

## CervicalCheck Steering Committee

**Date:** 4<sup>th</sup> October 2018

**Steering Committee:** Tracey Conroy, Assistant Secretary, Acute Hospitals Policy Division, DOH, Co-Chair  
Dr Tony Holohan, Chief Medical Officer, DOH, Co-Chair  
Brigid Doherty, Patient Advocate  
Fergal Goodman, Assistant Secretary, DOH, Primary Care Division  
Dr Colm Henry, HSE Chief Clinical Officer  
Damien McCallion, National Director, HSE National Cancer Screening Service  
Stephen Teap, Patient Representative  
David Walsh, HSE National Director of Community Operations  
Lorraine Walsh, Patient Representative  
Dr Peter McKenna, Clinical Director, HSE Women and Infants Health Programme and Interim Clinical Director, CervicalCheck  
Dr Mary Short, ICGP

**In attendance:** Celeste O'Callaghan, Head, CervicalCheck Project Team, DOH  
Ronan Glynn, Deputy Chief Medical Officer, DOH  
Mary Jackson, Principal Officer, Governance and Performance Division, DOH  
Michelle Tait, Scally Report Implementation Lead, HSE  
Emma Browne, Policy Officer, Irish Cancer Society  
Aisling Carton, CervicalCheck Project Team, DOH  
Clodagh Murphy, CervicalCheck Project Team, DOH

**Apologies:** Anne O'Connor, HSE Deputy Director General, Operations  
Enda Saul, Client Services Director, HSE  
Dr Cliona Murphy, RCPI  
Donal Buggy, Head of Services and Advocacy, Irish Cancer Society

### DISCUSSION and ACTION POINTS

NO.	Agenda Item	Discussion and Actions Agreed
1.	<b>Welcome and apologies</b>	The co-chairs welcomed the members and noted the apologies. They welcomed Michele Tait, appointed as HSE lead for the implementation of Scally Report recommendations.
2.	<b>Minutes of previous meeting</b>	The minutes of the meeting of 20 September were agreed.
3.	<b>Reporting updates</b>	<b>Management of primary and social care supports to patients/families:</b> Work is on-going in the HSE to ensure that women who are having difficulty navigating the health system are supported. It was agreed that it is essential that supports are provided fairly and consistently across all CHO areas. It was noted that the format of the HSE weekly report will be modified to reflect the shift in emphasis of the Committee, as outlined in Action 10/52 of the Steering Committee meeting of 20 September.

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		<p><b>Interface with Independent Expert Panel Review:</b> Approximately 1,600 letters have issued. To date, 32% of the consent forms have been returned, with the majority of these consenting to take part in the review. Calls to the helpline reflect some issues that are arising in relation to classification and registration of cancers. Nursing staff and clinical support have been put in place to respond to calls, which has aided the quick resolution of most calls. Where necessary, a protocol is in place to refer the calls to the treating clinician for resolution.</p> <p>It was emphasised that slides should start transfer to the labs involved in the review as soon as possible.</p> <p><b>Laboratory capacity:</b> The average processing time for smear tests remains high. Every effort is being made to reduce it, having regard to the high quality of testing required. It was agreed that data in relation to waiting times for colposcopy would be provided at the next meeting.</p> <p><b>Action 11/55:</b> The HSE will provide data in relation to current waiting times for colposcopy services.</p> <p><b>Extension of current contracts:</b> Negotiations on the extension of the current lab contracts are ongoing and remain a top priority.</p> <p><b>Introduction of HPV screening:</b> A meeting to discuss the HPV project plan is scheduled for next week. A HSE site visit to the UK is due to take place on Wednesday 10<sup>th</sup> October.</p>
4.	<p><b>Report of the Scoping Inquiry – Draft Implementation Plan</b></p>	<p>The Chairs outlined that the draft circulated was a first draft and that work is required to finalise it. A Working Group has been established within the Department, chaired by the Head of the CervicalCheck Project Team to progress the work under the auspices of the Steering Committee. It was noted that an implementation steering group has been established within the HSE, co-chaired by the Deputy Director General, Operations and Chief Clinical Officer. Michelle Tait has been recruited to act as the HSE Lead for the implementation of the recommendations. The Implementation Plan to be agreed by the Steering Committee will reflect inputs from the HSE and other agencies involved.</p> <p>The draft plan was discussed, and an outline of work already underway was given. The importance of ensuring the voices of women and families are heard clearly throughout the implementation process was emphasised.</p> <p>There was particular focus on the recommendations and draft actions relating to open disclosure, including how the recommendations can be taken account of in drafting of the Patient Safety Bill, penalties that could apply if legal obligations are not met, and how we can best implement and monitor open disclosure practices. It was agreed it is essential not only that disclosure takes place but that it is done in the right way. This requires training and support to healthcare professionals, to ensure that they understand their responsibilities in relation to open disclosure, but also that they are supported during and after the disclosure process and are enabled to focus dedicated time to disclosure. In this regard, the experience of several Committee members in disclosure meetings relating to major patient safety incidents was discussed, including the importance of supporting both patients/families and staff involved. It was agreed that this previous experience provides valuable learning, which must be taken into account in preparing for the finalisation of the RCOG process.</p> <p>The need for prioritisation of recommendations was also discussed. Certain recommendations cannot be implemented unless others are implemented already and others, for example those relating to procurement, require immediate implementation. In addition, some recommendations are linked to wider policy developments.</p>

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		<b>Action 11/56:</b> A further draft Implementation Plan will be circulated a week in advance of the next meeting to allow full consideration by Committee members, with the aim of finalising at the next meeting.
	<b>AOB</b>	The next Steering Committee meeting will take place on Thursday 1 <sup>st</sup> of November, at 11.30am in Miesian Plaza.

CervicalCheck Project Team

4 October 2018