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Minutes of Meeting of the Taskforce Steering Group Phase II Emergency Care Settings 2.00 pm, 17 <sup>th</sup> February 2017 Department of Health (Conference Room 2 <sup>nd</sup> Floor)		
Meeting called by:	Dr. Siobhan O' Halloran (SOH) (Chair)	Type of meeting: Phase II Emergency Care Settings Taskforce Steering Group Meeting.
Attendees:	Dr Philippa Ryan Withero (PRW), Ms Sinead Lardner (SL), Ms Bernie Stenson (BS), Professor Jonathan Drennan (JD), Ms Marie Keane (MK), Ms Mary Wynne (MW), Professor Robert Crouch (RC), Mr Paddy Barrett (PB), Professor Anne Scott (AS), Ms Susanna Byrne (SB), Ms Edna Hoare (EH), Ms Sharon Dwyer (SD), Ms Fiona Mc Dald (FmcD)	
Teleconference:	Mr PJ Hathaway (PJH), Ms Phil Ni Sheaghda (PNS), Dr Gerry McCarthy (GMCC), Dr Gary Courtney (GC),	
Apologies:	Kevin Figgis	
Purpose of the Meeting:	Phase II Emergency Care Settings Taskforce Steering Group Meeting	
Agenda Item	Whom	Discussion
Welcome	SOH	SOH welcomed those attending this meeting and those who joined the meeting by teleconference. Apologies were also noted.
Review of Draft Minutes	Group	The Minutes of the last minutes were adopted
Membership - Additions	SOH	SOH also welcomed Ms Susanna Byrne who joined the Taskforce, as an action from the first meeting, on inviting further members, to take account of workforce planning/ Advanced Nursing Practice. PRW and JD advised on a meeting with the Health Pricing Office, in the context of Phase I that was held earlier that day. They provided an overview of the work the HPO have been engaged in, in regard to the Acute Floor principle with Acute Hospitals in the HSE, along with the next stage for health pricing to include emergency departments/acute floor. PRW and JD suggested that at a later stage in the process to invite HPO to provide a presentation and input to the Taskforce in relation to activity based funding and this was agreed. PRW and JD also noted that the HPO provided an update on the new information system for the acute floor (AFIS) which Dr Claran Browne is leading, and suggested a presentation by Dr Browne to the Taskforce would be beneficial. Siobhan () from acute hospitals also noted the work by acute hospitals in this area, and supported a presentation by Dr Browne as a useful action, which was agreed by the group.
Project Plan and Consultations/	PRW & Group	PRW confirmed that the consultations will be moved from September to June in Umerick, Cork and Dublin and all taskforce members would be invited to each consultation. PRW outlined a consultation plan, which was agreed, that included stakeholder briefings. PNS clarified that the stakeholder briefings were briefings and not consultations, as set out in the document, as briefings. Dr O'Halloran further confirmed that there would be consultations with some groups and briefings provided to other groups. The format of the consultations and briefings was agreed. Dates will be notified in due course, with a minimum lead in time for notification of 4 weeks which was agreed.
ED Framework Drafting	SOH & PRW	PRW outlined the approach taken to the assumptions in Phase I. PRW proposed the assumptions from the Phase I interim report be used as the basis for the assumptions for Phase II. She delivered a presentation which outlined the assumptions from the Interim report for the benefit of those who were not involved in Phase I. Ms Stenson said that triage is an area which is constantly changing and the care given is not always captured. GC agreed that there are peak and troughs and psychiatric and elderly patients are groups requiring particular attention. PRW suggested that under the first assumption that the peak and trough of patient throughput would be captured. RC referred to system effects and how it impacts on outcomes, and suggested the inclusion of system effects in addition to environmental effects in the assumptions which was agreed. JD confirmed that evidence in relation to the environmental factors is limited, and so system factors in this instance would be appropriate. MW emphasized the need for a stabilisation process. SB suggested that the HSE's ED toolkit might be consulted and in that regard, she referred to 4 categories of patients. RC said that ED is an interdependent environment of nursing and medical and consideration would need to be given to how to capture that. GC said that there has been some work done in relation to defining the acute floor and advised that Colm Henry and Claran Browne would be the person to contact in this regard. PNS noted that the management structures would need to be taken account of and how they relate to the other areas in the acute floor. PRW noted this and suggested that this would be discussed at the

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		framework was being developed under the appropriate assumptions, in line with the method in Phase I. Ms Wynne said that there has been some work in relation to staff profiles and that could be considered further in light of inclusion in the assumptions. Subsequent to the discussions, it was agreed that the assumptions used in Phase I were appropriate to use for Phase II, and to commence work on developing high level information in the first instance relevant to the acute floor under each assumption in the first instance.
Supportive Research	PRW	PRW highlighted that a research tender by the HRB is in progress, however in the interim, the group would be seeking to identify sources of information to undertake the evaluation of the acute floor in due course to inform the work of the taskforce. SB and FmcD said that the business information unit provides good quality information. MK said that they collect trends from the DSDU. PRW said that it would be important to get good data from the acute hospitals. GC said that that some of the data is not very detailed and that not all of it is reliable. It was agreed that this area of the work, would be continuously reviewed, and PRW, SL to link in with FmcD in the first instance.
Date of next meetings	Group	To be decided based upon the availability of Claran Browne, or Colm Henry to present on the Acute Floor Information System and work in relation to the Acute Floor.
Actions		
Item	Assigned to	
To arrange for Dr Claran Browne to present at the next meeting	CNO's Office	
To commence high level work on the assumptions	CNO's Office	
To liaise with FmcD in relation to the current data available on Emergency Departments	CNO's Office	