CERVICALCHECK STEERING COMMITTEE Minutes Wednesday 8th June 2022 (44 00cm)

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Members present:	Professor Anne Scott Kate O'Flaherty Dr Nóirín Russell Fiona Ness Prof. Mary Horgan Brigid Doherty Fiona Murphy Lorraine Walsh Rachel Morrogh	(Chairperson) Department of Health HSE- National Screening Service HSE- National Screening Service Royal College Physicians Ireland Patient Representative National Screening Service 221+Group Representative Irish Cancer Society
Apologies:	Dr Declan Bedford Dr Ciara McCarthy Stephen Teap	National Screening Service Irish College of General Practitioners Patient Representative
Presenting: 2(b)	Colette Brett	Head of Quality, Safety & Risk, National Screening Service

Agenda item

1 Welcome

- a The Chairperson opened the meeting by welcoming everyone and noted apologies given. The Chairperson informed members that Declan Bedford has advised he will no longer be a member of the Committee, as he has recently finished his term as Chair of the NSS QSR Committee. On behalf of the Committee, the Chairperson acknowledged Declan's contribution to the work of the committee and will write to thank him for his time and commitment.
- b Minutes of the meeting 23rd March 2022 were agreed by members with minor typographical amendments.
- c The Chairperson advised actions arising from the meeting on 23rd March, 2022 will be taken under the relevant items on the agenda
- d There were no other matters arising.

2 Key Topics – Presentations

a Overview - HPV vaccination programme - Dr Lucy Jessop, Director National Immunisation Office (NIO), Health Service Executive.

The Chairperson welcomed Dr Jessop and thanked her for accepting the Committee's invitation. Dr Jessop gave a detailed presentation on Ireland's HPV vaccination programme, noting the positive uptake rates and the reducing incidence of cervical cancer in Ireland. The impact of COVID-19 on the programme was outlined, noting the effect of school closures and vaccinators being temporarily re-assigned to assist in the national COVID-19 vaccination programme. For the academic year 2019/2020, the uptake rate is currently at 79%; however it was noted that data is still being collated and inputted so this number may increase. The importance of ensuring consistent communications campaigns, which are inclusive of stakeholders and advocates at national and local level was emphasised. The success of such was shown through the cross-sectoral alliance and campaign which rebuilt confidence and alleviated apprehension amongst parents after misinformation circulated during 2016/2017. Dr Jessop acknowledged the outstanding work of the late Laura Brennan who passionately

worked as a patient advocate supporting the message to take up the offer of HPV vaccine. An overview was also provided of the plans for the coming academic year and proposed catch-up programmes.

The Chairperson thanked the presenter for her time and comprehensive presentation and opened up to members for follow-up questions or comments. There was a discussion and clarifications around the nuances of the HPV vaccine programme including processes for initiating catch-up/amendments/additions to the programme. There was also a discussion on the cross-sectoral alliance and communications piece undertaken by the NIO, and members acknowledged the excellent work done by the NIO to ensure parents/participants regained confidence in the programme. Dr Jessop agreed to share a paper which was published in the Lancet on Ireland's response to the HPV vaccination crisis. The Chairperson thanked Dr Jessop for her time in the follow-up discussion, acknowledging the importance of HPV vaccination programme in the ultimate goal of reducing the burden of HPV cancers, and offering the ongoing support of the Committee to the programme.

b Overview – NSS Governance Arrangements (2018-2022), Ms Fiona Murphy, CEO, NSS, Colette Brett, Head of Quality, Safety & Risk, NSS.

The Chairperson thanked NSS for the comprehensive paper provided prior to the meeting, and welcomed Colette Brett. The presentation outlined the previous organisational structure pertaining in HSE/NSS, and summarised the new structures now in place. The presentation included an overview of reporting, governance, leadership and management arrangements within HSE/NSS. It was advised the NSS have completed all actions in the implementation plan arising out of Dr Scally's recommendations, which are now imbedded and mainstreamed into HSE/NSS governance and oversight reporting mechanisms. An outline was provided of the new public health function which is leading in designing and ensuring a person-centred approach and culture are embedded in the processes and systems. It was noted that there are ongoing collaborations, strengthening of relationships, rebuilding of trust and proactive communication with all stakeholders.

The Chairperson thanked the presenters for their detailed presentation and opened to members for questions, comments and discussion. The Chairperson noted the importance of this item, given the Committee's terms of reference that oversight and governance arrangements are mainstreamed into the appropriate HSE structures. Members had a detailed discussion recognising the vast amount of work done by the HSE/NSS to ensure governance and quality assurance are in place. It was noted by members the importance of providing clear information to the public on the benefits and limitations of screening, and of the quality assurance processes in place in CervcialCheck. It was acknowledged that the new communications hub in development by NSS, which will launch towards the end of the year, will help ensure continued clarity going forward. The NSS committed to bringing the feedback provided by the Committee to the relevant communications groups in NSS. In discussing the early work underway on the cervical cancer elimination strategy and information campaign, and the importance of clear public understanding and expectations on what precisely is meant by 'elimination', that this be borne in mind in communications planning, and that the DOH would liaise with the WHO to ensure appropriate consideration is given to the language and terminology to be used during this campaign. It was also noted separately members are involved with the IARC project and it is important to relay these messages in this environment to ensure there is consistent messages.

3 Updates

- The Chairperson noted to members the update provided on the Service Improvement Programme (support package). The Committee acknowledged the recent progress on this important piece of work, noting the input from those involved to reaching this point. It was agreed the comprehensive document in development would provide clarity on services and supports available. It was advised that a further meeting with HSE/221+Group/DOH is due to take place in the coming week, with a view to the final document being finalised shortly.
- The Chairperson referred to papers which had been provided to members by the NSS: Implementation of ERGs reports, Communications update, Cervical Cancer Elimination, Overarching update from CervicalCheck Programme. The Chairperson invited the NSS to provide any additional updates and asked members if they had any questions or comments they would like to discuss on these items. There was a brief discussion on the items noting the provision of communications material for Ukrainian people living in Ireland.
- The Chairperson referred to papers provided by the DOH and asked if they wished to С provide any additional updates or comments. The DOH advised that Dr Scally's final progress review is progressing, some interviews with Dr Scally and his team have been held with stakeholders and others have been scheduled in the coming weeks. There is on-going engagement with Dr Scally and his team, it is understood the publication of the final report will be later in the summer. The DOH committed to keeping members informed of any updates. In relation to the implementation reporting, as of Q1, 2022 just three actions remained to be completed. It is likely that the Q2, 2022 report will be a final implementation report. There was a short discussion, acknowledging the enormous amount of work done by various parts of the health system in progressing these actions. It was advised that Ms Monica Brennan had been formally appointed as the nominated Facilitator by the Minister. There was a general discussion around the restoration of trust process, with a number of members, including 221+ and the Clinical Director. indicating that they had serious concerns about the process and what was perceived as a lack of involvement and understanding regarding how the process would work. Concern was also expressed regarding the expectations that potential participants may have. It was agreed it would be useful for the DOH to engage with the Facilitator and feedback the comments, queries and concerns raised during the Committee discussion, in order to support and facilitate the process going forward. The DOH advised they would follow up and liaise with stakeholders on this important issue, to assist in ensuring that expectations are understood by all parties, enabling confidence in the process. An update on the patient advocacy/ patient voice partner policy was raised, it was agreed the DOH will provide an update to members for the next meeting.

4 Consultation - NSS Strategy Development

The stakeholder consultation process underway to inform the development of the new NSS strategy was discussed, and it was noted that a number of members have provided feedback either as members of their respective organisations, or as individuals. It was agreed this is an important consultation process, providing a meaningful opportunity for stakeholders and patient advocates to work in partnership with the NSS. The Chairperson would note such to the NSS and advise the Committee are happy to engage further with the consultation group if they so wish.

5 Work programme

The Chairperson noted the updated TOR - overview of work programme for 2022. It was agreed that an engagement on the development of a new National Open Disclosure Framework would be a key topic at September's meeting.

6 Administration

The tenure of the Committee was discussed, noting the progress made in line with its terms of reference, and the Chairperson's appointment in October 2020 for a two-year term. The timing of Dr Scally's final progress review report was noted as potentially requiring an additional meeting or discussion by the Committee. The meeting of the 14th September 2022 was advised as potentially the last scheduled meeting of the Committee. However this would be reviewed after the summer and if members wished, an additional meeting could be arranged if there were any outstanding issues or areas which required consideration. The option of a final in-person meeting in the autumn was also discussed, and the date of 17th November noted as the date for the planned launch of the new cervical cancer elimination campaign.

7 AOB

Chairperson's wrap-up

The Chairperson thanked members and presenters for their time and provided a brief recap of the meeting discussions, follow-up actions and outlined agreed agenda items for September's meeting.

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#	Action	Assigned
1 a) b)	Key topics - September 2022 National Open Disclosure Framework Dr Gabriel Scally – Final Report	DOH DOH
2 a)	Updates Service Improvement Programme (support package)	HSE
b)	National Screening Service i. Implementation of ERGs reports ii. Communications update iii. Cervical Cancer Elimination iv. Overarching update from CervicalCheck Programme	
с)	Department of Health i. Dr Gabriel Scally - Implementation report/Final Report ii. CervicalCheck Ex-Gratia Scheme iii. Restoration of Trust Meetings iv. CervicalCheck Tribunal v. Patient Safety Bill vi. Patient Advocacy Policy	DOH
3	Restoration of Trust – DOH to liaise with stakeholders to support and facilitate the process.	DOH