

Special HSE Safety and Quality Committee Meeting

Minutes

A meeting of the HSE Safety and Quality Committee was held on Friday, 7 August 2020 at 2.00pm via video conference.

Committee Members Present: Prof Deirdre Madden (Chair), Prof Fergus O'Kelly, Dr Yvonne Traynor, Ms Anne Carrigy, Dr Chris Luke, Ms Margaret Murphy, Dr Cathal O'Keeffe.

Board Member Attendance: Mr Brendan Lenihan, Ms Fiona Ross

HSE Executive Attendance: Dr Siobhán Ní Bhriain (Integrated Care Lead), Ms Yvonne O'Neill (Interim ND Community Operations), Mr Jim Ryan (AND Mental Health Operations), Ms Niamh Drew (Secretary), Ms Rebecca Kennedy.

1. Governance and Administration

The Chair welcomed members noting that the purpose of the meeting was to review the HSE's draft submission to the Mental Health Commission (MHC) in response to the MHC Annual Report 2019.

No conflict of interest was declared.

2. Mental Health Commission Annual Report

2.1 Review of the HSE submission to MHC

J Ryan presented the draft submission to the Committee noting that the MHC published their 2019 Annual Report on 2nd July 2020 and that HSE Mental Health welcome MHC report. The HSE values the regulation of mental health services as it provides a framework in which to constantly review and improve services, so they remain person-centred. He confirmed that recommendations within the report have been reviewed and that Mental Health are confident that a number of initiatives currently underway will address many of the recommendations made.

He noted that the six key areas identified by the MHC which require particular attention were: Premises; Ligature Reduction, Individual Care Planning, Restrictive practices, Over Capacity and Staff Training and outlined current actions which are underway to address these issues. The draft action plan will be provided to the Commission for amendment following Committee members feedback.

In relation to Premises, he noted that the HSE continues to invest in the mental health physical infrastructure which both major capital investment (e.g. national forensic mental health service) and also a rolling minor capital/works program across both community and inpatient services. Some minor works will also be completed in the coming months to improve compliance. In addition, there is work on going in relation to major capital works in a number of inpatient premises. The Committee queried the capital allocation process in this area and B Lenihan advised that this would be under the remit of the Audit and Risk Committee (ARC) also. Y O'Neill advised that there is also a revenue-based allocation to each CHO for routine maintenance purposes and that Mental Health services would have access to this.

In relation to Ligature Reduction, it was noted that in order to address the ligature concerns noted in approved centres, the HSE have commenced a national improvement project to develop and roll out a HSE ligature audit and guidance. In response to the reported low level of compliance in this area, the Chair noted that the Committee have commenced oversight of CRR risk 16 of Regulatory non-compliance and will be inviting the Chief Operations Officer to a future meeting to provide an update on this risk.

Regarding Individual Care Planning (ICP), S Ní Bhriain advised that while improvements in individual services have been made in this area, a national service improvement initiative on ICP compliance is currently underway to address all issues identified in the MHC's *Individual Care Planning 2016-2018 Review*. This work is being completed in partnership with service users and in line with the new Government Mental Health Policy *Sharing the Vision*.

On Restrictive Practices, J Ryan noted that the HSE have established a national improvement initiative to address concerns raised in the MHC's *The Use of Restrictive Practices in Approved Centres*. This initiative commits to a programmatic review of restrictive practices in Approved Centres in 2020 and a response will be issued to the MHC by the end of 2020. In the course of this work, support is also provided as issues are identified in particular services. He assured the Committee that there is strong patient advocate engagement seen in this area and the Chair suggested that engaging with the AND Healthcare Audit on this point may be useful. The Committee expressed concern at the length of time it is currently taking to implement certain changes and it was agreed that oversight of this action plan would be added to the Committee workplan for 2021.

J Ryan further advised that the HSE are committed to introducing a focused approach to respond to

Over Capacity. The HSE has recently completed a review of capacity in all mental health services,

including approved centres in the context of COVID-19 where capacity has been reduced to maintain

social distance. The existing mental health governance and engagement arrangements will now

review capacity issues on an on-going basis.

Concerning Staff Training, J Ryan noted the HSE remains very concerned about meeting the training

requirements per the Regulation and that the draft action plan requires the relevant governance and

associated accountabilities to ensure that mandatory training takes place and is including a new

process for monitoring of adherence to training. He noted that the HSE is very aware that Covid-19

is impacting negatively on staff training and any available tele-based training will be maximised and

standardised. Following questions from the Committee, S Ní Bhriain advised that opportunities in

relation to developing telehealth in mental health services are also currently being considered

carefully.

Finally, the Committee discussed the importance of improving lines of communication in relation to

governance with the MHC.

The Chair thanked S Ní Bhriain, Y O'Neill and J Ryan for their revision of the response under the

pressure of a tight timeline.

Any Other Business

Date of Next Meeting: 15 September 2020.

The meeting concluded at 3.45 pm.

Signed: Deendue Madden

Deirdre Madden

Chairperson

Date

24/11/20

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