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Subject: URGENT: Meeting Note from video conference on residential healthcare settings.
Date: Sunday 29 March 2020 16:23:35
Attachments: [Nursing Home meeting 13032020 minutes.docx](#)

David, Michael, Siobhan

Please see below from a meeting called this morning.

I have been asked to pull together a paper for NPHEM meeting on Tuesday.

I would be grateful for any information/considerations that you have in relation to the detail in the appendix of the minutes for as soon as possible.

Many thanks

Kathleen

Dr Kathleen Mac Lellan

Assistant Secretary, Social Care Division

An Roinn Sláinte

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----- Forwarded by Kathleen MacLellan/SLAINTE on 29/03/2020 16:20 -----

From: NPH ETCV/SLAINTE
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Cc: Kathleen MacLellan/SLAINTE@SLAINTE
Date: 29/03/2020 16:17
Subject: Meeting Note from video conference on residential healthcare settings.
Sent by: Rosarie Lynch

Hello all

Following on from the video conference this morning, please see attached meeting note.

Kind regards

Rosarie

This email address is for correspondence related to the National Public Health Emergency Team (NPHE) on COVID-19 (SARS-CoV-2)

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**COVID-19: Meeting to Discuss Nursing Home Issues
(via Video Conference)
Meeting Note**

Date and Time	Sunday 29 th March 2020 at 11 am
Location	Department of Health, Miesian Plaza, Dublin 2 [<i>by video conference</i>]
Chair	Dr Tony Holohan, Chief Medical Officer, DOH
In Attendance	Dr John Cuddihy, Acting Director, HSE HPSC Dr Ronan Glynn, Deputy Chief Medical Officer, DOH Dr Alan Smith, Deputy Chief Medical Officer, DOH Dr Kathleen Mac Lellan, Assistant Secretary, Social Care Division, DOH Dr Darina O'Flanagan, Public Health Adviser Mr Phelim Quinn, CEO, HIQA Mr Niall Redmond, Principal Officer, Social Care Division, DOH
Secretariat	Ms Rosarie Lynch and Ms Ruth McDonnell, NPSO, DOH

1. Welcome

The Chair welcomed the group and outlined that the purpose of the meeting was to discuss emerging public health data on cases and clusters and information on COVID-19. In particular, to consider disease progression in light of the emerging public health data for residential healthcare settings – for example, nursing homes, community hospitals and long-stay care facilities, including those for older people, disabilities and mental health.

2. Epidemiological Update

The group was updated on the latest figures from the HPSC of confirmed COVID-19 cases in residential healthcare settings in Ireland. It was noted that the number of clusters in these settings has increased. It was also noted that a proportion of the confirmed COVID-19 cases in the East of the country were patients in nursing homes and that there are also a number of confirmed outbreaks in nursing homes.

The group discussed the type of information that would be useful to further assess the evolving situation in residential healthcare settings, including, but not limited to, details of the:

- i. numbers of confirmed and suspected cases, and age profile
- ii. numbers of residents and staff in these centres as denominator
- iii. centre type(s) i.e. patient / client cohort served
- iv. access to infection control measures
- v. layout of centres, particularly in the context of infection control risks
- vi. governance and adherence to standards
- vii. number of COVID-19 related hospitalisations and mortality.

It was agreed that a framework of necessary information would be drafted. See appendix for outline as discussed at meeting.

Action: The HPSC is to provide additional information on confirmed COVID-19 cases in residential healthcare settings in Ireland.

Action: A framework of information on residential healthcare settings is to be finalised.



3. Discussion

In light of the epidemiological information available, it was agreed that more tailored, specific interventions were needed for residential healthcare settings.

The overarching public health consideration is the disease control to minimise spread of infection to patients, staff and the wider community.

The HPSC advised that in each area of the country, the HSE's Public Health Departments are co-ordinating a support team, which includes a Geriatrician, to support residential healthcare settings and nursing homes.

It was noted that there are differences in the size, layout and staffing of different residential healthcare settings, and that their access to infection prevention control (IPC) measures may vary. It is likely that these residential healthcare settings vary in their capacity to respond and some may need targeted supports.

It was noted that HIQA, as the independent authority with responsibility for quality and safety in health and social care services in Ireland, would have an important role in assessing risks in residential healthcare centres.

It was noted that a parallel process was examining potential financial supports for nursing homes in order to ensure continuity of care, taking account of additional costs to maintain service during the COVID-19 response.

It was discussed and agreed that the following supports may need to be tailored for these services: COVID-19 testing for both residents and staff, the availability of personal protective equipment (PPE), staff training in the use of PPE and infection control, the governance and implementation of guidance and standards.

The HPSC's *Preliminary Coronavirus Disease (COVID-19) Infection Prevention and Control Guidance include Outbreak Control in Residential Care Facilities (RCF) and Similar Units (issued 21 March 2020)* was noted. It was agreed that this guidance will be reviewed and updated as needed, in light of the additional public health measures implemented on 27th March 2020, and the current available epidemiological data, including that on clusters.

Action: The HPSC to review and update *Guidance for Infection Prevention and Control (including Outbreak Control) in Residential Care Facilities*.

4. NPHEP Paper

It was agreed that representatives from the DOH, HIQA, HSE and HPSC would collaborate to prepare a paper for consideration by the NPHEP on the specific issues and risks relating to COVID-19 infections in residential healthcare facilities. The focus of this work is to be on disease control, particularly the protection of patients/clients, staff and the wider community. In particular, expertise on IPC should be included.

Action: DOH to co-ordinate preparation of a paper, with input from DOH, HIQA, HSE and HPSC for consideration at the next NPHEP meeting on Tuesday 31st March 2020. This paper will focus on the specific issues related to COVID-19 infection control in healthcare settings in Ireland.



5. Meeting Conclusion

The Chair thanked all the attendees for their participation in the meeting.

Appendix – Draft Framework

Public Health Considerations

Disease control aims are to minimise patient, staff and community spread.

Scope

Longterm Care Settings: To include nursing homes, long term older people residential, long term disability residential, long term mental health residential.

Framework of Information

1. Data: COVID-19 positive cases; proportion of overall COVID-19 positive cases; age profile; mortality; number of staff in settings; number of patients in settings; hospitalisations; reporting of KPI suite as a subgroup of data for these settings vs overall KPI
2. Definition of settings; type; size; accommodation lay out; patient / client cohort (e.g. care of the elderly, disabilities, mental health etc)
3. Risk assessment: those setting with known infection; have infection but not yet known; no infection but at risk; low risk
4. Guidance/Standards: IPC; testing; visitors; staff; respite and activities
5. Preparedness: IPC training and competence; PPE supply; contingency plans in place for staff
6. Assurance: set of KPIs to be reported
7. Strengthened outbreak control and supports required; national; regional; local