

**PHECC Council Meeting Minutes**  
**14 July 2022**  
**Via Videoconference**



**Present:**

Jacqueline Burke (Chairperson)  
Alison Smith  
Fiona McDaid  
Hillery Collins

**Apologies:**

Conor Deasy  
David Menzies  
Jimmy Jordan

**Video Conference:**

Jason van der Velde (Vice-Chair)  
Aidan O'Brien  
Dennis Keeley  
Martin O'Reilly  
Niamh Collins  
Patrick Fleming  
Tomás Barry  
William Merriman  
Tess O'Donovan

**In attendance:**

Richard Lodge, PHECC Director  
Con Foley, Council Secretary  
Brendan Cawley, PHECC Manager  
Ray Carney, PHECC Manager  
Ricky Ellis, PHECC Manager  
Karen O'Neill, Council Administrator

**1.0. Closed Session**

During a closed session the Chair updated Council on the following matters.

- i. The Chair reported on the progress of a Complaint against the Director confirming that a Report from the Sub-Committee is awaited and expected in a matter of weeks. A further communication had been received from the complainant which would be dealt with under "Correspondence" below.
- ii. The Chair also provided some details on the forthcoming combined Strategy and Council meeting, being held in Kilkenny on the 7th and 8th of September.

**2.0. Open & Welcome**

The Chair opened the meeting by welcoming all attendees and noting apologies received.

The Chair asked both Council and Council Committees, in setting their Agendas and Meetings for 2023, to consider not holding any meetings in either the months of July or August and to re-instate the January meeting.

**3.0. Declarations of Interest**

No declarations of possible conflicts of interest had been received.

**4.0. Chairs Business**

**4.1. Correspondence**

The Chair reported the receipt of a further communication from the Complainant in the matter of a Complaint against the Director. It is anticipated that the Report of the Panel investigating this matter will be available and provided to the complainant within a month.

**4.2. Legislation Update**

Correspondence, previously submitted to the DoH regarding PHECC's legislative deficits has been forwarded to the newly appointed Principal Officer at the Department.

The Chair also reported that she had received a call from the previous incumbent during which the Chair had taken the opportunity to thank him again for his support to PHECC during his tenure.

## **5.0. Minutes & Matters Arising**

### **5.1. Draft Minutes 16 June 2022\***

The draft minutes of the previous meeting were reviewed, and Council passed the following resolution.

**Resolution:** That Council approves the minutes of the Council meeting of 16 June 2022.

**Proposed:** Hillery Collins                      **Seconded:** Alison Smith

**Carried without dissent.**

### **5.2. Matters Arising**

It was confirmed that an interruption in the supply of practitioner certificates (Item 12.1.) has been resolved.

## **6.0. Directors Report**

### **6.1. Directors Report to Council**

#### **6.1.1. COVID-19 Arrangements**

The Executive, in accordance with the DPER and Civil Service Blended Working Guidelines, are developing a Blended Working Policy using the templates provided.

#### **6.1.2. Emergency Ambulance Crewing Model**

While no requests have been received from Licensed CPG Service Providers to move from the current PHECC Minimum Emergency Ambulance Crewing Level Standard, a number of enquiries have been received from Practitioners on the matter.

It was reaffirmed that the current PHECC Minimum Emergency Ambulance Crewing Model Standard is two PHECC Registered Practitioners, one of whom is at the level of Paramedic or higher and that the ideal crewing model for those emergency calls which may require the Paramedic standard of care, is two PHECC Paramedics or higher.

Related correspondence from the Director of NAS regarding the impact of any changes to the current arrangements on service pressures and future workforce challenges was noted.

Acknowledging that Council had agreed in July 2021 that the Crewing Model Standard be revisited in the final quarter of that year, when hopefully the current phase of the Pandemic would have passed, it was agreed that a review was now timely and should be conducted in the near future. Any review should be evidence-based and take account of current literature and also how current protocols are being met together with any changes or difficulties which have arisen during or after the Pandemic.

It was requested that the crewing models in relation to Protocol 37 also be included in any such review.

*Fiona McDaid & Tomás Barry joined the meeting during the above discussion.*

*Due to time pressures, further discussion of this item suspended while Council considered Agenda Item 8.0 and 9.0., at which time the agreed Agenda was resumed.*

#### **6.1.3. DoH Quarterly Meeting**

A meeting with the Department is scheduled for July 15<sup>th</sup> at which the matters of legislation and specialist paramedicine will feature prominently on the agenda.

#### **6.1.4. CPG Update Training Anomaly**

Referring to Council's previous decision to limit AP CPG update training on the 2021 suite of CPGs to RIs approved to deliver Paramedic or AP level training only, several factors in relation to the training, that may not have been significant issues in 2017, have since arisen post the development of the current 2021 suite of CPGs.

Limited options for Licensed CPG Service Providers to become compliant and challenges for those AP Practitioners with no clearly defined training pathway were acknowledged.

Following consideration, Council approved the Director's recommendation that the Education & Training Committee examine potential pathways for AP level CPG update training that could apply to Paramedic level also.

#### **6.1.5. Potential Data Breach Following Q&S Committee Meeting**

Council was informed of the circumstances of an unintentional data breach following a meeting of the Quality and Safety Committee on 29 June 2022. An outline of actions taken, which included notification of the minor infringement to the Data Protection Commissioner, was provided.

The Chair commended the rapid response of both the Executive and the Council Committee to this incident. Current policies and procedures will now be reviewed to identify opportunities for further learning. A full Report from PHECC's Data Protection Officer is awaited in addition to the interim report already received.

#### **6.1.6. Poor Performance by an ATI in the QRF Process**

A positive meeting has taken place with the ATI concerned wherein shortcomings of the Quality Review Composite Report were acknowledged and the suspension of approval, in accordance with current Council Rules, was confirmed. Undertakings have been received that no courses will be run by the ATI during the period of suspension.

#### **6.1.7. COVID-19 Temporary Register Cessation**

As previously indicated, the COVID-19 Temporary Register has now ceased, and former temporary Registrants have been invited to contact PHECC should they wish to pursue restoration of their previous registration status or have completed the Recognition of Qualifications process and wish to apply for registration on that basis.

#### **6.1.8. Temporary Education Management Arrangements**

Due to the temporary absence of Education Programme Manager, the Examinations and Clinical Information Programme Manager will take over responsibility for the day-to-day management of the department while the Clinical Programme Manager will continue to take the lead role in the development of the new Education Standards and Competency Framework development project.

The Chair thanked both for undertaking these additional duties.

### **6.2. Delegated Decisions of the Director**

The report as included in Council papers, was noted.

### **7.0. Quality & Safety**

A series of interconnected documents, as recommended by the Quality & Safety Committee, were presented to Council for approval. Following a number of clarifications and minor wording amendments, the following resolutions were agreed.



## **7.1. Quality Assurance Programme**

### **7.1.1. STN034 Governance Validation Framework Standard V.2\***

**Resolution:** That Council approves and holds for release at a future date, STN034 GVF Standard V2.

**Proposed:** Hillery Collins      **Seconded:** Patrick Fleming

**Carried without dissent.**

### **7.1.2. GUI046 GVF Standard Guidance for Licensed CPG Service Providers\***

**Resolution:** That Council approves and holds for release at a future date, GUI046 GVF Standard Guidance for Licensed CPG Service Providers.

**Proposed:** Aidan O'Brien      **Seconded:** Martin O'Reilly

**Carried without dissent.**

### **7.1.3. STN035 Assessment Rating System V1\***

**Resolution:** That Council approves and holds for release at a future date, STN035 Assessment Rating System V1.

**Proposed:** Alison Smith      **Seconded:** Martin O'Reilly

**Carried without dissent.**

### **7.1.4. POL033 Council Policy for Recognition to Implement CPGs V8\***

**Resolution:** That Council approves and holds for release at a future date, POL033 Council Policy for Recognition to Implement CPGs V8.

**Proposed:** Hillery Collins      **Seconded:** Alison Smith

**Carried without dissent.**

### **7.1.5. STN032 Licensed CPG Service Provider Medical Director Standard (Roles & Responsibilities)\***

**Resolution:** That Council approves for immediate release, STN032 Licensed CPG Service Provider Medical Director Standards (Roles & Responsibilities) V1.

**Proposed:** Hillery Collins      **Seconded:** Aidan O'Brien

**Carried without dissent.**

### **7.1.6. STN033 Requirements for Privileging PHECC Practitioners V1\***

**Resolution:** That Council approves for immediate release, STN033 Requirements for Privileging PHECC Practitioners V1.

**Proposed:** Aidan O'Brien      **Seconded:** Alison Smith

**Carried without dissent.**

### **7.1.7. GUI045 Small Scale Clinical or Research Audit Project V1\***

**Resolution:** That Council approves for immediate release, GUI045 Small Scale Clinical or Research Audit Project V1.

**Proposed:** Jason van der Velde      **Seconded:** Hillery Collins

**Carried without dissent.**

Further important documents to support the task of aligning the GVF and the QRF assessment systems into a common structure will be presented to Council in due course.

The Chair acknowledged the level of work involved in developing and updating documentation presented and thanked all those involved in the process.

*Niamh Collins and William Merriman departed the meeting during the above discussion.*

## **7.2. CPG Upskilling**

Due to unique circumstances presented because of the COVID-19 Pandemic, Council was asked to approve the extension of the time-limit for upskilling by Paramedics and Advanced Paramedics from 18 months to 24 months for those CPGs approved by Council in August 2021. Upon consideration, Council passed the following resolution.

**Resolution:** That Council approves to extend the time-limit for upskilling by Paramedics and Advanced Paramedics on the new 2021 suite of CPGs, as detailed in POL018 Council Policy for Implementation Timeframes for CPGs, by 6 months to 31 August 2023.

**Proposed:** Hillery Collins                      **Seconded:** Aidan O'Brien

**Carried without dissent.**

## **8.0. Clinical Matters**

### **8.1. Community Paramedicine Framework\***

The Framework, submitted to MAC by the Community Paramedicine Sub-committee and considered at their meeting on 28 June 2022, was now recommended to Council for approval.

The Chair thanked the Sub-Committee for the significant work involved in bringing the project to its current state. It was acknowledged that it will be a "living document" and will, as a result, be subject to further changes post the planned stakeholder consultation.

Following several observations, Council endorsed the Framework via the following resolution.

**Resolution:** That Council adopt the Community Paramedicine Framework as presented and proceed with general consultation.

**Proposed:** Hillery Collins                      **Seconded:** Jason van der Velde

**Carried without dissent.**

### **8.2. Interim Mechanism for Specialist Paramedics\***

Recognising that the proposed Frameworks for Critical Care and Community Paramedics does not fit fully within current legislation and that a separate engagement is underway to introduce legislative changes to enable developments in pre-hospital emergency care, an interim mechanism was proposed to facilitate the continuation of and to provide interim regulatory oversight of future Specialist Paramedics, including the current Community Paramedicine and Critical Care Paramedic services. Upon consideration Council passed the following resolution.

**Resolution:** In the absence of legislative change, Council endorses the interim mechanism to facilitate the ongoing development of specialist paramedic practice for a period of 1 year.

**Proposed:** Hillery Collins                      **Seconded:** Fiona McDaid

**Carried without dissent.**

*Pat Fleming and Dennis Keeley joined the meeting during the above discussion.*

*Council took a short recess. Tomás Barry departed the meeting as planned.*

## **9.0. FRACC Matters**

Several items, considered and approved by FRACC at their meeting of 16 June last, were presented to Council by the Vice Chair of FRACC.

### **9.1. POL053 Fixed Asset Policy\***

The Policy, which outlines the maintenance and creation of a Fixed Asset register together with related Depreciation and Disposal policies was considered by Council and Approved.

**Resolution:** That Council approves POL053 Fixed Asset Policy, as approved by FRACC and presented in Council papers.

**Proposed:** Hillery Collins

**Seconded:** Fiona McDaid

**Carried without dissent.**

### **9.2. OCAG 2020 Management Letter Tracker Update**

An update on outstanding actions of the OCAG 2020 Management Letter were presented to Council, noting that closed items have now been removed from the updated document.

### **9.3. Risk Register**

The updated Risk Register highlighting amendments since the previous version was presented and noted by Council. As recommended by FRACC, all low category risks will be removed from future presentation to Council, though will be retained on file for future reference.

*The meeting reverted to Agenda Item 6.1.3.*

## **10.0. Secretary Matters**

### **10.1. Council Activity & KPI Metrics**

The Council Secretary presented a number of slides on the development of Key Performance Indicators for Council which may be used in communications and in giving assurances to other stakeholders.

Council requested that meeting preparatory time and Council Committee involvement be considered in future metric reporting.

## **11.0. Register**

### **11.1. Register Report**

The Register Report, as detailed in Council papers, was noted by Council. Further developments in the presentation of data were signalled by the Director.

## **12.0. AOB**

### **12.1. Patient Handover at Emergency Departments**

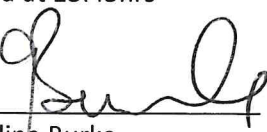
The Vice-Chair raised the issue of safe patient handover protocols at Emergency Departments [EDs] and the extent to which these were being complied with, given reports of extensive delays taking place at EDs. It was considered important that PHECC engage with this issue in the cause of protecting the public. It was suggested that evidence-based data are available on this matter which should be sought by PHECC and brought to the attention of the Department of Health. It will feature as a future Council agenda item once evidence-based data have been obtained.

*The Director left the meeting, as planned, during the above discussion.*

In closing the meeting the Chair reminded all that the next meeting will take place in Kilkenny on September 7th and 8th next with further details to follow.

The meeting terminated at 13:45hrs

Signed:

  
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Jacqueline Burke  
Chairperson

Date: 8<sup>th</sup> September 2022