



Mr Ciarán Devane,  
Board Chairperson,  
Health Service Executive,  
Dr. Steevens' Hospital,  
Dublin 8.

11<sup>th</sup> May, 2020

Dear Ciarán,

I wish to acknowledge your comprehensive and detailed correspondence of 8 April 2020 which outlines the actions proposed to enable the HSE Board to fulfil its functions over the period of the COVID-19 emergency situation.

I would firstly like to express my thanks and gratitude to the Board and management for its response in dealing with these unprecedented circumstances. In addition, I would to particularly acknowledge the commitment, dedication and bravery of the HSE frontline staff in carrying out their work in such challenging circumstances. They have my utmost respect and admiration. I sincerely thank all those involved for the role they are playing in helping the country deal with this pandemic.

It is clear from the correspondence that the Board has been very active in both considering and progressing initiatives to ensure it fulfils its statutory role. Indeed, the disease situation and the national response have continued to evolve since you wrote your letter. There is no doubt about the uncertain and dynamic nature of the forthcoming period over the remainder of 2020 and into next year throughout which the HSE Board will be engaged in planning and oversight of both the COVID-19 response and the ongoing delivery of a range of health and social services. Notwithstanding the evolving nature of the emergency, I have taken the opportunity to set out some key considerations which it seems likely will remain relevant to the Board's governance of the HSE into next year.

It remains the case that the Board, as the governing body of the Executive, must satisfy itself that appropriate systems, procedures and practices are in place to use the resources available in the most beneficial, effective and efficient manner to improve, promote and protect the health and welfare of the public and for the internal performance management and accountability of the Executive. The latter reflects the fact that the CEO shall carry on and manage, and control generally, the administration and business of the Executive...and ensure that appropriate systems, procedures and practices are in place.

A very important context to the performance by the Board of this role into next year will be the very challenging dual requirements of responding to COVID-19 and delivering priority health and social services over an extended period. These requirements will shape strategy for the Executive over this period and the Board has a key role to play in assuring itself that a suitable strategy is in place and is being implemented successfully. The WHO has highlighted

the importance of balancing the demands of responding directly to COVID-19, while simultaneously engaging in strategic planning and coordinated action to maintain essential health and social care delivery so as to balance COVID-19 care with health service recovery. This will need to be undertaken in a dynamic fashion so that there is the necessary agility to respond rapidly to changes in COVID-19. While I do not propose to respond individually to all the actions that you have outlined in your correspondence, I would particularly welcome the Board's ongoing consideration of the following over this period:

- **Government's COVID-19 Public Health Strategy**

The Board will need to be fully assured on the full implementation of the range of public health responses advised internationally by WHO and ECDC and nationally by NPHET. This strategy is underpinned by the National Action Plan, which will be subject to periodic revision. Execution of this strategy will require a strong, coherent health protection function and strategic direction of public health activities such as sampling, testing, contact tracing and surveillance based upon the health protection prioritisation undertaken by this function under the supervision of HSE leadership, oversight of the Board and in close cooperation with the Department. Over the coming months, as the societal restrictive public health measures are eased, key objectives for the health services will be to:

- to continue to drive and support initiatives and communications to interrupt person-to-person transmission.
- address infection prevention and control (IPC), outbreak control and limit transmission in residential care and healthcare settings to protect 'at risk' groups;
- implement an integrated and coherent strategy of public health measures to include rigorous sampling, testing and contact tracing;
- collect and utilise data, surveillance and modelling outputs to provide timely intelligence on the evolving impact of COVID-19 across Ireland to inform decision making within the HSE and by Government; and
- continued open and transparent communication to sustain public understanding and support.

- **Whole Health Sector Response**

The statutory responsibility to improve, promote and protect the health and welfare of the public, combined with the particular requirements of an unprecedented public health emergency, requires the HSE to lead a whole system approach across the range of health and social care providers which make up the wider health sector. As we have seen, the Executive is already actively engaged in ensuring supplies and supports (e.g. PPE, expert clinical input, occupational health, etc.) are available not just within the public health system but also amongst private providers in order to interrupt the spread of the disease and maintain continuity of care. This will continue for the duration of the pandemic and will need to be the subject of ongoing consideration and oversight. In addition, the HSE has itself made a major contribution to the wider Government response and it will be necessary for this support and alignment to continue as part of a single national effort on behalf of citizens.

- **Non-COVID-19 care**

I note your comments that the provision of some services envisioned in NSP 2020 will be negatively impacted. I understand assessment of this issue is underway within the HSE, together with planning of the best approach to service delivery over the period. My Department will be happy to support this quantification of the impact of the COVID-19 pandemic on NSP 2020 targets to date and the planning of future service provision for the second half of 2020 and into next year.

I note that the Board will assess the full impact and shortfalls on the delivery of key priorities, actions and activity levels set out in NSP 2020 and, if necessary, prepare an amended NSP 2020. I would request that the Board revert to me formally as soon as possible with its recommendations.

I appreciate that there are unique operational challenges, but due to the predicted longer timelines of the pandemic, a complete cessation, or prolonged reduction, of critical activities is not tenable. It will be important to be able to plan in an adaptive manner the non-COVID services that can be provided for the remainder of the year, ensuring that the level of pent-up demand is minimised, and we are best placed within the dual service provision environment and ultimately the post- COVID-19 situation. I am aware that the Executive has been extremely innovative in introducing new service models and technologies during this phase of the pandemic and I would be keen that such innovation continues, and other opportunities are identified as part of the planning for future service provision. I do not underestimate the challenge as further significant adaptation of work practices, settings and pathways will need to be introduced. My Department is committed to working with the HSE, colleges, clinical leaders and others to support this work in every way possible.

- **Performance Monitoring**

Performance monitoring is an important tool to evaluate the impact on service delivery and ensure remedial actions are taken. The WHO has recommended that the dashboard for responding to COVID-19 must include metrics for non-COVID-19 health service performance, morbidity and mortality. Our two organisations have an agreed oversight process in place which includes the escalation of poorly performing services. It is important that the Board and my Department have a process to evaluate the services that are being provided by the Executive and, in some cases, the services that have been deferred or curtailed.

I welcome the commitment to continue to record performance activity and make this available to the Department. I am aware, however, of some deficits and gaps in the recent reporting of services, particularly those in the community. There are also challenges to be overcome in capturing new service delivery models (e.g. virtual clinics). I note the standing down of the National Performance Oversight Group (NPOG) and the temporary pausing of performance reporting (Clinical, Quality, Human Resources and Financial) in relation to NSP 2020 within the HSE through the Board and its committees. I recognise the constraints applying but, at this point based upon what we now know about the duration of the pandemic, I think it would be timely for the Board to review the performance oversight process which it is intended to operate for the remainder of the year. My Department will be seeking to review the performance engagements previously agreed with the HSE to see how work in this area can be re-started in an appropriate way.

- **Sláintecare Reforms**

The Executive Director of Sláintecare is leading a review of, and preparing a report for my consideration on, the prioritisation of Sláintecare activities and programmes of work in the light of COVID-19 and lessons learned to date from the first full year of implementing Sláintecare. This will be done in a manner that does not interfere with the operational response to COVID-19. I know from your letter and our recent meeting that the HSE is also considering how the COVID-19 response can be leveraged to support Sláintecare reforms and I would request continued close and full cooperation with the Executive Director in this regard. The focus in the COVID-19 response on the avoidance of inappropriate hospitalisation is fully in line with the Sláintecare vision, which also includes a very strong commitment to supporting people to live at home in the best possible health. I have no doubt whatsoever that there is much that can be learned from the response to COVID-19 that can inform the ways of working, pace and motivational approach needed to achieve the reforms necessary to improve our health services.

- **Corporate Planning**

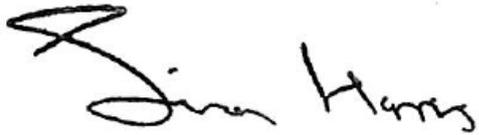
The HSE Corporate Plan will be an important document which will set out the vision, priorities and goals for the Health Service over the next three years. I acknowledge the significant work and progress that has been achieved on the preparation of the new Corporate Plan. In light of the current circumstances, I would have no objection to extending the timeframe for the completion and submission of the new Plan for my approval until the end of July 2020. In any event, as you indicate and as set out above, the Plan will need to change and adapt in light of the COVID-19 emergency. I note also in this regard the approach adopted by the Board in relation to the corporate risk register. The recommendations arising from the Sláintecare Executive Director's Prioritisation Report may, following consultation with the HSE and as agreed by me, form the basis of further direction regarding the HSE's Corporate Plan.

- **Financial Oversight**

I note the temporary amended delegation the Board has issued to the CEO providing him with authority to approve additional COVID-19 related expenditure once approved by the Department of Health and the Department of Public Expenditure and Reform. This delegation has facilitated rapid decision making in a number of critical areas and significant resulting expenditure is now being incurred. I would expect that the Board's review of such expenditure would allow it to satisfy itself that resources are being deployed to best effect and that project management arrangements and controls are operating effectively, including any monitoring arrangements which formed a condition of the approval of the two Departments. Review by the two Departments, including by means of the Health Budget Oversight Group, and reporting to Government is likely to build upon the assurances available to and endorsed by the Board.

I again want to re-iterate my thanks and praise for the efforts of all those involved in the COVID-19 response. As a country we are all immensely proud of the commitment, dedication, and leadership being demonstrated within our health services.

Yours sincerely,

A handwritten signature in black ink that reads "Simon Harris". The signature is written in a cursive style with a large, stylized initial 'S'.

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Simon Harris T.D.  
Minister for Health