lourdes Hospital (Drogheda)	Southern Health Board
National Rehabilitation Hospital	Western Health Board
Paemount Hospital	Health Research Board
Portiuncula Hospital	National Breast Screening Programme
Rotunda Hospital	National Disease Surveillance Centre
Royal Victoria Eye & Ear Hospital	Cappagh National Orthopaedic Hospital
St James's Hospital	
St John's Hospital, Limerick	
St Luke's & St Anne's Hospital	

IT Survey

As we are approaching the point of selection of the incident/claims reporting system it is important that we now obtain a detailed inventory of PCs, Printers and Internet connectivity details for each of the locations designated in your organisation to provide user access to the new CIS. Specifically I would appreciate it if you could indicate, by physical location:

- The minimum PC specification available at each planned user location;
- The number of PCs which will be accessing the system;
- The printer facilities available (including printer type);
- The internet connectivity available at the user sites (whether dial-up or permanently on-line, together with the link speed available).

The PC specification should indicate the processor type, clock speed, available memory and available free disk space together with the operating system version release number.

This information is essential to determine whether the existing infrastructure is in place in all areas of your organisation which plan to access and use the incident/claims reporting system.