

**MINUTES OF THE BOARD MEETING OF THE
HEALTH INFORMATION AND QUALITY AUTHORITY**

6 April, 11am
Video conference

Present:

Name	Details	Initials
Pat O'Mahony	Chairperson	POM
Paula Kilbane	Board Member	PK
Stephen O'Flaherty	Board Member	SOF
Lynsey Perdisatt	Board Member	LP
Michael Rigby	Board Member	MJR
Tony McNamara	Board Member	TMcN
Jim Kiely	Board Member	JK
Molly Buckley	Board Member	MB
Martin Sisk	Board Member	MS
Caroline Spillane	Board Member	CS
Bernadette Costello	Board Member	BC

In Attendance:

Phelim Quinn	CEO	PQ
Kathleen Lombard	Board Secretary and Chief Risk Officer	KL
Mary Dunnion	Chief Inspector and Director of regulation	MD
Susan Cliffe	Deputy Chief Inspector – older persons	SC
Finbarr Colfer	Deputy Chief Inspector – disability sector	FC

Apologies:

Enda Connolly	Board Member	EC
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1. Welcome and Quorum

The Chairperson thanked the Board members for making themselves available at short notice, which he explained was for the purpose of receiving a full briefing from the Executive management on the emerging trends in relation to COVID-19 cases in nursing homes and designated centres for people with disabilities. It was noted that a quorum was present and the Board meeting was duly convened.

2. Conflict of Interest

No conflicts were declared.

3. Long term residential care sector and COVID-19

PQ, MD, SC and FC joined the meeting for this item. PQ thanked the Board for coming together so that they could be briefed in full on the emerging situation relating to long term residential care.

PQ explained that he represents HIQA on the National Public Health Emergency Team (NPHET) and MD and SC participate on the subgroup for vulnerable people. From the outset HIQA has provided information about services for vulnerable people, including specific inherent risks to ensure that accurate intelligence is provided directly to the relevant forum to assist with the national response.

PQ explained that shortly after the start of the outbreak, HIQA identified specific weaknesses in the system where some nursing homes were struggling to maintain safe services in the context of COVID-19. It became apparent during the last week that the number of centres with suspected or confirmed cases had increased.

MD outlined key issues within the sector and explained that a large volume of nursing home provision is provided by private providers. While HSE services are supported by the HSE, the private sector is at a remove from the HSE and therefore there had been limited initial alignment with the national management plan. MD has acted as a conduit between private nursing home providers and key officials within the HSE.

SC, Deputy Chief Inspector for Older Person's Services, set out the main challenges for nursing homes including lack of access to personal protective equipment (PPE), lack of access to rapid testing for staff working in the nursing homes and lack of access to prompt test results. SC also explained that the staff profile of those working in nursing homes is a factor in that many live in shared accommodation, some are sourced through employment agencies and some may work in a number of different facilities. These factors impact on staff continuity and reliability and on the safety of the residents.

PQ advised that these issues have been brought to the attention of NPHET and has prompted the range of measures announced by the Government over the previous weekend. He explained that since the outbreak, MD and her team have developed a daily monitoring assessment which is currently providing intelligence on COVID-19 and associated risks to the DOH, NPHET and HSE. In addition, MD has initiated an infection prevention and control hub to assist providers in accessing support and guidance on infection control from the HSE.

In response to the Board's discussion and queries, MD clarified that;

- she had spoken with the HSE's National Director of Quality Assurance last week in relation to logistics for PPE for nursing homes
- the composition of the COVID-19 teams include senior nurses, care staff and public health support
- the emerging trend reflects the experience in nursing homes across Europe
- the only public health guidance that is recommended to providers is the guidance published by the HSE and the establishment of the infection prevention and control hub is useful in this regard
- HIQA is registering additional beds in nursing homes to allow for hospitals transfers from the acute sector to long term residential services. However, centres have been advised that no new admissions can be accommodated in facilities that provide multiple shared occupancy spaces. Providers have sought confirmation of negative results for new patients transferring from hospital.
- It was also noted that;
 - there is over reliance on private nursing home provision without due regard for the capacity or capability of the sector to deal with a major outbreak of infection such as COVID-19
 - many of the contributing factors to the current situation had been previously escalated to the HSE and the DoH
 - issues relating to compliance with and relevance of regulations and the Health Act had been escalated previously.

It was suggested by the Board that;

- consideration be given to highlighting living arrangements for healthcare staff so that shared accommodation is avoided
- full support and contribution to the NPHET should be maintained
- consideration be given to communicating directly with the Minister (in addition to NPHET) regarding immediate requirements for nursing homes (PPE, staff testing and prompt results) in recognition of this sector being a front line service
- the fact that this is a statutorily notifiable disease places responsibility on the HSE and providers to respond and notify accordingly
- consideration to be given to greater communication efforts in relation to infection prevention guidance to anyone operating in the caring sectors and
- HIQA should consider seeking a greater public protection role when the outbreak recedes.

PQ advised that he and the other members of the team will consider the Board's suggestions.

FC, Deputy Chief Inspector of Disability services, provided an overview of the situation in centres for people with disabilities. He explained that there are instances of suspected and confirmed cases in these centres and provided the details of these to the Board. It was noted that the position is not as stark as in nursing homes and that this may be due to the move over the last number of years from congregated

settings to smaller, more social based centres. Again, these centres must notify HIQA of cases and HIQA will continue to monitor and inform NPHET accordingly.

The Chairperson thanked the Executive for their comprehensive update and for the email updates that are regularly provided by the CEO on the approach and actions being taken. The Board commended the Executive for the hard work and the efforts invested to mitigate the risks emerging from COVID-19 in the vulnerable sectors. The Board also commended the Executive's ongoing contribution to the national effort to deal with the crisis. While the approach and actions being taken have been previously endorsed by the Board, it was agreed that a motion would be drafted that would formally endorse the approach being taken by HIQA.


4. Any other Business

There being no further business, the Chairperson closed the meeting.

Signed



Pat O'Mahony
Chairperson



Kathleen Lombard
Board Secretary

Actions arising from the Board meeting on 6 April 2020

No	Action	Person Responsible	Timeframe
1	Consideration to be given to the Board's suggestions	PQ	immediate
2	Draft motion for Board's endorsement of the Executive's approach to Covid 19 outbreak in the social care sector	MD	immediate