
COVID-19 NPHEP Subgroup - Vulnerable People

NPHEP Meeting 02/07/2020

COVID-19 NPHEM Subgroup - Vulnerable People

1. NPHEM COVID-19 Subgroup – Vulnerable People

The NPHEM Subgroup on 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.

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 role of the NPHEM Subgroup on Vulnerable People is to ensure that a framework is in place to provide assurance that all relevant Departments and State Agencies have preparedness plans in place to ensure that the people and services they are responsible for, are cared for and protected, as part of the whole of Government response to COVID-19.

2. Sub Group Meeting

To note there was no meeting of the Subgroup on week beginning 29th June. All subgroup minutes, once agreed by the subgroup, are available on the website at: <https://www.gov.ie/en/collection/301f5e-the-national-public-health-emergency-team-npmet-subgroup-vulnerable/> .

3. Discussion on subgroup work to date

A draft paper was circulated to the subgroup at their last meeting giving an overview of the work of the group to date and setting out a number of areas as discussed by the group during this period (e.g. communications to vulnerable groups, the community support framework, public health measures in relation to long term care residential settings, cocooning and other related public health guidance, issues in relation to specific vulnerable groups, mental health and well-being).

The subgroup was asked to focus their discussion on the following 3 questions:

- ✓ Has the subgroup met its objectives as set out in the ToRs?
- ✓ What public health supports continue to be required to assist Departments and State Agencies to meet their obligations to vulnerable groups as part of the ongoing response to COVID-19 as we move forward?
- ✓ What type of on-going communication supports for vulnerable groups, and individuals, are needed as we move forwards?

There was consensus that the subgroup had met the objectives as set out in their terms of reference over this period and acknowledgement of the responsive, collaborative, integrated, cross-departmental and person-centred approach taken by the group during this challenging period.

Moving forward some colleagues noted that other Departmental and HSE subgroups had 'stood down' and were reverting to normal structures and established ways of working, so as to avoid confusion or duplication of work.

Disability and voluntary groups noted concerns among their members about a second wave of COVID-19 and the need to retain a channel for such organisation to engage with Government in relation to key issues that emerge. It was noted that as we move along the Roadmap to the reopening of Society and Business, many of these issues are broader than the remit of this group and the health service, and it may be appropriate to look at other ways of communicating and engaging with such groups across Government.

The group was very supportive of the work of the Communications Team over this period in assisting them to access information and in the development of tailored messages and materials for many vulnerable groups.

The Chair noted that there will be further consideration of the role of the group in the coming weeks and it is proposed to put this item on the agenda for the next subgroup meeting.

4. Update on COVID-19 Expert Panel on Nursing Homes

On foot of a NPHET recommendation, on 23rd May a COVID-19 Expert Panel on Nursing Homes was established, to examine the complex issues surrounding the management of COVID-19 among this particularly vulnerable cohort.

The purpose of the Panel is to examine the national and international responses to the COVID19 crisis, and to examine the emerging best practice. The main objective of the Panel is to provide immediate real-time learnings and recommendations in light of the expected ongoing impact of COVID-19 over the next 12-18 months.

As part of the Expert Panel's work, it is undertaking rapid consultative processes to engage with a range of stakeholders, including nursing homes, residents and staff, through various means. It is also undertaking a systematic review. The Panel submitted an interim report to the Minister on 30th June and is expected to submit a final report in mid-July.

5. Temporary Assistance Payment Scheme

The Temporary Assistance Payment Scheme (TAPS) was established as a temporary support mechanism to contribute towards costs associated with COVID-19 in nursing homes. The Scheme provides support payments to applicant nursing homes for April, May and June. Private and voluntary nursing homes are eligible to make claims for COVID-19 related costs incurred during this period. The TAPS was approved and sanction of up to €72.5m was provided on 3rd April. The intention to establish the Scheme was announced on 4th April and the Scheme first opened for applications on 17th April.

On 30th June, the Minister announced an extension to the Scheme for July, August and September after which the Scheme will conclude. The extension of the Scheme allows preparedness and management measures to continue to roll out and also provides certainty as to the conclusion of this temporary Scheme. The extended Scheme also incorporated some amendments to the operation of the Scheme.

Additionally, significant systems and structures to facilitate the support of private and voluntary nursing homes have been put in place by the HSE and HIQA and have developed considerably over the past number of months. These non-financial supports come in the form of the supply of PPE, temporary accommodation for nursing home staff and through the HSE's Crisis Response Teams including deployment of HSE staff. There is also considerable amount of support in the form of telephone support, infection prevention and control support and Public Health support provided to nursing homes.