

Video Conference on COVID-19

13/05/2020

Attendance: Minister Harris, Secretary General, CMO, HSE Chair, HSE CEO, HSE COO, Ms E Scanlon (minute taker)

Minutes

The minutes of the previous meeting (06/05/2020) were agreed.

Testing and Tracing

Minister Harris thanked the HSE for the substantial work done in building testing and tracing systems to scale in a short time frame and from the low base that was necessary before now. He emphasised the importance of continuing communications with the public to explain the process and the week on week improvements.

HSE CEO noted the HSE's planned publication of a paper and a media briefing on 14th May to set out for the public how the process is currently working and what plans and KPIs are in place to ensure a robust process that is completed in good time. Automation is being built in as much as possible and this is expected to have a significant effect on turnaround times.

It was noted that the time of day when people attend for swabbing and when the sample is then processed are playing into turnaround times, as are multiple different legacy systems and processes.

HSE CEO confirmed that there are more than enough people trained and ready to work as contact tracers in the context of any potential lifting of restrictions and associated wider movement of people in the community.

CMO noted that the planned timeline of swabbing being carried out same or next day, followed by the sample being tested same day or next day is important in addressing the WHO guideline. Given the period of time that a person is asymptomatic, the best strategy is to find, isolate and test their close contacts in order to break the chain of transmission.

It was noted that testing should be directed by a public-health led strategy. Testing capacity is not a target and excess must be retained within the system so that those who are symptomatic, close contacts of those who are confirmed cases and particular sectors or groups can be tested quickly, as required. It will also be important in the context of provision of non-COVID care. NPHET will consider where best to target available capacity.

In relation to regional public health departments, the Secretary General noted that large and unanticipated bodies of work that they were never expected to be prepared for have arisen. It is important to ensure the requisite supports (e.g. administrative staffing) and processes are in place to ensure the most effective management of workloads.

HSE CEO confirmed that a national lead for public health has been appointed and will be key in ensuring the departments are working effectively.

Screening services

Minister Harris welcomed the work being done between the Department of Health and the HSE in preparing a plan to resume screening services. It was noted that the decision to suspend screening was taken in line with international guidance.

The difference between the necessary suspension of screening of healthy people who have no symptoms and the HSE's continuing to provide services for people who do have symptoms was emphasised.

HSE CEO confirmed that a roadmap to resumption of screening is in development and that it is anticipated that screening will need to adapt significantly for the remainder of the pandemic.

It was also agreed that the HSE would engage with stakeholders in this area.

Direct Provision

Minister Harris raised the issue of Direct Provision and compliance with public health guidance.

HSE COO confirmed that the HSE has met with the Department of Justice twice in the last week in relation to Direct Provision and good progress is being made, with supports from public health and GPs put in place.

Community services

Minister Harris thanked the HSE for the strong programme of work being carried out for children with disabilities, in particular acknowledging the work of the Head of Operations, Disability Services in this regard. A cross-Government support programme will be available in the near future

HSE COO noted that the challenges impacting service continuity in the community. The HSE are focusing on key priorities in community services, which include home support and children with disabilities.

HSE Chair confirmed that the HSE Board discussion this week will focus on non-COVID work in the community.