



Sláintecare Programme Board Meeting - Minutes

Meeting 3: 29th March 2022 @ 14:30 via Microsoft Teams

Attendees:

Robert Watt, DoH (**RW**)
Paul Reid, HSE (**PR**)
Tracey Conroy, DoH (**TC**)
Muiris O'Connor, DoH (**MoC**)
Derek Tierney (**DT**)
Dean Sullivan, HSE (**DS**)

Anne O'Connor, HSE, (**AOC**)
Yvonne Goff, HSE (**YG**)
Pat Healy, HSE (**PH**)
Louise McGirr, DoH (**LMcG**)
Liam Woods, HSE (**LW**)
Gary Martin, DoH (**GM**) for
GD

Apologies

Kevin McCarthy, DCEDIY (**KMcC**)
Greg Dempsey, DoH (**GD**)

Also in Attendance:

Fiona Prendergast, DoH, (**FP**)
Bob Patterson, DoH (**BP**)
Muriel Farrell, DoH (**MF**)
Jack Nagle, DoH (**JN**)
Sarah Treleaven, DoH (**ST**)
Rosaleen Harlin, DoH (**RH**)

1. Minutes and matters arising

The minutes from the meeting of the 14th February 2022 were agreed. There were no matters arising. PR commented that the Board paper pack, issued in advance of meeting as pre-reading was very helpful and a good format to follow.

2. Sláintecare Action Plan 2022

An update was given on the draft Sláintecare Action plan 2022. This has been developed jointly by the DoH and HSE based on a review of the Department's priorities, the HSE's NSP 2022 and the Sláintecare Implementation Strategy & Action Plan 2021 -2023. The draft plan is being finalised and will go for review and approval by the Management Board of the Department, the Executive Management Team of the HSE (on 14th April) and the HSE Board (on 27th April). Plan tracking and monitoring will use existing reporting mechanisms, as much as is possible. The eHealth Programme deliverables for 2022 will be set out in plan.

3. Programme Updates

Papers providing an update on each programme were circulated to Programme Board members in advance of the meeting, and these were referenced, discussed and key points noted, as below:

2022 Waiting List Action Plan (WLAP)

The 2022 Waiting List Action Plan was launched on 25 February. The Plan allocates €350 million to the HSE and NTPF and details 45 actions to reduce and reform waiting lists. The immediate focus of the Plan is on the delivery of activity to reduce active waiting lists for acute scheduled care by 18% this year, which will bring the number of people waiting to their lowest point in five years.



GM advised that a governance structure has been agreed and is in place to oversee delivery of the plan. A Waiting List Task Force, chaired by the Secretary General of the Department of Health and the CEO of the HSE, is in place and has been meeting fortnightly. A working group, comprised of Department, NTPF and HSE officials, is in place and meets weekly to monitor variance against individual WL plans, consider progress of actions, and identify issues to be elevated to the Task Force.

An update was given on progress to-date and the plan remains broadly on target, with fewer than expected additions to the waiting lists so far this year offsetting the lower levels of removals achieved. However, the recent surge in both ED attendance and COVID cases (and associated staff shortages) in hospitals in March is resulting in the curtailment of elective activity, which will negatively impact achieving the waiting list reduction targets.

RW commented that it was a good, albeit very challenging plan, given ongoing COVID-19 situation, and that the governance in place allows for active monitoring and reporting on the delivery of the plan.

Regional Health Areas

The Department of Health is progressing RHA implementation in partnership with the HSE and DCEDIY. Substantial work has been undertaken over the last few months. The RHA Implementation Team brought together over sixty senior members from the HSE, DoH, and DCEDIY in March 2022 to consider all the proposed framework workstreams for the successful implementation of RHAs. This workshop was well attended, and very good feedback received to input into the plan.

MOC advised that A memorandum on next steps has been shared with the Cabinet Committee on Health and will go to Government for approval in early April 2022 for approval of the implementation of RHAs. It will outline the proposed policy direction for RHAs and its key enabling workstreams. A business case for RHAs, which has been finalised will be included in this memo for Government. The HSE Board will be providing their final input to this, prior to submission.

Workshops with the HSE Board and other key stakeholders are planned to input into the development of the implementation plan.

Enhanced Community Care

The momentum of the recruitment campaign was maintained during Quarter 1 with over 1,200 WTE now onboarded and over 650 WTE at an advanced stage of recruitment, an increase of 191 since February 2022. There is also focus on an international recruitment campaign. A draft ECC communications strategy, which aligns with the capital infrastructure plan, was circulated to PB in advance of meeting.

An individual Population Health Profile has been created for each of the 96 CHNs, each containing standardised data on the demographics and health status of the relevant CHN. These profiles are now available on the Community Networks Hub, via www.hseland.ie. This supports the identification of service needs down to a local level and this profiling will be an ongoing process.

Initial external evaluations on nine CHN learning sites, by the Centre for Effective Services (CES), highlight there is a significant appetite for change amongst staff and positive feedback on the GP Lead role. Communications was identified as an area for improvement and the communications strategy will help address this.



It was noted that the upcoming census form will also provide useful information around population profiles in support of identifying local population needs.

Consultant Contract

The Government remains committed to introducing the Sláintecare Consultant Contract to hospital consultants as soon as possible. The Contract remains the subject of engagement with consultants' representative bodies, the IMO and the IHCA.

Elective Centres

The Government decision, in December 2021, to implement a national strategy of elective care centres was shared with the hospital groups and individual hospitals and a Programme Business case has been developed for the elective centres in line with this decision.

The Government decision is to progress development of dedicated elective centres in Cork, Galway and Dublin and will provide elective care services for all the population of Ireland.

Work has been continuing the development of project-level Preliminary Business Cases (PBCs) for Cork and Galway, including public spending code compliant multi criteria analysis, to support delivery of elective care centres in an agile manner. These are expected to be finalised first while the Dublin Project Business Case is also being progressed in parallel.

Sláintecare Integration Fund & Mainstreaming Integration Innovation

Budget 2019 provided €20 million for the establishment of a ring-fenced Sláintecare Integration Fund to support service delivery focused on prevention, community care and integration of care across all health and social care settings. This fund supported a total of 123 integration innovation projects and a summary of the outcomes of this funded work was presented to the Programme Board as well as an end of programme final report.

The Programme Board:

1. Approved the Sláintecare end of programme report for formal launch and publication in May 2022 and
2. Gave approval to commence a restricted call for Round 2 of Sláintecare integration innovation funding and to provide an update at the next meeting

The proposal to deliver a joint DoH & HSE workshop at the International Conference on Integrated Care which will be hosted in Denmark from 23rd to 25th May 2022, was noted.

Sláintecare Communications

One of the roles of the Sláintecare Programme Board is to ensure effective communication and information sharing across all aspects of the Sláintecare reform programme and its constituent projects, throughout the Department of Health, the HSE and with all key stakeholders.

To ensure effective communication and information sharing across all aspects of the programme and its constituent projects, it was proposed that minutes of the Programme Board be published on the Department of Health website as a matter of course once agreed.

The Programme Board agreed with the proposal to publish approved meeting minutes.



AOB

It was noted that the Secretary General of the Department and CEO of the HSE are appearing in front of the Joint Committee for Health on Wednesday 6th April.

The next programme board meeting will be held on the 08th June.

Key Decisions

The Programme Board made the following decisions:

- # 1 - Approved the Sláintecare end of programme report for formal launch and publication in May 2022
- #2 - Gave approval to commence a restricted call for Round 2 of Sláintecare integration innovation funding
- #3 – Approved the publication of Programme Board meeting minutes

Follow up Actions

Area	Action	Assigned to	For Completion
Sláintecare Action Plan 2022	Finalise plan with feedback and put through DoH/Management Board and HSE/EMT and HSE/Board review and approval	JN/YG	End April
	Set out key eHealth reform deliverables for 2022 in Sláintecare Action Plan 2022	DT	End April
RHAs	Finalise, and submit Memo to Government, with Business Case, for approval to implement RHAs	MOC	Mid-April
Enhanced Community Care	Share initial evaluations of pilot CHNs report by CES	PH	Mid-April



Appendix 1: Agenda

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via Microsoft Teams

Agenda

1. Minutes and matters arising
2. Sláintecare Action Plan 2022 draft
3. Update from DoH / HSE Joint Leads on:
 - 2022 Waiting List Action Plan
 - Regional Health Areas
 - Enhanced Community Care
 - Sláintecare Consultant Contract
 - Elective Centres – next steps
 - SIF Phase 1 Programme Report
4. Programme Board External Updates /Communications
5. Recap
 - Agreed actions
6. AoB