

PHECC Council Meeting
Thursday 14 February 2019

Present:

Jacqueline Burke (Chair)
Hillary Collins (Vice Chair)
Jimmy Jordan
Stephen Brady
Pat Hanafin
Shane Mooney
Patrick Plunkett
David Menzies
Tess O'Donovan
Shane Knox
Thomas Keane

Mick Molloy – Teleconference
Conor Deasy – Teleconference

Apologies:

Patrick Fleming
Fiona McDaid
Jason van der Velde
Martin Dunne

In attendance:

Richard Lodge, PHECC Director
Brian Power, PHECC PDO
Con Foley, Chair Compliance and Audit Committee
Ricky Ellis, PHECC PDO
Kathleen Walsh, PHECC PDO
Jacqueline Egan, PHECC PDO
Karen O'Neill, PA to the Director
Liz Dempsey, PHECC Staff Representative
Bláthnaid O'Donnell (Acting Council Secretariat)

1. Chair's Business

1.1 The Chair welcomed attendees to the meeting and noted apologies received. A welcome was extended to Karen O'Neill, PA to the Director, who commenced her post in PHECC this week.

2. Minutes and Matters Arising

2.1 Draft Minutes December 2018

The draft Minutes from the last Council Meeting of December 2018 were presented for consideration and approved.

Resolution: That the Council approve the Minutes of the meeting of December 2018

Proposed: Patrick Hanafin
Carried without dissent

Seconded: Patrick Plunkett

2.2 Matters Arising

2.2.1 The financial information on the funding of the GVF project that was requested has been circulated to all members. This included the total expenditure on GVF for the past 4 years. The costings going forward are expected to remain static. This project started several years ago under the previous Council. There was never an agreed budget, although there were estimated costings and the final costs were more than originally estimated. We now have a piece of very high-quality work, which may have exceeded original expectations. It also spanned a period when there was no Council in place and a period of transition regarding Directors.

2.2.2 The Director chaired a meeting with Martin Dunne and members of NAS Senior Management Team, with Stephen Brady and Brian Power representing the Priority Dispatch Committee. The positive meeting addressed the participation of NAS members in the Priority Dispatch Committee and dates are being arranged for a follow-up meeting.

2.2.3 Following a discussion with the CEO of the Medical Council, the Director has commenced compiling a letter of formal complaint in relation to the three medical practitioners involved in the incident of 9th April 2016. It was confirmed that we may include information that came into our possession from the Coroners Hearing. Dr. Patrick Plunkett and Dr. Mick Molloy will assist the Director on this matter.

2.2.4 Following a number of positive meetings with DoH officials regarding the inadequacies of PHECCs legislation, the content of the letter to the Minister of Health has been shared with our DoH colleagues. There is a level of understanding and awareness of the legislative deficit and a willingness to discuss the situation.

Following recent discussions on the matter Brian Power was invited to share suggestions for changes to the current legislation based on existing legislation. Brian also shared examples of heads of Bills based on the same topic, both of which have been well received.

Hillery Collins requested clarity on the members who would represent Council should a meeting with the Minister for Health be forthcoming. The Chair advocated that the Chair of the Fitness to Practice Committee be present as the area of fitness to practice would be at the forefront of discussion. Shane Mooney advised that he, as a practitioner, would be willing to attend. Ultimately it was decided that attendees at such a meeting would be The Chair of Council, The Director, the Chair of the Fitness to Practice Committee and the Chair of the Quality and Safety Committee, who is also the Chair of the Preliminary Proceedings Committee and a PHECC registered practitioner.

The Chair advised Council that the most significant topics to address at the meeting would be the weakness in PHECC's legislation, protection of title and the limited sanctions that PHECC can enforce in FTP matters. The importance of highlighting the risk to the public if these matters are not adequately handled is imperative.

2.2.5 The Director has met with the Consultants pitching to carry out the HR review to agree the scope of the exercise and is currently awaiting a timescale and start date together with the projected costings. Full proposals and pitch are expected by the end of this week.

2.2.6 The Director has issued a six-month extension to the Civil Defence GPG Provider Licence and has met with the Civil Defence to agree the details of two interim progress report meetings that will take place during that time. The Civil Defence have indicated that they are confident they will be fully compliant with GVF criteria by the end of the extension period.

2.2.7 The Director has been in contact with the design consultants to agree the proposed changes to the layout of the PHECC Strategy and is currently awaiting a timeframe and estimated costs. The degree of urgency was relayed and the fact that we need to be in a position to launch the Strategy by the end of Q1 2019.

3. Director's Report

The Director read through the contents of the report for information. The following topics were discussed in relation to the contents of same.

3.1 Brexit

Members of the Executive have attended several meetings in the DoH with the other healthcare regulators in relation to preparation for Brexit. The focus is on engagement with our UK colleagues, the Health and Care Professionals Council (HCPC). It was confirmed that the EU directive on recognition of qualification and registration for UK practitioners will no longer apply, and they will revert to third country status. The EU directive for the provision of temporary and occasional services will no longer apply to UK registrants from March 2019 if a 'no deal' exit occurs.

The Director has had discussions with the CEO of the HCPC in regard to a potential MOU. PHECC participated in a panel session at the International Healthcare Professionals Crossing Borders Conference (4th February 2019, Dublin) with representatives from the EU Commission, DoH, Irish & International Healthcare Regulators and professional organisations taking part.

As a result of this meeting there has been increased focus on the administering of medications by paramedics from both jurisdictions when crossing the border. Further meetings are planned.

The Department has advised that attention will need to be centred around the administration of medications across the border. Practitioners crossing the border to the Republic of Ireland, and vice versa, may be working ultra vires. Mr Power stated that it would be necessary for NAS to engage in discussion with the Northern Ireland Ambulance Service regarding protection of their personnel when practising/administering medication cross-border. A possible solution may be for personnel, at Paramedic level, acting on behalf of Northern Ireland Ambulance Service, as a statutory organisation, to apply for PHECC recognition, and vice versa, although it is not clear how this can be facilitated under current legislation.

3.2 Financial Predictions for 2019

The Director addressed the topic of financial projections for 2019. There is a possible range of deficits posited for the year ahead, however currently there are too many unknowns for an accurate forecast and it is anticipated that it may be possible to achieve a break even if the necessary steps are taken to facilitate this.

The matter of grants was raised and the implementation of a system for channelling and approving same.

The Director tabled a chart indicating the grants paid in 2017-2018 together with current and anticipated applications for grants in 2019. These included recent applications for CFRI and OHCAR. It was confirmed that there would be no application from The EMS Gathering in 2019. Given the current financial deficit, the Director stressed the importance of considering all grant applications together rather than as they were received. It was agreed to consider all applications at the March Council meeting.

The Chair highlighted a previous decision to develop a system of assessing applications for funding. Tess O'Donovan stated that criteria and processes will need to be developed to deal with these applications going forward. This point was reiterated by Jimmy Jordan who indicated that clear and unambiguous criteria will need to be put in place upon which to base decisions of funding and to clarify the process for both PHECC and applicants.

David Menzies stated that if PHECC were to continue operating on an annual budget of €2.7 million in perpetuity that it will not be viable to take on any extra costs. Dr Menzies suggested that, without overcrowding the Minister's agenda for any potential meeting that may take place, it may be prudent to attempt to address this matter in some format.

Hillery Collins advised Council that PHECC now had options in relation to funding and grants and that discussions are scheduled in the coming months to deliberate the matter of funding for the Advanced Paramedic Programme.

3.3 Temporary Registration

There have been several requests recently to make the temporary register available on the PHECC website. There are a number of issues for the Executive to resolve relating to purely technical aspects, GDPR requirements and the potential impact of a disorderly Brexit, before this matter can be formally brought to Council for consideration. Council were reminded that there is no mechanism for temporary registration of UK registrants post Brexit.

3.4 Concerns raised by CPG Provider

There has been a request for PHECC to address issues of operational practices by CPG providers in relation to event management, mainly involving employment issues and employment status of sub-contractors and tax implications which are outside the remit of PHECC as a regulator. PHECC may have a role to play if practices affect the insurance status of the GPG provider and/or the individual practitioners. Legal opinion has been sought.

3.5 Risk Register

The Executive have carried out a review of the Risk Register and this was presented to the C&AC for consideration. This is very much a work in progress but there has been clarification of purpose and mechanisms of the Risk Register. A revised version of the register will be presented at the March Council meeting. The Executive and the C&AC agree that the ownership of the Risk Register rests with the Executive. The Risk Register is a tool or mechanism by which the Director makes the Council aware of potential risks to the organisation and their objectives, together with the present controls and action plans to mitigate those risks further. It is therefore a dynamic document that is constantly updated. It is proposed that the high-level risks are presented as an agenda item to the Council on a quarterly basis and the entire register is reviewed by Council annually. The role of the C&AC is to ensure this process happens and that the Register is concise and accurate.

4. Clinical Matters

No agenda items

5. Quality and Safety

5.1 Ambulance Crewing Models – Request for Data

Shane Mooney opened discussion on ambulance crewing models. There is a proposal from NAS to move to a revised crewing model, however, no resolution has been reached as there has been ongoing correspondence back and forth requesting further information. The Quality and Safety Committee are seeking further evidence to support this move. Shane Knox advised that an internal review is scheduled to take place within NAS.

Pat Hanafin expressed support of Shane Mooney's view on this matter – Mr Hanafin stated that PHECC must ensure that it protects its own personnel and registrants as well as the public. Mr Hanafin highlighted the need for stakeholders to sit around a table in an attempt to resolve such issues.

Shane Mooney suggested again trialling a pilot model, based on NAS's proposal, at various stations around the country in attempt to see if this may work going forward.

Stephen Brady suggested the regulator should lead discussions as public protector. Mr Brady further reiterated the need for cooperation and engagement from all stakeholders together with the need for protection of practitioners as well as the public.

Brian Power drew attention to PHECC's mission statement of protecting the public highlighting that there is no actual standard in place regarding crewing models but more of an aspirational resolution from Council. Mr Power advised that the Priority Dispatch Committee are trying to engage with all parties regarding this matter and that next month a member of the Priority Dispatch Committee from DFB and PHECC will explore the Ambulance Response Programme within Scottish Ambulance Service.

It was agreed that the Priority Dispatch Committee is the preferred forum for discussion. It was ultimately concluded that re-engagement between all parties is essential to ensure forward progress – to collaborate then operationalise all the while ensuring that PHECC's mission statement is at the forefront of all discussions.

5.2 Protected Title

Brian Power advised Council that he had transposed the Nurses and Midwives Act, 2011. Mr. Power undertook this exercise in an effort to demonstrate how legislation could be developed around this area. Mr Power advised that, in light of Brexit, he had constructed an extra paragraph regarding members of Northern Ireland Ambulance Service responding across the border and assurance that they would be legally covered. A temporary method of managing this would be for this matter to sit under the Patient Safety Regulations which are currently going through the Dáil.

6. Register

The Director read through the contents of the Register for information and the contents of same were noted.

7. Risk

Developments in the Risk Register were noted and will be addressed in more detail at the next Council Meeting.

8. Governance and Finance

8.1 Con Foley stated that the Compliance & Audit Committee can report to Council that the System of Internal Control in PHECC has functioned effectively in all respects for 2018. The Annual Report from the C & AC were presented to Council for consideration and subsequently approved.

Resolution: That Council accept the annual report of the C&AC

Proposed: Tess O'Donovan
Carried without dissent

Seconded: Hillery Collins

8.2 C & AC Draft Minutes – January 2019

There were proposals/discussions on establishing a Finance Committee as a Sub-Committee of Council.

Resolution: That the Executive produce a proposal in relation to the formation of a Finance Committee

Proposed: Hillery Collins
Carried without dissent

Seconded: Patrick Hanafin

8.3 Con Foley addressed the issue of reviewing the cost base of PHECC and seeking to make PHECC more cost neutral by recovering costs. This was part of a bigger piece of work that was ongoing, but given the current financial position there were a number of initiatives that warranted immediate attention.

The Director opened discussion by focusing on the costs of examination, certificates and fees. Following discussions, it was agreed that the Director would oversee a piece of work addressing the actual costs of all examinations, fees and certificates with a view to recovering costs and seeking to make all activities as cost neutral as possible.

The cost of issuing FAR certificates was focused on as an example of this and it was noted that external parties are charging higher fees than PHECC. It was deliberated whether Council should consider a reasonable increase which would in turn help towards PHECC's financial position as outlined in item 3.2. Hillery Collins recommended that Certificate fees should be in line with that of the Health and Safety Authority who looked after this area prior to PHECC. Council noted that PHECC's intention is to be cost neutral and, in an effort to ensure this, fees for FAR Certificates will need to be increased in line with the HSA, who charged €17.50. As an interim step, the FAR Certificate fees should increase immediately, subject to operational time lags.

Resolution: That the charge for FAR certificates be increased to €10

Proposed: Shane Mooney

Seconded: Hillery Collins

Carried without dissent

8.4 Con Foley raised the topic of split terms for Council Members and retirement schedules associated with same. Council were advised that multiple members are scheduled to retire in June and December 2020. Mr Foley stated that this is an issue that needs to be addressed with the Department of Health to afford them a sufficient timeframe within which to act on reappointing members. Con reported that this concluded the topic of split terms for Council members and that it is the opinion of the C&AC that Council was compliant with our SI.

8.5 The composition of the C & AC was discussed. Shane Knox noted that a female staff representative who had completed her term on the committees had been replaced with a male representative which opened a discussion regarding the gender balance on Council and all committees. The Chair has requested a breakdown of the structure of all Committees so as to address the matters of gender balance and diversity.

9. Irish Heart Foundation Presentation

9.1 Presentation by Tim Collins and Bridget Sinnott from the Irish Heart Foundation.

9.2 Subsequent discussion arose following IHF presentation and the funding request arising from same. It was stressed that the requirement for cooperation and the implementation of Service Level Agreements between PHECC and the Irish Heart Foundation should be a key requirement of approving funding. David Menzies highlighted the risk of doubling up in terms of the issuing of PHECC Certificates and IHF Certificates and pointed out the importance of engagement between both parties to ensure maximum parallel cooperation. It was agreed by Council, that it would be beneficial to have one National Standard to incorporate one certificate and one qualification.

9.3 Council agreed, in principle, to issue funding based on determining the basis of PHECC's working relationship with the Irish Heart Foundation. The Director reiterated the requirement for all grant applications to be approved at one juncture as had been discussed at previous

Council Meetings. In line with this, Con Foley recommended allocating a discretionary pot to deal with any smaller funding requests that may arise throughout the year. This was agreed to be at the discretion of the Director.

9.4 Dr Menzies advocated the establishment of an Irish Resus Committee within a timeframe of the next five years.

10. Education and Standards

10.1 Kathleen Walsh read through the contents of the Summary Report of Committee Activity for information purposes. Shane Knox advised that there has been a considerable amount of work undertaken in relation to CPC.

10.2 The Director provided clarity on previous resolutions that had been agreed in relation to CPC. There had evidently been some confusion regarding the words of resolution both at Committee and Council. The resolution is clear, "that the Executive prepare a business case for the introduction of CPC".

A business case was prepared for four WTE's and was rejected by DoH. A subsequent business case for two WTE's for CPC was also rejected. There may have been a delay in requesting same due to a transition between Directors. Recent discussion with DoH suggest a resubmission may be viewed more favourably if PHECC were able to fund one or more of the positions themselves. The current proposal is for 1 WTE, PDO (Grade VIII) and 3 positions of 0.3 WTE, 0.3 WTE and 0.2 WTE to support EMT, Paramedics and Advanced Paramedics respectively.

Recent decisions in relation to charges for FAR Certificates together with further cost cutting exercises could now make this a viable option in 2019.

10.3 Delegated Decisions of the Director – RI Practitioner courses*

Shane Knox referred to a resolution from January's Education and Standards Committee meeting wherein the following had been agreed:

Resolution: Approval to be sought from Council that accreditation and approval for Practitioner Programmes remain a function of the Education and Standards Committee

Proposed: Paul Lambert
Carried without dissent

Seconded: Gareth Elbell

Patrick Plunkett advised that this function had initially been delegated to the Director on the grounds that PHECC may have been operating without a Council. Now that this situation is secure Professor Plunkett recommended that the position revert so as to ensure that decisions are made by a panel of experts as opposed to falling on a single person.

The Chair queried whether or not reversing this decision would result in an increased workload on the Committee or, taking into consideration that the Committee sit every two months, could this result in any delays to matters being presented to Council. Shane Knox highlighted the requirement for a formal governance structure and best practice and stated that the scheduling of meetings should not be a factor. Dr Knox further indicated that Council would be presented with the recommendation from the Committee once they have reviewed the matter at hand.

Resolution: That applications for Recognised Institution Status (Practitioner Level only) and applications for course approvals/renewals (EMT, P and AP) should be presented to Education & Standards Committee for its consideration and approvals, with subsequent recommendation to Council for approval.

Proposed: Shane Knox
Carried without dissent

Seconded: Hillery Collins

10.4 RIs Responder Certificate Activity 2018

This matter is included for information purposes.

10.5 Quality Review Framework Revision

Kathleen Walsh presented a PowerPoint presentation to summarise the material contained in the Council Papers. This presentation outlined changes to the Quality Review Framework, feedback received and the procedure for how this is to be rolled out.

Clarification regarding the costs associated with this project was sought and Ms Walsh advised Council that the estimated costing would be €60,000 for 2019. This figure was gleaned from the projected numbers as had been discussed during the Executive Management Team Meeting earlier in the week.

Patrick Plunkett asked for clarification on any proposed sanctions for non-compliance of standards from RIs/ATIs. Professor Plunkett queried whether institutions should be advised that there may be a schedule of fees applied to cover any extra workload undertaken by PHECC as a result of non-compliance. Ms Walsh advised that policing of non-compliance will have to be stepped up and brought to Council.

Resolution: That Council approves and compliments Kathleen Walsh on her work done on the QRF

Proposed: Tess O'Donovan
Carried without dissent

Seconded: Shane Mooney

11. A.O.B

Discussion took place regarding clarification on expense claims. Legal advice has been sought and states that individuals who are employed by the Public Sector may only claim expenses from their employer who will then recover the costs from any third parties. No expenses can be claimed directly from other Public Sector bodies, Committees or Council irrespective of who nominated the individual to serve on that body, committee or Council. There are no exemptions in this ruling.

Resolution: That the status quo of PHECC paying expenses directly be maintained for expenses until 31st Dec 2018 and that the new system shall start from 1st January 2019.

Proposed: Patrick Plunkett
Carried without dissent

Seconded: Tess O'Donovan

Signed:


Dr. Jacqueline Burke
Chairperson

Date:

14/03/2019