COVID-19 NPHET Subgroup - Vulnerable People

Report - NPHET Meeting 12/03/2020
COVID-19 NPHET Subgroup - Vulnerable People

1. NPHET COVID-19 Subgroup – Vulnerable People

The NPHET Subgroup - Vulnerable People was established to provide oversight and assurance with regard to the specific preparedness, measures and actions that need to be taken to protect vulnerable groups and individuals in society. An integrated cross government approach is being taken by the Subgroup.

The term vulnerable people is being used to include older people, people with a disability, mental health service users, those with an underlying illness or condition, children in care and those accessing social inclusion services (not an exhaustive list).

Services to vulnerable people are provided through a range of settings and are under the remit of a number of Government Departments. These settings include long and short-term care, primary care, respite, day services, prisons and youth detention centres, direct provision and care in individual homes (not an exhaustive list).

The Subgroup met for the 2nd time on Wednesday 11th March 2020, and will continue to meet weekly or more often if necessary. Membership of the Subgroup has increased to include additional representatives of key stakeholders, e.g Disability, Chronic Diseases. An updated membership list is set out in Appendix 1. Each meeting will have an agenda, a short minute and a set of actions.

2. Meeting (2) 11th March 2020

See Agenda (Appendix 2).

2.1 Terms of reference 1 and 2 focused on identification of vulnerable people and State Agencies responsible for service provision

A list of Vulnerable People/Responsible Department/Agency was circulated for consideration in this regard. Final agreed table below:

<table>
<thead>
<tr>
<th>Category</th>
<th>Responsible Department</th>
<th>Responsible Agency/other</th>
</tr>
</thead>
<tbody>
<tr>
<td>Elderly: residential, respite, day services, people living at home, homecare</td>
<td>Health</td>
<td>HSE, private providers</td>
</tr>
<tr>
<td>Disability: residential, respite, day services, people living at home, homecare</td>
<td>Health</td>
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</tr>
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<td>Mental health: residential, day services, people living at home</td>
<td>Health</td>
<td>HSE, private providers</td>
</tr>
<tr>
<td>Underlying illness: chronic diseases, immunosuppressed, rare diseases, cancer</td>
<td>Health</td>
<td>HSE, private providers</td>
</tr>
<tr>
<td>Palliative care: hospices, homecare</td>
<td>Health</td>
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</tr>
<tr>
<td>Prisoners</td>
<td>Justice</td>
<td>Irish Prisons Service</td>
</tr>
<tr>
<td>Homeless population</td>
<td>Housing</td>
<td>LGMA, Homeless Executive</td>
</tr>
<tr>
<td>Asylum Seekers</td>
<td>Justice</td>
<td>NGOs</td>
</tr>
<tr>
<td>People in direct provision</td>
<td>Justice</td>
<td></td>
</tr>
<tr>
<td>People with addiction problems</td>
<td>Health/Justice</td>
<td>HSE</td>
</tr>
<tr>
<td>Irish Travellers &amp; Roma</td>
<td>Health/Justice</td>
<td>HSE</td>
</tr>
<tr>
<td>Children in: Foster Care, Detention Schools (e.g. Oberstown), Secure Care Units, High Support Special Units</td>
<td>DCYA</td>
<td>TUSLA</td>
</tr>
</tbody>
</table>
2.2 Term of reference 3 focused assurance of measures in place across Government Departments and State Agencies
Attendees were asked to complete a standard checklist designed to gather information which would support the provision of assurance that measures are in place, updated in line with NPHET directions, approved at appropriate senior level\(^1\) and implemented. See Appendix 2 for copy of checklist.

2.3 Communications with Vulnerable People
Deirdre Watters who is leading the Department of Health's communication strategy attended the subgroup meeting. A dedicated team has been established and a stream of communications focused on vulnerable people is being developed and a comprehensive plan designed by the end of this week. Communications to provide information and assurance to vulnerable people was a consistent theme during the meeting. Consideration should be given to those vulnerable groups, with disabilities, and higher dependency needs. This will include designing and disseminating information in a way that is accessible to vulnerable groups e.g. easy-read, different languages, videos, etc.

2.4 Community Support Co-ordination
2.4.1 Working Group Community Support Co-ordination
The Department of Rural and Community Development has established an Advisory Group on its community response to vulnerable people, and held its first meeting on 9th March 2020. The mobilisation of local community & voluntary groups and the engagement of volunteers at local level can play a part in ensuring that vulnerable people living in the community can continue to have their needs met in the event that their usual sources of support become unavailable. Basic needs such as doing the weekly shopping, ensuring the house is warm and clean and keeping in regular contact by phone are among the tasks that local volunteers could carry out to enable vulnerable people to continue to live their daily lives safely in the community.

The overarching purpose of the Advisory Group therefore is to encourage and facilitate community engagement in response to the needs of vulnerable people living in the community.

The Chair of the Advisory Group will report to the NPHET Subgroup on Vulnerable People which is tasked with providing oversight and assurance with regard to the specific preparedness, measures and actions that need to be taken to protect vulnerable groups and individuals in society.

Proposed initial actions arising from 1st meeting;

1. **Seniors Alert Scheme**; There are an estimated 80,000 pendant alarms already in the community, linked with 670 community organisations;
   - PR campaign to remind those who have them
   - increase rates of monitoring
   - consider scaling scheme to increase coverage to 100,000

2. **Volunteer Centres**; Match volunteers in the community with needed tasks to be identified by statutory and voluntary service providers;
   - additional staff and resources for 22 Volunteer Centres nationwide –
   - additional admin support for Volunteer Ireland to co-ordinate scaling up and national messaging

3. **Alone**; Significant expansion of community supports for older people;
   - Co-ordinate services with other voluntary and statutory services
   - Expand team of support co-ordinators to manage increased demand and significantly increase numbers of volunteers

\(^1\) Responsibility to ensure that all content and actions are in line with NPHET directions lies with the relevant Departments/Agencies.
4. **Community Outreach Programme**; Irish Rural Link and The Wheel;
   - To communicate messages to target groups who don’t traditionally respond to mainstream information campaigns, working through their affiliated groups (including 3,000 local Meals on Wheels groups)
   - Ensures vulnerable people are talked to by people they already know and trust – Outreach Co-ordinators in each county – enables tracking and identification of support needs of vulnerable populations – connects with HSE locally and nationally.

5. **Garda vetting**; Define clear roles for volunteers in the community that can be fast-tracked through the Garda vetting process – DRCD in co-operation with Garda Síochána and Volunteer Ireland

6. **Flexibility for community & voluntary programmes**; The Community & Voluntary sector is ready to re-deploy staff and resources to support the community effort;
   - 49 Local Development Companies nationwide plus significant numbers of voluntary organisations operating in the non-healthcare sphere - flexibility in relation to programme targets, outputs and approval in principle to redeploy exchequer-funded resources would be required.

2.5 **Actions**

   **Table 2 Actions** - Meeting 2 (11th March 2020)

   *actions 1-8 meeting 1.

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2.6 **Guidance sought**

Guidance on a range of matters related to service delivery is being sought across all NPHET Subgroups. The NPHET COVID-19 Subgroup – Vulnerable People continues to collate all guidance being sought and establish a channel to communicate this list to HPSC.

2.7 **Community capacity - health and social care**

Capacity and business continuity plans will need to take account of the ability of community services to expand capacity to meet an enhanced set of requirements in the community either due to the limits of hospital capacity being exhausted or increased community requirements. This will need to take account of the actions for each COVID-19 stage – containment, delay and mitigation. An action plan is in development and actions from this subgroup are being included.
Appendix 1 Terms of Reference and Membership

Terms of Reference

1. Identify categories of vulnerable people
2. Identify State Agencies responsible for service provision
3. Design a standardised checklist to provide assurance that measures are in place, updated in line with NPHET directions, approved at appropriate senior level\(^2\) and implemented. Such measures are likely to include:
   - Guidance for service users, families and staff
   - Communications plan
   - Compliance with data protection regulations
   - Preparedness plan to include containment measures; mitigation measures; hand hygiene, personal protective equipment (PPE) and waste management; environmental cleaning; patient/people placement where relevant - moving of patients/people in the facility, visitor access
   - Capacity Contingency Plan
   - Business Continuity Plan.

4. Establish communication processes for completed standardised checklist to the Subgroup
5. Design the Subgroup Assurance Framework
6. Agree Subgroup Modus Operandi
7. Report to NPHET:
   - Progress Updates
   - Escalation of high risks as appropriate.

<table>
<thead>
<tr>
<th>Subgroup Membership List</th>
</tr>
</thead>
<tbody>
<tr>
<td>Department of Health (Chair)</td>
</tr>
<tr>
<td>Department Justice and Equality</td>
</tr>
<tr>
<td>Department of Children and Youth Affairs</td>
</tr>
<tr>
<td>Department of Housing, Planning and Local Government</td>
</tr>
<tr>
<td>Local Government Management Agency,</td>
</tr>
<tr>
<td>Department of Education and Skills</td>
</tr>
<tr>
<td>Department of Defence</td>
</tr>
<tr>
<td>Department of Rural and Community Development</td>
</tr>
<tr>
<td>Community Operations - Health Service Executive</td>
</tr>
<tr>
<td>Public Health Specialist</td>
</tr>
<tr>
<td>Voluntary Sector</td>
</tr>
<tr>
<td>Patient Representative</td>
</tr>
</tbody>
</table>

\(^2\) Responsibility to ensure that all content and actions are in line with NPHET directions lies with the relevant Departments/Agencies.
<table>
<thead>
<tr>
<th>Health Information and Quality Authority</th>
<th>Ms Mary Dunnion, Susan Cliffe (Alternate)</th>
</tr>
</thead>
<tbody>
<tr>
<td>National Cancer Control Programme</td>
<td>Dr Caitriona Mc Carthy</td>
</tr>
<tr>
<td>Chronic Disease (COPD) Representative</td>
<td>Prof. J.J. Gilmartin</td>
</tr>
<tr>
<td>HSE Chief Clinical Officer’s Office</td>
<td>Dr. Philip Crowley</td>
</tr>
<tr>
<td>Department of Health</td>
<td>Berneen Laycock, Chief Nurses Officer</td>
</tr>
<tr>
<td>Department of Health</td>
<td>Sarah Cooney, Principal Officer, Older Persons Projects</td>
</tr>
<tr>
<td>Department of Health</td>
<td>Andy Conlon, Principal Officer, Primary Care</td>
</tr>
<tr>
<td>Department of Health</td>
<td>Celeste O’Callaghan, Principal Officer. Acute Hospitals</td>
</tr>
<tr>
<td>Department of Health</td>
<td>Dave Maguire, Mental Health Unit,</td>
</tr>
<tr>
<td>Department of Health</td>
<td>Rachel Kenna, Deputy Chief Nursing Officer,</td>
</tr>
<tr>
<td>Department of Health</td>
<td>Louise Carrigan, Accountant, Finance Unit</td>
</tr>
<tr>
<td>Department of Health</td>
<td>Malachy Corcoran, Governance and Performance Division</td>
</tr>
<tr>
<td>Department of Public Expenditure and Reform</td>
<td>Mairead Emerson, Civil Service HR</td>
</tr>
<tr>
<td>Department of Finance</td>
<td>Klare Havelin, Civil Service HR</td>
</tr>
<tr>
<td>Disability Umbrella Groups Representative</td>
<td>Ms Joanne Mc Carthy</td>
</tr>
<tr>
<td></td>
<td>Mr Seán Abbott</td>
</tr>
<tr>
<td>Department of Health/HIQA</td>
<td>Ms Máirín Ryan</td>
</tr>
</tbody>
</table>
Appendix 2
National Public Health Emergency Team – Coronavirus
Covid – 19 Subgroup Vulnerable People
Department of Health, Miesian Plaza
Wednesday 11th March 2020 from 11.00am (Room 7.04)

AGENDA

No. Item

1. Welcome

2. Conflicts of Interest Declarations

3. Minutes from Previous Meeting (for adoption)

4. Matters Arising (for update and discussion)

<table>
<thead>
<tr>
<th>Action No.</th>
<th>Action Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Action 1</td>
<td>Departments and Agencies to return Checklist by Monday 09/03/2020</td>
</tr>
<tr>
<td>Action 2</td>
<td>Revert with any additional amendments to draft table of Vulnerable People and responsible Departments/Agencies</td>
</tr>
<tr>
<td>Action 3</td>
<td>HIQA will give consideration to HIQA potential actions and will engage with the Department of Health on the matter.</td>
</tr>
<tr>
<td>Action 4</td>
<td>Department of Rural and Community Development will lead a working group on Community Support Co-ordination. Membership will include HSE, Department of Health and ALONE.</td>
</tr>
<tr>
<td>Action 5</td>
<td>Department of Health-Social Inclusion Unit, Dublin Region Homeless Executive and HSE Public Health Subgroup members will work together to identify social inclusion challenges and actions.</td>
</tr>
<tr>
<td>Action 6</td>
<td>Department of Health and Department of Children and Youth Affairs will engage further in terms of exploring the potential for DCYA Family Resource Centres Network to assist in the public communications process about Covid-19.</td>
</tr>
<tr>
<td>Action 7</td>
<td>Progress considerations for specific communications issues for vulnerable people.</td>
</tr>
<tr>
<td>Action 8</td>
<td>HSE and Department of Health to engage on health and social care capacity considerations.</td>
</tr>
</tbody>
</table>

5. Public Health Update – Dr. Alan Smith, Deputy Chief Medical Officer, D/Health

6. NPHET Update – Dr. Kathleen Mac Lellan, Chair Subgroup

7. DRCD Update – Ms Bairbre Nic Aongusa, A/Secretary, DRCD

8. Communications – Ms Deirdre Watters, Head of Communications, D/Health

9. AOB

Dates of next meeting

<table>
<thead>
<tr>
<th>Time</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>11am–1pm</td>
<td>Wednesday 18th March</td>
</tr>
<tr>
<td>11am–1pm</td>
<td>Wednesday 25th March</td>
</tr>
<tr>
<td>11am–1pm</td>
<td>Wednesday 1st April</td>
</tr>
</tbody>
</table>
National Public Health Emergency Team (NPHET) Covid-19 Subgroup - Vulnerable People

Checklist for those providing services to vulnerable people

[Please add N/A where item not applicable]

Return to: NPHETVulnerablePeopleSubgroup@health.gov.ie

This checklist provides an overview of the key actions that need to be taken by those providing services to vulnerable groups and individuals.

✓ Have you designated a person at an appropriately senior level in your organisation who is responsible for leading your organisation’s response to Covid-19?

✓ Have you ensured that all staff are familiar with, and have contact details for, your organisation/service area’s lead?

✓ Have you developed appropriate guidance for service users, families and staff which is in line with the most recent National Public Health Emergency Team (NPHET) and Health Protection Surveillance Centre (HPSC) guidance in regard to:
  o Good hand hygiene practice
  o Good respiratory practice
  o What to do in the event of a suspected case of Covid 19
  o What to do in the event of a confirmed case of Covid 19

✓ Have you a process in place for ensuring that this guidance is updated regularly in line with NPHET and HPSC guidance?

✓ Have you prepared a Communications Plan for disseminating this guidance in an appropriate format to service users, families and staff?
  o Have you developed and tested a method of communicating with all staff members in a swift and effective fashion.
  o Do you have a system in place to communicate messages, as the LHO may require, to all patients/clients in residential care settings during a pandemic.

✓ Have you ensured that your organisation’s communication plan is in compliance with data protection regulations?

✓ Have you displayed site-specific signage and posters prominently to raise awareness of basic critical infection control measures and to phone before attending a healthcare facility if the person is worried they may have symptoms of COVID-19.
✓ Are your workforce adequately trained in relation to:
  o Good hand and respiratory hygiene
  o the use of personal protective equipment
  o How to spot symptoms of a potential COVID-19 infection
  o What to do in the event of a potential COVID-19 infection
  o What to do in the event of a confirmed case of COVID-19 infection

✓ Do you have a preparedness plan in place that includes:
  o containment measures;
  o mitigation measures;
  o infection control;
  o personal protective equipment (PPE)
  o environmental cleaning;
  o restrictions on visitor access

✓ Have you developed protocols to:
  o prevent the spread of COVID-19
  o manage placement of suspected cases
  o manage the environment in the event of a suspected case

✓ Do you have a plan in place for isolating patients if required?

✓ Have you identified an appropriate facility where individuals can self-isolate when voluntary home isolation is not available to them?

✓ Have you taken appropriate measures to secure supply chains of all routine supplies (including PPE)?

✓ Do you have a Capacity Contingency Plan in place in the event that you need to curtail your services?

✓ Do you have a Business Continuity Plan in place in the event that a case of Covid-19 is confirmed among members of staff in your facility?

Additional Information you consider important
Appendix 4

National Public Health Emergency Team - Coronavirus

Covid -19 Subgroup -Vulnerable People

Meeting 2

Note of Meeting and Actions Arising

Meeting Date: Wednesday 11th March 2020
Time: 11.00
Location: Department of Health, Miesian Plaza, Room 4.28

In attendance:

Department of Health:
Dr. Kathleen Mac Lellan (Chair)
Mr. David Maguire, Mental Health Unit
Mr. Malachy Corcoran, Scheduled and Unscheduled Care Performance Unit
Ms. Berneen Laycock, Nursing Policy Unit (for Ms. Rachel Kenna, Deputy Chief Nursing Officer)
Ms. Ciara Mellett, Slaintecare Programme Implementation Office
Ms. Louise Carrigan, Finance Unit

Health Service Executive:
Dr. Philip Crowley, Quality Improvement
Mr. Jim Ryan, Community Operations-Mental Health
Dr. Margaret Fitzgerald, Public Health -Social Inclusion & Vulnerable Groups
Dr. Caitriona Mc Carthy, National Cancer Control Programme

Department of Children and Youth Affairs: Mr.Albert O’Donoghue
Department of Education and Skills: Mr. Daltan Tattan
Department of Finance: Ms. Klare Havelin
Department of Public Expenditure and Reform: Ms. Mairead Emerson
Department of Housing, Planning and Local Government: Mr. Graham Hopkins & Ms. Karen Higgins (for Mr. David Kelly)
Department of Justice and Equality: Dr. John Devlin, Irish Prison Service
Department of Rural and Community Development: Ms. Bairbre Nic Aongusa

Health Information and Quality Authority: Ms. Susan Cliffe & Ms. Máirín Ryan (for Ms. Mary Dunnion)
Disability Federation of Ireland/National Federation of Voluntary Bodies/ Not for Profit Association: Dr. Joanne McCarthy, Disability Federation of Ireland (for Mr.Séan Abbot, Cope Foundation)
Alone: Mr. Séan Moynihan
Dublin Region Homeless Executive: Ms. Mary Flynn (for Ms. Eileen Gleeson)
Chronic Obstructive Pulmonary Disease (COPD) Support Ireland: Ms. Suzanne MCormack (for Prof. J.J. Gilmartin)
Patient Representative: Ms. Brigid Doherty
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**Apologies:**

**Department of Health:** Mr. Andrew Conlon, Primary Care Policy Unit; Ms. Sarah Cooney, Older Persons Projects Unit; Ms. Celeste O’Callaghan, Paediatric and Adult Acute Model of Care Policy Unit

**Department of Defence:** Ms. Clare Tiernan

1. **Welcome**
   The Chairperson welcomed the new members and acknowledged the workstreams that had been progressed by members since the SubGroup’s first meeting.

2. **Conflicts of Interest Declarations**
   Members were requested to advise the Secretariat of any updates to their Conflicts of Interest Declarations as they arose and all new and outstanding Conflicts of Interest Declarations to be signed as a matter of priority.

3. **Minutes from Previous Meeting**
   The minutes of the previous meeting were adopted.

4. **Matters Arising - Updates and Discussion**
   Updates were given by the relevant SubGroup members on progress in respect of the actions arising from the previous meeting and a number of additional actions to be progressed by the SubGroup were identified – see Table below.

5. **Public Health Update - Dr. Alan Smith, Deputy Chief Medical Officer, D/Health**
   Dr. Alan Smith, Deputy Chief Medical Officer at the Department of Health, gave an update on the Covid-19 emergency with particular reference to the evolving situation in Ireland and the national public health response to date.

6. **NPHET Update - Dr. Kathleen Mac Lellan, Chair, SubGroup**
   The Chairperson advised that a report outlining the establishment of the SubGroup, its Terms of Reference and programme of work had been brought to the NPHET on 10th March 2020. A copy of the report was circulated at the meeting, for noting by the SubGroup members.

7. **DRCD Update – Ms. Bairbre Nic Aongusa, A/Secretary, D/Rural & Community Development**
   Ms. Bairbre Nic Aongusa gave an update on the work to date of the DRCD Advisory Group on the Community Response to Vulnerable People, which has been established to encourage and facilitate community engagement in response to Covid-19.
   - It was noted that the Advisory Group is preparing a series of actions for consideration by the NPHET.

8. **Communications – Ms. Deirdre Watters, Head of Communications/ D/Health**
   Ms. Deirdre Watters, Head of Communications, Department of Health gave an overview of the communications approach being adopted by the Department in respect of Covid-19.
   - It was noted that a specific communications plan targeted at vulnerable groups was currently near completion; SubGroup members were invited to direct any suggestions/input on the issue to the Department’s Communications team.
   - There was a discussion on the challenges emerging across the different sectors in terms of ensuring that the communications message is effectively relayed to our vulnerable groups and individuals. There was a consensus that the communications message needed to be carefully tailored for this cohort and it was noted that a Stakeholder Engagement Group is being set up by the Department to examine this issue.
### Actions*
*actions 1-8 meeting 1.

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#### 9. A.O.B

Next meeting: Wednesday 18th March 2020 at 11.00; Department of Health.