



**Steering Group to assist the Department of Health in its development of a national policy
on adult safeguarding in the health sector**

Note of Meeting

Date	13 February 2019 (Meeting 1)
Location	Department of Health, Miesian Plaza, Dublin 2
Chair	Dr Kathleen Mac Lellan, Assistant Secretary Social Care Division (DOH)
Members in Attendance	Mr Niall Redmond, Services for Older People (DOH) Mr Maurice O Donnell, Disability Services - Policy Support Group rep (DOH) Mr Tim Hanly, Manager, National Safeguarding Office (NSO), (HSE) Mr James Gorman, General Manager, Patients' Private Property Accounts Central Unit (HSE) Mr JP Nolan, Head of Quality & Patient Safety (HSE) Ms Margaret Brennan Head of Quality & Patient Safety (HSE) Ms Cornelia Stuart, Assistant National Director, Quality Assurance & Verification Mr Pat Benson, Public interest representative Detective Chief Superintendent Declan Daly, National Protective Services Bureau, An Garda Síochána (AGS) Mr Ian Kelleher, Policing Division, Department of Justice and Equality (DJE) Ms Rosemary Smyth, Mental Health Commission (MHC) Ms Mary Dunnion, Chief Inspector, Health Information & Quality Authority (HIQA) Ms Gráinne Morrissey, Department of Children & Youth Affairs (DCYA)
Apologies	Dr Collette Bonner, Office of the Chief Medical Officer (DOH) Ms Ginny Hanrahan, CEO, CORÚ
In Attendance	Mr Conor Foy (Secretary), Services for Older People (DOH) Mr Cormac Fitzgerald (Secretariat), Services for Older People (DOH) Mr Ciarán Ó Maoileoin (Secretariat) Services for Older People (DOH)

1. Introduction & welcome

The Chair welcomed the Steering Group and invited the Members to introduce themselves. Apologies were noted.

2. Steering Group Terms of Reference & Conflicts of interest

- The Chair referred to the Terms of Reference – no changes were made
- A Conflicts of Interest Policy was circulated via email and the chair requested the Secretariat add this as a standing item to each meeting agenda. No verbal conflicts were declared

3. Updates on safeguarding from key agencies / sectors represented in the Steering Group:

HIQA:

- HIQA safeguarding activity is currently mostly related to collecting of data- 14,000 notifications arrive per year
- Two types of data submitted to HIQA relating to safeguarding issues
 - Unsolicited data taken as unvalidated information
 - Statutory and mandatory data from providers
- HIQA refers as appropriate to both local and national HSE safeguarding services
- Majority of nursing homes are private and have no access to safeguarding services



Mental Health Commission:

- Unsolicited reports in mental health settings have no current statutory basis
- Safeguarding is not yet fully developed in mental health settings
- Private providers are technically signed up to current adult safeguarding measures
- Levels of awareness of safeguarding amongst service users including need for information and consultation on diagnosis and medication
- Referrals are made to appropriate bodies when needed

HSE Patient Safety and HSE National Safeguarding Office:

- Ensuring integration between the 2018 HSE incident management framework and the 2014 HSE adult safeguarding policy framework is important.
- Challenges regarding right of entry / access (for HSE Safeguarding and Protection Teams)
- HSE Safeguarding and Protection teams rely on HSE policy and existing legislation. Recent domestic violence legislation has assisted teams

Justice Sector:

- Justice sector focus in 2019 would be on implementing the future of policing report recommendations and developing legislation replacing the Garda Síochána Act 2005:
 - Prevention of harm will be explicitly stated in this future legislation
 - As set out in the Government Decision of December 2018 the Bill will place a statutory requirement on relevant state agencies to cooperate with An Garda Síochána in matters of community safety. This will replicate an existing statutory obligation on AGs to cooperate with other agencies. How this obligation will be provided for and whether any supporting provisions will be required to support its effectiveness are under consideration.
 - Work on the Bill will progress this year with end Q3 being the target date for the draft General Scheme to go to Government for approval
- There will be updating and creation of Justice sector collaborative arrangements with other sectors
- The Criminal Justice (Withholding of Information on Offences against Children and Vulnerable Persons) Act 2012 already has a definition of an adult “vulnerable person”
- Difficult classifying crimes committed by those with diminished capacity
- The Chair requested a standing item on the Future of Policing and Justice sector integration with DoH safeguarding policy be added to the agenda

4. Presentations by the Department of Health:

a) Presentation: Health sector adult safeguarding policy – Background, progress to date, project plan- Niall Redmond

Main discussion points:

- Importance of collaboration between sectors in relation to adult safeguarding emphasised
- Importance of consistency between sectors in language and terminology related to safeguarding
- Issues noted with different sectors and agencies developing referral and information sharing systems in silos / need for integration between agencies



- b) Presentation: Brief overview of international safeguarding models - Niall Redmond**
- c) Presentation: Preliminary findings of stakeholder feedback exercise on themes to be covered in the policy - Ciarán Ó Maoileoin**

Main discussion points:

- The policy is for the health sector, however, it will be important to reference other sectors as required. Many issues and blocks can be solved via information sharing between agencies, e.g. local HSE safeguarding committees. Reference to the health sector includes social care

5. Discussion: Underlying principles for a national health sector adult safeguarding policy (Presentation of Principles Discussion Document – Ciarán Ó Maoileoin)

Main discussion points:

- Principles need to be easy to understand- in plain English
- Advocacy should be a subset of empowerment rather than a principle in and of itself / advocacy is more a tool than principle
- High importance was given to: collaboration and information sharing, a human rights-basis, comprehensiveness, consistency of meanings & terms throughout the health sector and beyond, proportionality (least intrusive intervention), prevention

6. Discussion: Agenda for the next meeting and table of modules

The Chair requested the Secretariat circulate an agenda for the next at least 7 days prior to the meeting.

7. Any other business & 8. Date(s) of next meeting(s)

The Chair requested the Secretariat circulate a discussion paper for the next meeting, as well as a Paper on Principles, Scope and Definitions, as informed by the meeting and a list of potential dates for future meetings to Members, which were later confirmed.

Actions:

Action	Who	When
• Draft minutes of the meeting circulated	Secretariat	ASAP
• Circulate further meeting dates	Secretariat	ASAP
• Standing item added to agenda: Declarations / Conflict of interest	Secretariat	Immediate
• Standing item added to agenda: Future of Policing and Justice sector integration with DoH safeguarding policy	D/ Justice and Equality	Immediate
• Discussion document circulated for discussion at next meeting	Secretariat	At least 7 days prior to the meeting
• Paper informed by this meeting to be circulated	Secretariat	At least 7 days prior to next meeting

Approved by Chair:

Signature Kate Valle Date: 27 March 2019