National Public Health Emergency Team (NPHET)

COVID-19 Subgroup on Workforce - Meeting 1

Note of Meeting and Actions Arising

Meeting Date: Friday 6 March 2020

Time: 11:30 am

Location: Management Board Meeting Room (622), Miesian Plaza

In attendance:

Department of Health:

Paul Bolger, Director, Resources Division (Chair)

Gerry O'Brien (Sub-Chair), People Pay & Superannuation Unit (PPSU)

Eilish Timoney, People Pay & Superannuation Unit

Amanda Younge, Industrial Relations (IR)

Stephen Brophy, Governance and Performance Unit (GPU)

Kieran Cashman, Professional Regulation Unit (PRU)

Patsy Carr, Social Care Unit

David Noonan, Primary Care

Ray Healy, Nursing Policy

Derek McCormack, Office of the Chief Nursing Officer

Joan Regan, Acute Hospitals and Policy

Maeve O'Brien, Social Care Division

Tracey Phelan, People Pay & Superannuation Unit (Secretariat)

Emer Hanney, People Pay & Superannuation Unit (Secretariat)

HSE:

Anne Marie Hoey, National Director of Human Resources
Philippa Withero, Assistant National Director of Human Resources

1. Welcome

The Chair welcomed everyone to the meeting and a tour-de-table was carried out. The Chair outlined that the group will support existing operational activity and does not change existing governance structures. Chair highlighted the importance of timelines, looking at immediate, short-term and long-term actions including in the following areas:

- Focus on entire health sector (public and private)
- Protection of staff
- Flexibility
- Ease of hiring
- Rehiring of recently retired staff
- Concerns of employers
- Redeployment roadblocks
- Costs
- Feasibility
- Address actions submitted by other subgroups and feedback from engagement with representative bodies.

2. Membership of Group

Discussion held on membership of the Group. Consideration to be given to membership and how this group can support existing structures.

3. Update from HSE

Update on measures identified to deal with workforce requirements -

- Crisis management teams to identify areas to be deprioritised
- Redeployment policy drafted to issue today
- NRS to arrange contact with retired staff with critical skills
- Funding of re-registration
- Pension abatement
- Training local NNPU's training units to engage with each other and support hospitals in specialist areas
- Staff at employment contract stage HSE HBS to run reports today to identify
- Categorisation of critical staff
- Hours of part-time staff
- Agency staff
- Staff not using health skills to self-identify. Note to be done today
- Clerical and Admin staff required
- Twice weekly engagement with staff representatives underway

DOH suggested other Government departments may provide additional administrative support.

Group discussed barriers to recruitment, issues of sourcing staff outside Ireland, nurses' registration fees and re-registration fees for retired staff, lead-time for processing registration of non-Irish/EU trained nurses and exam fees for foreign nurses.

Discussion had on supports needed for HCWs and residents of S38s/palliative/S39s. Other Subgroups to identify service challenges.

Group discussed supply of nursing resources across Acutes and community and respite.

DOH advised that DPER considering pension abatement for retired health staff returning to work. HSE to provide details of requirements and to track incoming staff and salaries.

Discussion on wider workforce – army medical, prisons, academic bodies/disciplines, medical students.

Group discussed S39/non-HSE/contractors etc. Taoiseach's Office/Social Protection reviewing leave with pay.

Group discussed staff resilience and protection against burnout. Occupational health teams critical. Acutes Hospital Preparedness Subgroup to share WHO guidelines on protecting staff from burnout.

Agreement that there would be a derogation of interim control measures.

4. Update from other subgroups and areas

DOH advised that there may be cross-over of work between Workforce Subgroup and other NPHET subgroups. Operational matters will be considered through these subgroups.

5. AOB

Group advised of importance of tracking of staff to deal with COVID-19, costing, considering pay rather than WTE, provision of regular reports on expenditure for Government, ensuring proper controls are in place.

It is essential to balance needs and staff safety. HSE to look at captured data as matters progress.

Scenario planning is underway. It was confirmed that redeployment included redeployment of activities, this will have implications for Workforce/IR.

Actions Arising

	Action	Owner
1.	Draft Terms of Reference and circulate to group	DOH
2.	Consideration to be given to membership of the Group	DOH
3.	HSE to provide written update on measures identified to deal with workforce requirements and submit a Log of Actions to DOH	HSE
4.	Follow up on waiver of abatement in respect of rehire of retired staff	DOH
5.	Issue request to staff no longer using their medical skills to self-identify	HSE
6.	HSE to establish level of preparedness of S39s	HSE
7.	CNO and PRU to draft letters to regulators inviting proposals on dealing with barriers to recruitment	DOH
8.	Acutes Hospital Preparedness Subgroup representative to share WHO guidelines on protecting staff from burnout	DOH
9.	Details of next meeting to be circulated to group	DOH