

Mental Health Commission Meeting
Minutes of Meeting held on 21 January 2021
Held by way of MS Teams
10.30am – 1.00pm

Commission Members	Initials
John Saunders	JS
Rowena Mulcahy	RM
Dr Michael Drumm	MD
Nicola Byrne	NB
Dr Margo Wrigley	MW
Jack Nagle	JN
Colette Nolan	CN
Dr John Hillery	JH

Apologies	Initials
Patrick Lynch	PL
Tómas Murphy	TM
Ned Kelly	NK

Executive in Attendance	Initials
John Farrelly, Chief Executive	JF
Orla Keane, Secretary to the Commission, Head of Legal / Division Lead for MHT	OK
Dr Susan Finnerty, Inspector of Mental Health Services	SF
Gary Kiernan, Director of Regulation	GK
Simon Murtagh, Chief Operations Officer	SM
Áine Flynn, Director DSS	AF
Jenna Goodwin, Corporate Governance Manager	JG

No.	Matter	Action Required By
1	Private Session of the Commission The Commission held a short private session without the Executive present.	Chair
2	Declarations of Interests – To be signed and returned by email.	JG
3	The Minutes of the meeting held on 17 December 2020 were agreed. Decision 2 JH proposed approval of the minutes and JN seconded same. It was agreed that the points made regarding ECT shall be considered in relation to the 2020 Report together with the following additional points -	CE/RMT

	<ol style="list-style-type: none"> 1. Confirm that any patient requiring ECT across the country will have access to it if needed, and 2. St. Patricks is providing ECT for the whole country and it would be useful to know the number of public patients attending and the CHO area of origin. 	
4	<p>Chairperson’s Business The Chair informed the Members of the following –</p> <ol style="list-style-type: none"> 1. Update on New Commission Members – The DOH advised that the proposed nominations for the two vacancies are currently with the Minister for final approval. 2. Invitation to Minister Rabbitte to attend a Commission Meeting in 2021 re DSS – Minister Rabbitte has committed to attending the May Commission meeting. 3. Self-Assessment for 2020 – All self-assessments have been received and will be discussed at the Members’ private session at the February meeting. 4. Ethics Declaration for 2020 – one declaration outstanding. 5. Reminder – IPA Events 2021 – Members were encouraged to take up training opportunities provided and to contact the Secretary with any training proposals or requests for 2021. 6. Executive Matters – JS noted that the CE’s PMDS for 2020 has been successfully completed and sent to HR. 	All Members
5	<p>Chief Executive and Executive Reports <u>CE’s Report</u> The CE noted the following:</p> <ul style="list-style-type: none"> - All teams have been working on the Business Plan and Budget for 2021. The budget will be presented at the February Commission meeting. - A paper will be presented at the February meeting showing what has been achieved over the last two years in terms of the Strategic Plan. - An integrated business reporting function that links the strategic plan with risk and business reporting will be sought as part of the Business Plan this year. - Staff have continued to work hard throughout the pandemic. Working from home will likely be in place for the first two quarters and may be reviewed after that depending on the situation. <p>A discussion took place in relation to the HSE’s Covid-19 vaccination strategy and the steps the MHC have taken to ensure that residents and staff in mental health services receive the vaccine in line with the government priority plan. It was agreed that there needs to be parity between everyone over 65 regardless of whether they are in a nursing home or a mental health facility. GK noted a meeting took place yesterday with the Head of Operations at the HSE at which the need for parity was reiterated. It was noted that a communication received from HSE advised that between 25 – 29 January, everyone identified as part of the Priority 1 group in mental health facilities would receive the first dose of the vaccine. Centres will be contacted by the Covid team to verify that this takes place. The MHC aided the HSE to identify centres where there are people aged over 65. MHC’s contact with approved centres has shown that an increased number of centres are now getting access to the vaccine but a final schedule from the HSE identifying when all groups will receive the vaccine is still required. This will be monitored by the Covid team.</p> <p><u>Corporate</u> SM noted the following:</p> <ul style="list-style-type: none"> - Funding for 2021 has not yet been confirmed by the DOH however it had been flagged that an uplift would be received. It was further noted that additional projects 	SLT

have been identified in the Business Plan for 2021 to utilise additional funding received in an efficient and cost-effective manner.

- A letter was received from C&AG confirming that Mazars would be completing the 2020 Audit.

Legal

OK noted that a reply was received from DCEDIY in relation to a number of issues on the Heads of Bill to amend the 2015 Act and an update will be provided to the Legislation Committee in relation to this at the meeting next Monday.

MD queried whether the MoU signed with HIQA is new. OK confirmed that this is an updated MOU to reflect all changes and puts a formal basis on the arrangements for the parties to work together.

RMT Report

GK provided an update on Covid Monitoring and the following was noted:

- The MHC continues to provide a weekly update to DOH and HSE re outbreaks in approved centres and continues to liaise with these centres on an ongoing basis.
- There are currently 282 suspected or confirmed cases in approved centres and residential community centres.

The following updates were provided in relation to the RMT report:

- Monitoring and enforcement are proceeding as usual. There are 10 planned re-registrations in 2021.
- The development of the National Standards for Care and Support of Children in collaboration with HIQA is progressing well. The evidence review is due for publication at the end of this month which will set out how children receive appropriate care when they first come into contact with the system.
- The review of the Quality Framework with RCSI is progressing and governance arrangements will be finalised with RCSI by next week.
- In response to a query from JS, SF noted that Inspectors are currently completing outstanding reports and are due to start inspections in the middle of February. SF further noted that the process will be the same as in 2020 which includes spending a minimum amount of time on the unit, wearing PPE and a mix of onsite and offsite discussions.

A discussion took place in relation to the number of child admissions in 2020 which seem to be down significantly than in previous years. It was noted that there are still two CHOs where there is a high number of children being admitted.

SF noted that there has always been an issue with two CHOs in particular where there is limited staffing, and this reduces the number of beds available for children. SF further noted that Ireland has a low number of forensic beds and child beds in comparison to other countries in Europe. SF confirmed that Ireland has 2 forensic beds per 100,000 and Spain is the only country in Northern Europe where this figure is lower at 1.4. The number of beds is recorded per 100,000 as this is comparable internationally.

MHT

OK noted that the team has received an increased number of requests from approved centres, which are not part of the video conferencing pilot project, relating to people who have hearing problems. All of these requests have been accommodated. OK also noted that

	<p>the feedback to date has been very good. The main issue encountered related to connectivity but clear guidance on this has been developed and is being updated regularly.</p> <p><u>DSS</u> AF provided an overview of progress and noted that the six workstreams as set out in appendix have been situated in a timeline as requested at the December meeting. It was noted that if there is a pressure from DCEDIY in relation to moving the timeline forward from July 2022 (due to the government’s presentation at the UN Committee on the Rights of Persons with Disabilities in Geneva at around that time), an impact analysis will need to be conducted.</p> <p>AF further noted that the milestones and dependencies have been matched against dates and given red, green and amber rating. Currently, the only red item relates to the regulatory framework workstream and the ability of DCEDIY to ensure that a final Act and Regulations are in place by the deadline. It was agreed that the new structure of the report provides a clear picture of the actions and timeline. It was requested that the critical milestones also be colour coded to highlight which of these milestones are on the critical path to ensuring the project meets its deadline.</p>	AF
6	<p>Presentation of Business Plan 2021</p> <p>The CE introduced the presentation of the 2021 Business Plan. He noted that the Executive had taken into consideration the learnings from 2020, which has led to a more integrated approach. The CE acknowledged that the Commission is midway through its current Strategic Plan and that there are several actions planned for 2021 to contribute to the achievement of that Strategic Plan.</p> <p>Presentations on each area were then provided by each Member of the Senior Leadership Team outlining the plans for 2021 - MHT, Legal, Corporate Governance, RMT, DSS, Corporate Operations and Communications.</p> <p>Arising out of the presentation, a few comments were made:</p> <ul style="list-style-type: none"> - The Members acknowledged the comprehensiveness of the plan and the business planning process undertaken to achieve the plan as presented. - In response to a query from RM, OK noted that a central bank of all submissions on legislation would be created internally to ensure that a coordinated approach is in place and for ease of access. - JN noted that there is an action in the Programme for Government in relation to looking at metrics and indices for health and wellbeing and that it would be useful, where relevant, to connect with this action. - CN noted that the business plan included engagement with stakeholders on a remote basis and queried when face to face engagement might be re-introduced. The CE noted that for the first two quarters it is likely that remote engagement will continue, and the Executive will revert to face to face engagement once that is permitted. <p>The Chair also noted that the membership of the next Commission (which shall take effect May 2022) should reflect the interests of the DSS not just mental health but that is a decision for the Minister and the DOH.</p> <p>Decision 3</p>	JF

	JN proposed approval of the Business Plan for 2021 and RM seconded same.	
7	<p>Risk Management – Update on Revision of Risk Management Process Aidan Horan from the IPA joined the meeting and gave a short presentation on the work completed to date and the next steps.</p> <p>It was agreed that a confidential survey on Risk Appetite would be circulated to Commission Members and the Senior Leadership Team on Monday for completion by 1 February. Results of this survey would then be presented in an anonymised fashion at the February Commission meeting by the IPA. This survey is part of the process in updating the MHC’s risk management process.</p>	All Members
8	Committee Updates – No scheduled meetings since the last Commission meeting.	
9	Next Meeting – 18/02/2021 at 10.30 am	

ACTION LOG			
No	Action	Person Responsible	Status
1.	The critical milestones will be colour coded in the DSS report to highlight which of these milestones are on the critical path to ensuring the project meets its deadline of 1 July 2022.	AF	In progress
2.	Members and SLT to complete the Risk Appetite Survey that will be circulated by the IPA next week.	JG / SM	Complete

Dated: 18/02/2021

Signed:



By the Chair