

# PHECC Council Meeting Minutes

## 13 October 2022



### **Present:**

Jacqueline Burke (Chairperson)  
Fiona McDaid  
Tomás Barry

### **Apologies:**

Conor Deasy  
Jimmy Jordan  
Tess O'Donovan

### **Video Conference:**

Jason van der Velde (Vice-Chair)  
Aidan O'Brien  
Alison Smith  
David Menzies  
Dennis Keeley  
Hillery Collins  
Martin O'Reilly  
Niamh Collins  
Patrick Fleming  
William Merriman

### **In attendance:**

Con Foley, Council Secretary  
Richard Lodge, PHECC Director  
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 reported on a complaint received by PHECC.

### **2.0. Open & Welcome**

The Chair opened the meeting by welcoming all attendees and noting apologies received. It was noted that the Vice-Chair would assume the Chair of the meeting at 12:00 approximately upon the Chair's departure.

A period of reflection was called for by the Chair for the deceased and other casualties of the recent tragedy at Creeslough, Co. Donegal. The Chair recognised all those who responded to the incident, both lay and professional, and commended all the first responders and practitioners involved.

Condolences were expressed to Patrick Fleming on his recent family bereavement.

### **3.0. Declarations of Interest**

No declarations of possible conflicts of interest had been received for any matter on the Agenda.

### **4.0. Chairs Business**

The Chair reported that the Finance Manager had given notice of resignation, with regret. The Director has commenced the recruitment process for the position.

#### **4.1. Correspondence**

The Chair referenced the Closed Meeting above wherein Council was briefed on correspondence which had been received in regard to a Freedom of Information request.

#### **4.2. Legislation Update**

The Chair reported on an extended call she had with the Department regarding PHECC's legislative deficiencies and the considerable time which had elapsed in addressing these. Correspondence detailing more definitive progress is expected from the Department by the November Council meeting. Council will consider this correspondence prior to agreeing further action.

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

### **5.1. Draft Minutes 08 September 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 08 September 2022.

**Proposed:** Jason van der Velde

**Seconded:** Patrick Fleming

**Carried without dissent.**

### **5.2. Matters Arising**

There were no matters arising from the minutes.

## **6.0. Directors Report**

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

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

The blended working policy, using the templates as developed, are being pursued cognisant of sustainability and energy saving measures. The increasing levels of Covid-19 and influenza were noted.

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

A request for expressions of interest [EOI] from appropriate parties to carry out an evidence-based review, taking account of current literature on the subject, is being prepared with the active involvement of the Research Committee.

#### **6.1.3. Patient Handover Times at Hospital Emergency Departments**

Council approved that the Director, in conjunction with the Research Committee, urgently progress an EOI for appropriate parties to carry out an evidence-based review of the related current data and the impact on patients. The question of impacts on practitioners of extended waiting times at EDs was also raised. It is hoped that the outcome of the project, a report on clinical risk posed, will be available within 2 months of the project being awarded.

#### **6.1.4. Meeting with the DoH Medicines Unit**

A request for an informal meeting with the Unit is currently being pursued with a view to identifying matters of mutual interest before drawing up a formal meeting agenda.

#### **6.1.5. PHECC ISO 9001 Accreditation**

Post a successful two-day audit, PHECC's ISO 9001 Accreditation has been renewed, with no non-compliances noted and the governance structures and frameworks complimented by the auditors. The Chair, and Council, congratulated all involved on the successful renewal of the ISO certification.

#### **6.1.6. Notification to the Licensed CPG Providers of the Interim Arrangements for the Community and Critical Care Paramedics**

The Director and the Chair of MAC are jointly engaged in producing a communication to all Licensed CPG Service Providers detailing interim arrangements, as agreed by Council, to enable practise at Community and Critical Care Paramedic levels. This communication will rely on the powers conferred in S.5, (j), ss. (q) and (r) and (s), of SI 575, (THE PRE-HOSPITAL EMERGENCY CARE COUNCIL (ESTABLISHMENT) ORDER, 2000 (AMENDMENT) ORDER) 2004 as follows.

*(j) by the addition of following sub-articles the to Article 4:—*

*(q) prepare standards of operation for pre-hospital emergency care service providers to support best practice by pre-hospital emergency care practitioners.*

*(r) recognise, in accordance with rules made by the Council, those pre-hospital emergency care service providers which undertake to implement the clinical practice guidelines prepared pursuant to sub-article (o) of this Article.*

*(s) establish and maintain, in accordance with rules made by the Council, a register of pre-hospital emergency care practitioners (in this instrument referred to as the register) who are holders of the N.Q.E.M.T. at the level of competence of*

*emergency medical technician, paramedic or advanced paramedic, as the case may be, which register shall be divided into three divisions which shall be known as the emergency medical technician division, the paramedic division and the advanced paramedic division.*

#### **6.1.7. Matters in relation to PHECC Licensed CPG Service Providers Privileging PHECC Registrants**

Following a number of issues which had developed over recent years, amendments have been made to the STN032 “Licensed CPG Provider Medical Director Standard” wherein the responsibility for privileging practitioners is now a joint responsibility of the CEO/Director and the Medical Director of a CPG Service Provider and applies to practitioners who are “acting on behalf of the licensed PHECC CPG Service Provider as an employee, contractor or volunteer”. A detailed list of oversights has also been included which the CPG provider is obliged to supply and observe in relation to all privileged practitioners.

#### **6.1.8. Matters in relation to PHECC Licensed CPG Service Providers and non-PHECC Licensed CPG Service Providers “Transporting Patients”**

In response to a request for clarification on this matter, a communication is being prepared for all PHECC Registrants in the matter of “working” for a non-PHECC-licensed CPG Service Provider.

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

The report, as included in Council papers, was noted including a Licensed CPG Service Provider GVF Site Assessment Report.

#### **7.0. Education Report**

##### **7.1. Endorsement of QQI Principles\***

A summary of the Quality & Qualifications Ireland [QQI] published ‘Principles for Professional Engagements with Education Providers, including Programme Validation, Professional Accreditation and Approval’ document, as included in Council papers, was provided. The principles have been agreed widely and PHECC Executive has actively engaged in the process. Acknowledging the obvious benefit from inclusion being the alignment of the qualification leading to EMT status with QQI, Council passed the following resolution.

**Resolution:** That Council approves the Education and Training Committee recommendation to endorse the QQI Principles for Professional Engagements with Education Providers, including Programme Validation, Professional Accreditation and Approval.

**Proposed:** Fiona McDaid

**Seconded:** Patrick Fleming

**Carried without dissent**

The proposed endorsement statement below was also approved by Council.

*The Pre-Hospital Emergency Care Council has considered the principles and values set out in the document Principles for Professional Engagements with Education Providers, including Programme Validation, Professional Accreditation and Approval and agrees to act in accordance with and in the spirit of these principles in conducting its validation/accreditation/approval activities and any other relevant activities.*

#### **8.0. Clinical Report**

##### **8.1. Malpresentations CPG Update\***

Following consideration of related correspondence to the Chair of Council, dated 14 January 2022, the Medical Advisory Committee [MAC] presented the updated Malpresentations CPG for Council consideration. Council approved the CPG via the following resolution.



## **10.0 Secretary Report**

### **10.1 Review of S.1.8. of LEG012 Council Standing Orders\***

An explanation of amendments to Section 1.8 and 18.6 of Council Standing Orders, as detailed in Council papers, was provided. This amendment allowed for the retention of the Emergency Decision Making Group of Council. Section 1.8. will be deleted and an amended Section 18.6 was tabled for approval. Council passed the following resolution, and an amended Standing Orders document will be laid before the Council meeting in November.

**Resolution:** That Council approves the amendment to Section 18.6 of LEG012 Council Standing Orders.

**Proposed: Fiona McDaid**

**Seconded: David Menzies**

**Carried without dissent**

*Council took a recess. Jacqueline Burke departed the meeting.*

The Vice-Chair, Jason van der Velde, chaired the meeting from this point.

## **11.0. Registration Report**

### **11.1. Registration Committee Update**

The Chair of the Registration Committee gave a briefing to Council arising from the inaugural meeting of the Registration Committee which had taken place on September 29th last. This included induction matters, membership, committee terms of reference, roles, an outline work plan, and other specific matters. Three Expert Committees would be formed, specifically: Continuing Professional Competency; Return to Registration; Registration Classes.

It was agreed that the Chair of the committee and the Director will review costings and resources to progress CPC at P and AP levels. The topic will be included in further strategic discussion at the upcoming Council meeting.

Council was updated that two recent FTP related contracts have been awarded.

### **11.2. Register Update**

The updated Register Report was presented to Council including new presentations on various high-level analyses of the Register. This information will be expanded for the next Council meeting.

It was agreed that a list of new individuals being added to the register will be presented to Council for noting purposes going forward.

## **12.0. FRACC Report**

### **12.1. FRACC Update**

The Chair of FRACC joined the meeting and provided an update to Council on the following matters:

**12.1.1. Financials:** Based on the end July figures already supplied to Council for noting, the Chair reported that the August and September actual figures to hand indicated, as set out in the July report, that the year-end financial outcome for PHECC will show a break-even position.

**12.1.2. 2021 OCAG Management Letter:** of the 19 items indicated by OCAG, to date 15 have been fully resolved. The appointment of a Human Resources manager is the only outstanding issue as the other three items are in the course of being addressed.

**12.1.3. OCAG Audit of 2021 Financials:** This audit is currently underway but will not conclude until after the departure of the Finance Manager. A number of requests from OCAG are currently being followed up.

**12.1.4. Internal Audit Programme:** Pinnacle Consulting have been appointed after a competitive tender. An Internal Audit Programme has been agreed for 2022, 2023 and 2024.

**12.1.5. Assessors Panel Deep-Dive:** Ernst & Young have been appointed to undertake this task, the results of which will include recommendations and draft policies and procedures for the future management of this panel. An initial report is expected in early 2023.

**12.1.6. Policies:** Policies for Travel and Subsistence and Fixed Assets have been approved by Council. Drafting of the new procurement policy was to have been completed in 2022 when new procedures were implemented. It is now scheduled for completion in early 2023. It was agreed by FRACC to allow the new procurement procedures to be in, and possibly be modified, during 2022, before drafting the new policy

**12.1.7. Risk Register:** The Register has been reviewed at each FRACC meeting with no material changes noted. The addition of the impending vacant Finance Manager position will be included in Risk Register.

Three FRACC meetings have already taken place and further two meetings are scheduled before year end.

### **13.0. AOB**

The Council Secretary indicated that contact would be made, at an early date, with Committee Chairs regarding the gathering of KPI data for their committees for the third quarter of 2022.

The Chair thanked Council members and Executive for their attendance.

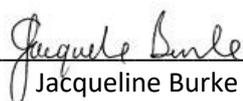
The next Council meeting will take place on Thursday 17th November at 10:00AM at the Killashee Hotel, Naas and will be the last full Council meeting for 2022.

A meeting of the Strategy Steering Group, which comprises the Chair and Vice Chair of Council and the Chairs of Standing Committee of Council, will take place at the same venue on the evening prior to the Council meeting.

The Strategy Meeting of Council will take place in the Lyrath Hotel, Kilkenny on December 7<sup>th</sup> and 8<sup>th</sup> next. It is not planned to conduct any normal Council business at this meeting; however, provision may be made for urgent items that need to be addressed prior to the January 2023 Council meeting.

The meeting terminated at 13:20hrs approx.

**Signed:**

  
Jacqueline Burke  
Chairperson

**Date:** 17<sup>th</sup> November 2022