

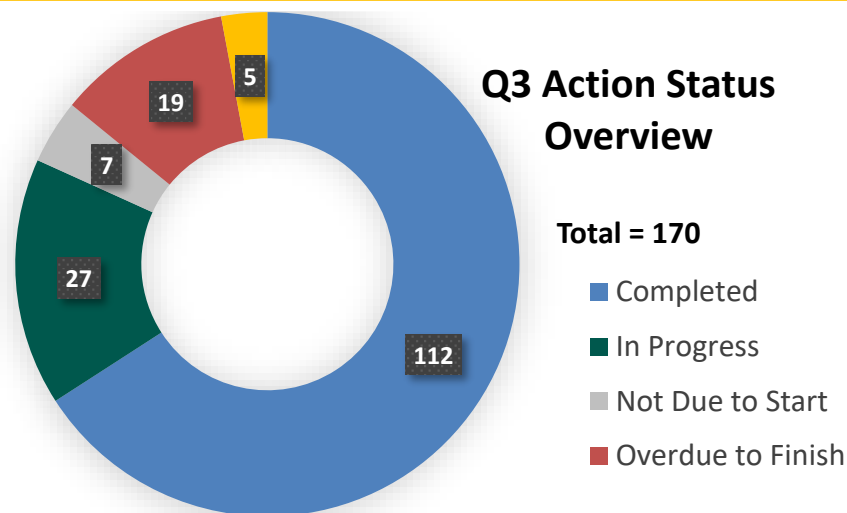
Implementation of the Recommendations of the Report of the Scoping Inquiry Progress Report Summary, Q3 2019

Following publication of the Final Report of the Scoping Inquiry into the CervicalCheck Screening Programme, led by Dr Gabriel Scally, in September 2018, a comprehensive Implementation Plan was developed to support implementation of all 56 recommendations made by the Scoping Inquiry. Dr Scally's laboratory supplementary report was published on 11 June 2019, and contains two additional recommendations bringing the total number to 58. The HSE has developed additional actions against these recommendations.

The Minister is committed to publishing progress reports against the recommendations on a quarterly basis in order to provide details of the work which is underway across the health system to implement all 58 recommendations from the three reports of Dr Gabriel Scally. There has been significant progress by all parties to date, as demonstrated in the overview below, and this report is a summary of progress made in the period to the end of September 2019 (Q3 2019).

Overall summary position at end of Q3 2019

As of the end of Q3 2019, there were 170 actions arising from the 58 recommendations. The number of completed actions has increased to 112 with a further 27 in progress, 19 overdue to finish and 5 overdue to start, with 7 not yet due to start. A breakdown of the status of actions is detailed below.



Q3 2019 Progress Report by recommendation theme

Method of Approach

The Department of Health's record management protocol has been updated. A project based approach was adopted to identify areas with potential for improvement and scope requirements. Following research and completion of the project a suitable document management solution was identified. Work is now underway to progress implementation. This is supported by other actions including the roll out of eApplications - ePQS, eSubmissions, eCorrespondence etc and an exercise to update the Department's record management protocol.

In Q1 2019, the Chief Clinical Officer (CCO) commissioned a review of the HSE Healthcare Records Management Policy. A working group led by the HSE's Quality Improvement Division has been meeting throughout 2019 and is due to provide a report setting out a proposed set of revisions to the current policy during Q4 2019. An audit of access to healthcare records by patients in acute hospitals has also been completed and a report has been provided to the CCO for consideration. Following consideration of this report and recommendations, any appropriate improvement plans will be developed. Additional actions have also been developed by the HSE in relation to the management of non-healthcare records and documents and these actions will be progressed through the remainder of 2019. The HSE has also updated its electronic communications policy to incorporate guidance on the requirements relating to the transmission of records and documents.

The National Screening Service (NSS) client services team which was put in place during 2018 to assist patients wishing to access their healthcare records in publicly funded hospitals has been maintained and continues to provide support to patients in accessing their records.

Listening to the Voices of the Women and Families Affected

The Department has now established a Women's Health Taskforce which has met in September and October 2019, and will continue to meet every 4 - 6 weeks. The Taskforce is co-chaired by the Secretary General of the Department of Health and the Directory General of the European Institute for Women's Health. It combines internal and external membership, with a strong bias towards involving internal staff, in keeping with Dr Scally's recommendation that the Department improve the consistency, commitment and expertise it applies to women's health issues. The Taskforce is currently working through a number of exploratory themes in order to select priority work areas. It is envisaged that priorities will be selected on a rolling basis every quarter. Every meeting of the Taskforce and all inputs to its work are published regularly on the Women's Health Taskforce website on gov.ie/health.

The Women's Health Taskforce has agreed as its first action to initiate a Radical Listening Exercise. Planning is well underway and the exercise will formally commence shortly. In addition, the Taskforce has been seeking direct input into its work programme, into which 500+ women have contributed to date. These inputs are published routinely on the Women's Health Taskforce website.

CervicalCheck – Management and Governance

An implementation plan to support the organisational and governance review of the NSS which was completed in late Q2 2019 is in development. An interim CEO has been appointed to the National Screening Service pending the recruitment of a permanent CEO before the end of 2019. A Programme Manager has also been appointed to CervicalCheck and the recruitment process for a Deputy Programme Manager commenced during Q3 2019.

Work is continuing on enhancing and further strengthening the deployment of professional and public health expertise into the screening services, the recruitment of a lead colposcopist for CervicalCheck is continuing. The Director of Public Health also continues to ensure public health is positioned strategically and appropriately within NSS structures.

The NSS Quality Safety & Risk Committee which is independently chaired continues to meet every 2 months. The membership of this committee is inclusive of patient representatives.

Public Health Expertise

Following the publication of the Crowe Horwath Report on the Role, Training and Career Structures of Public Health Physicians in Ireland in December 2018, the Department of Health has established an Implementation Oversight Group to oversee the implementation of a new model of public health medicine. This Group, which is led by the Department of Health, includes representation from across the HSE, including from the National Cancer Control Programme and the National Screening Programme. It also includes representation from HIQA, the Institute of Public Health in Ireland, the Royal College of Physicians of Ireland and academia.

The workplan for the Implementation Oversight Group was finalised in Q2 2019. The Group's Q3 meeting took place in September. The process to scope out and agree the future governance and organisational structures for public health medical services is ongoing in line with original timelines.

The HSE continues to ensure that the role of public health within the screening programmes is positioned strategically and appropriately within the governance structures including public health representation on all quality assurance committees. The Director of Public Health is contributing to the development of a new model of public health in accordance with the Crowe Horwath report.

National Screening Advisory Committee

The Committee will be known as the National Screening Advisory Committee. The Committee will provide independent expert advice when it comes to considering population-based screening programmes in Ireland. In accordance with best practice and in order to ensure appropriate use of finite resources, the National Screening Advisory Committee will:

- Effectively implement an agreed methodology for accepting applications to consider new or revisions to existing population screening programmes;

- Agree and implement a prioritisation process for the consideration of new or revised population screening programmes;
- Develop and implement a robust and transparent system to evaluate potential population-based screening programmes against a set of internationally recognised criteria;
- Clearly communicate the recommendations and the reasoning to the Department of Health, stakeholders and the public on the outcomes of deliberations.

The Committee will play a significant strategic role in the development of population screening programmes in Ireland. However, it will have no executive function i.e. day to day operational role. Day to day operations will remain the responsibility of the HSE.

The Department engaged with the Public Appointments Service in Summer 2019 following which it initiated an open process for expressions of interest for Membership of the Committee, with a closing date of 13 September 2019. Sixty (60) applications for the various expert roles were received. The Selection Panel met on 20 September 2019. The selection panel comprised two representatives from Scotland's National Screening Committee, a patient advocate and the Chair of the Committee, Professor Niall O'Higgins. All applicants have been notified of the outcome. The first meeting of the National Screening Advisory Committee will take place on 18 November 2019.

Minister Harris has requested that the National Screening Advisory Committee consider as a priority in its first year of work the best approach to the expansion of the newborn bloodspot screening programme (i.e. 'heel prick' test). The Chairman has agreed to this request.

Risk Management

The group commissioned by the HSE Chief Clinical Officer to review the HSE risk management structures has completed a report which has now been approved by the Executive Management Team and the HSE Board. Discussions are continuing within the HSE in relation to the recommendations and their implementation.

Incident and risk management continue to be standing agenda items on the Executive Management Team and Senior Management Team meetings of each screening programme.

CervicalCheck Laboratory Services

CervicalCheck continues to review its programme standards, inclusive of laboratory standards and the implementation of enhanced quality assurance arrangements and processes has been completed. The Clinical Director of CervicalCheck has reviewed and amended quality assurance structures to ensure appropriate separation of standard setting from monitoring. Updated standards will also be implemented in line with the introduction of HPV primary screening.

The programme continues to monitor cytology reporting rates by the continued consideration of CYTO1 laboratory returns through the relevant QA structures. A process for monitoring and reviewing laboratory performance has been defined as has the process for escalation of any issues relating to non-conformities.

Procurement of Laboratory Services

All actions identified by the HSE in response to the 8 recommendations from the September 2018 report relating to procurement have now been fully implemented. Additionally, a further 4 procurement actions developed by the HSE in response to the supplementary report (June 2019) have been implemented. These actions ensure that future contracts for the provision of cytology and other laboratory services to CervicalCheck will explicitly state each precise location where screening will take place in the written contracts, and that measures will be put into place to monitor compliance.

Auditing Cervical Screening

The work of the Expert Group established to review clinical audit of interval cancers in three screening programmes continues to be progressed, and the Group expected to complete a report in early Q4 2019.

Open Disclosure

The Department is in the process of establishing an Independent Patient Safety Council with members appointed by the Minister for Health. The terms of reference have been agreed and the Independent Patient Safety Council will provide advice, as requested by the Minister for Health, on patient safety to help prevent harm to patients and healthcare service users. The Council will have, as its first task, the completion of a detailed review of existing policy on open disclosure, taking into account the findings of the Scoping Inquiry into the CervicalCheck Screening Programme and undertaking a detailed national review of existing policy on open disclosure and make recommendations to the Department of Health in this regard.

The general scheme of the Patient Safety Bill, approved by Government in July 2018, underwent pre-legislative scrutiny at the Oireachtas Joint Committee on Health on 26 September 2018. The Report from the Oireachtas Health Committee was issued on 7 December 2018 with 9 recommendations. The Minister for Health responded to all recommendations on 21 March 2019. Meetings have also been held with HIQA, the HSE, the Mental Health Commission, the State Claims Agency and other key stakeholders in relation to the progression of the Bill.

The Government Chief Whip published the new Legislation Programme (following the focus on Brexit) with the Patient Safety Bill as one of the priority pieces of legislation for publication. The Office of the Parliamentary Counsel to the Government and the Department are working towards having the Patient Safety Bill introduced in the Autumn Dáil session. After publication, the Bill will be progressed to the Houses of the Oireachtas for the final stages of the legislative process.

Training in open disclosure in the HSE continues to be progressed throughout the organisation including train the trainer sessions and training on the revised policy for all open disclosure leads. Workshops in open disclosure for the HSE senior leadership team were also held in Q3 2019. Work is also continuing with the medical training bodies in relation to the development of a communications and open disclosure skills training programme.

Cancer Registration

The working group established between the HSE and the National Cancer Registry of Ireland (NCRI) to collaborate on the common recommendations in the Scally report continues to meet.

A Memorandum of Understanding (MOU) is in progress between the NCRI and National Screening Service (NSS), to ensure that all organisations work with agreed screening-related variable definitions, and once this is completed the engagement to agree definitions will start. The business case for developing a data architecture system blueprint has been approved and requirements for the tender have been agreed. This is now being progressed through the Office of Government Procurement.

Following a recruitment campaign, two individuals with the relevant competencies to support enhanced Governance and Patient Safety have been appointed to the NCRI Board. Extending the NCRI Board membership from seven to ten must be provided for in primary legislation. A provision for this has been included in Health Bill, which is on the Government's Legislation Programme and we expect the draft Heads of Bill will be submitted to Government in November 2019. Legislation is anticipated to be in place before Q4 2020. In the interim, it is intended to explore all options for how required expertise could be made available.

The Department is working with the NCRI Board with the aim of finalising the Terms of Reference for the peer-review of the NCRI by mid-November. Preliminary engagement has taken place with the International Agency for Research on Cancer (IARC), as experts in this field. It is envisaged that the review will be carried out by IARC and that an arrangement will be put in place by the end of the year, with the work being completed by mid-March.

Other Screening Programmes

Revised terms of reference and principles of operation for QA committees have been developed across all screening programmes. A steering committee has been established in the NSS to oversee all QA projects and the implementation of a project improvement plan continues to be progressed. All senior staff in the NSS have received training in open disclosure with train the trainer sessions planned as a priority for NSS in Q3/Q4 2019 in addition to training for other NSS staff.

Resolution

In addition to the core function of dealing with claims arising from the CervicalCheck issue, the legislation to establish the CervicalCheck Tribunal provides that the Tribunal will facilitate restoration of trust meetings. The intention behind a restoration of trust meeting is to document experiences, facilitate discussion and provide information to the woman concerned or her family. The HSE CCO has engaged with patient representatives to identify any women or families who may wish to meet with their clinicians.