## January and February

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<th>Time</th>
<th>Brief description and date of record</th>
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From: Padraig_Kelly@health.gov.ie on behalf of MinisterDaly_Office@health.gov.ie
Sent: Thursday 21 May 2020 11:38
To: Adam_Fleming@health.gov.ie
Cc: Helen_Simon@health.gov.ie
Subject: Fw: Nursing homes report disorganised discharge processes are contributing to hospital delays

Private Office of Jim Daly
Minister for Mental Health and Older People

An Roinn Sláinte
Department of Health

Department of Health, Block 1, Miesian Plaza, 50-58 Lower Baggot Street, Dublin 2, D02 XV14
An Roinn Sláinte, Bloc 1, Plaza Miseach, Sráid Bhágáid lochtarac, Baille Atha Cliath 2, D02 XV14

ministerdaly_office@health.gov.ie
health.gov.ie

--- Forwarded by Padraig Kelly/SLAINTE on 21/05/2020 11:37 ---

From: Minister's Office/SLAINTE
To: MinisterDaly Office/SLAINTE@SLAINTE
Date: 09/01/2020 09:46
Subject: Fw: Nursing homes report disorganised discharge processes are contributing to hospital delays
Sent by: Ashling Flavin

From: “Simon Harris” <Simon.Harris@oireachtas.ie>
To: “Ministersoffice@health.gov.ie” <Ministersoffice@health.gov.ie>
Date: 08/01/2020 14:55
Subject: FW: Nursing homes report disorganised discharge processes are contributing to hospital delays

From: Michael McGlynn <Michael@nhi.ie>
Sent: 08 January 2020 12:23
To: Simon Harris <Simon.Harris@oireachtas.ie>
Subject: Nursing homes report disorganised discharge processes are contributing to hospital delays

Dear Minister Harris,

Please be aware of statement issued today by Nursing Homes Ireland with regard to the hospital overcrowding crisis.

Wishing you well for 2020,

Regards,
Michael

Nursing homes report disorganised discharge processes are contributing to hospital delays

2,000 nursing home beds available nationwide to facilitate hospital discharges

8th January 2020: An estimated 2,000 beds are available in private and voluntary nursing homes across the country to facilitate timely discharge of patients from acute hospitals to nursing home care, NHI today revealed. However, NHI states feedback from Members is the discharge process within hospitals is
disorganised, inconsistent and supports are not available to enable staff facilitate the timely discharge of patients to nursing home care, where required.

NHI undertook a snapshot survey Tuesday 7th January asking private and voluntary nursing homes the number of available beds within their homes to facilitate transfer of patients from hospital. 136 nursing homes informed the survey of 861 beds being available. 445 private and voluntary nursing homes are operating in communities across the country, positioned to provide specialised step-down and long-term care. 80% of the nursing homes replying to the survey had at least one bed available.

HSE figures inform circa 60% of the hundreds of patients clinically fit for discharge in our acute hospitals are awaiting long-term nursing home care. Recent figures state at the end of November, almost 700 patients within our hospitals were delayed discharges.

Tadhg Daly, NHI CEO states: “Engagement with nursing homes the past number of days has informed of huge level of frustration with regard to the discharge process within our acute hospitals. We have nursing homes informing us they are aware of patients requiring discharge to nursing home care but many of these patients are being deterred due to delays in accessing funding support or bureaucracy within the hospital. We’ve hundreds of beds available to provide specialised care for people in our hospitals who need step-down care but these are not being utilised. Our Members are reporting extreme frustration that patients assessed as requiring nursing home care are experiencing unnecessary delays and are remaining within hospital for periods of days in many instances.

“Late Saturday, NHI fielded an urgent request from the HSE at local level seeking information regarding nursing home beds immediately available to facilitate discharges from two severely overcrowded hospitals. Over 20 beds from ten nursing homes surrounding the hospitals were identified within a matter of hours but only one bed has since been utilised. These hospitals remain severely overcrowded.

“While discharges occur every day to nursing homes, the urgency and focus required during this national emergency is not evident.

“Nursing home care has a lead role to fulfil in alleviating overcrowding within our acute hospitals and engagement has been undertaken with the HSE at national level. But it is damning upon the Government that no engagement is undertaken with the nursing home sector prior to the Winter period with view to planning timely discharge of the hundreds of patients requiring nursing home care that are within our hospitals on a daily basis. Year-on-year it fails to comprehensively plan for the Winter period and the outcome is distress for hospital patients, their families and hospital staff.”

Tadhg Daly, NHI CEO, is available for further interview. For further information contact Michael McGlynn, NHI Communications and Research Executive at 01 4699806 or 087 9082970.

Appendix 1
As part of the snapshot survey, NHI provided opportunity for nursing homes to inform of issues arising that are hampering timely discharge of patients from hospital to nursing home care.

- We are currently waiting on three long term residents finances to be approved - two from Cavan Hospital and one from Monaghan for step down
- Paperwork is delaying the discharge of residents awaiting transfer from our local overcrowded acute hospital
- We’re still seeing big delays in the allocation of transitional care funding for patients assessed as requiring nursing home care
- Awaiting funding for 2 beds for residents in hospital already assessed as requiring nursing home care
- We’re seeing delay in Fair Deal funding approval
- Wrote to the Minister [for Health] some time back to offer beds during a different beds crisis and the correspondence was sent back to our local hospital for response. We were eventually told that beds are allocated as per patient/family requests and in our case, the patient/families had probably not requested our home. I received a call just before this Christmas from a very distressed family member stating the family had requested our home but had been told that the patient ‘had’ to go to HSE home elsewhere. The family member told me that their loved one begged them to send her to our home because family wouldn’t be able to get to the person but again she was told it “had” to be done. I received a further call back on Christmas Eve to tell me that the person was being transferred by taxi and the family were extremely distressed over this.
- Delays occurring in approving Fair Deal funding
- Delays are occurring in getting approval for Transitional Care Funding for hospital patients
- We’re received no admission from UHL since 12th December. We inform the hospital on a regular basis regarding bed availability. There is overcrowding in UHL but the elderly people are not being transferred to nursing homes for respite or long-term care.
- Pre-admission assessments need to take place in a more timely manner to assess suitability for discharge to nursing home care
- Hospitals are keeping in residents waiting Fair Deal approval. We have two beds assigned for residents that are medically fit for discharge but who are awaiting Fair Deal approval while remaining within the hospital.
- We’re over 40 patients awaiting a bed in our local hospital yet we have received no contact from the HSE regarding admissions.
- There are delays in transitional care funding for people in hospital requiring nursing home care
- [Local] Hospital is informing potential residents and families of available beds in our nursing home. However, families not accepting as beds not in the right location for families to visit. Therefore, beds remain blocked in the acute sector.

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Beartas riomhphoist an Oireachtais agus séanadh.
http://www.oireachtas.ie/parliament/ga/eolas/beartasriomhphoistanoireachtaisagusseanadh/
Dear Dr Mac Lellan,

Please see attached correspondence from Tadhg Daly, CEO of NHI.

This has also been sent via post.

Kind regards,
Fiona

Fiona Kenny
EA to CEO

e. ea@nhi.ie

d. (01) 469 9801

Nursing Homes Ireland
2651 Castle Drive, Citywest,
Dublin 24, D24 K399.
t. (01) 469 9800
e. info@nhi.ie
nhi.ie

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Dr Kathleen Mac Lellan,
Assistant Secretary,
Social Care Division,
Department of Health,
Block 1, Miesian Plaza,
50 - 58 Lower Baggot Street,
Dublin,
D02 XW14

23rd January 2020

Re: Nursing Home Insurance

Dear Kathleen,

I am writing to you in relation to the recent decision of Liberty Insurance to cease underwriting Commercial Property and Liability insurance policies for Nursing Homes in Ireland.

The withdrawal from the insurance market of an underwriter presents a further crisis for funding of nursing home care. This will likely lead to further unsustainable increases in premiums and these will have a very significant impact upon the ever-increasing cost of nursing home care. Previous analysis undertaken within our sector informs insurance premiums increased by 136% over the period 2010 to 2016. This analysis and report, commissioned by NHI, undertaken by Economist Jim Power was submitted to your Department in 2017.

As you are aware the nursing home sector operates within a unique funding structure with the overwhelming majority of residents in nursing home care financially supported by the Fair Deal scheme. HIQA has reported the past two years nursing homes are closing because Fair Deal fees are not recognising costs being incurred by smaller nursing homes in particular to provide nursing home care.

Liberty’s departure from the market will undoubtedly have a further negative impact on already high insurance costs in the nursing home sector. The Government needs to grasp the financial crisis presenting for nursing home care and ensure that the Fair Deal budget is adequately resourced. The Government took urgent action in December to support the childcare sector cope with escalating insurance costs and the precedent has been set.

I am seeking to meet with you at the earliest opportunity to discuss the impact this insurance announcement will have on the sector and the implications for the Fair Deal budget.

Yours sincerely,

Tadhg Daly, CEO
Dear Minister Daly,

Please see attached correspondence from Mr Tadhg Daly, CEO of NHI.

Kind regards,
Fiona

Fiona Kenny
EA to CEO
e. ea@nhi.ie
d. (01) 469 9801

Nursing Homes Ireland

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(See attached file: 24 January 2020 LT Minister Jim Daly re GE 2020.pdf)
Minister Jim Daly TD,
Minister for Mental Health and Older People,
Department of Health,
Block 1, Miesian Plaza,
50 – 58 Lower Baggot Street,
Dublin 2.
D02 XW14.

24th January 2020

Dear Jim,

I am writing to you upon hearing the news that you will be not contesting the General Election 2020.

I would like to thank you for your engagement with NHI, its members and residents nationwide during your tenure as the Minister for Mental Health and Older People.
I have enjoyed working with you over the last number of years in your Ministerial capacity and appreciate your positive engagement with NHI.

I would like to personally thank you and wish you all the best in your future endeavours. I am sure our paths will cross again.

Yours sincerely,

Tadhg Daly, CEO
Private Office of Jim Daly
Minister for Mental Health and Older People __ An Roinn Sláinte Department of Health __ Department of Health,
Block 1, Miesian Plaza, 50-58 Lower Baggot Street, Dublin 2, D02 XW14 An Roinn Sláinte, Bloc 1, Plaza Miseach, Sráid
Bhagóid fochtarac, Balí Átha Cliath 2, D02 XW14 __ ministerdaly_office@health.gov.ie health.gov.ie
----- Forwarded by Padraig Kelly/SLAINTE on 20/05/2020 08:06 -----

From: Tadhg Daly <tdaly@nhi.ie>
To: "ministerdaly_office@health.gov.ie"
          <ministerdaly_office@health.gov.ie>
Cc: Fiona Kenny <ea@nhi.ie>
Date: 28/02/2020 10:14
Subject: FW: Covid-19 guidance

Attention Minister Daly,
Best regards,
Tadhg

From: Tadhg Daly
Sent: Friday 28 February 2020 10:12
To: jim.daly@oir.ie
Cc: Fiona Kenny <ea@nhi.ie>; darren.hourihane@oireachtas.ie
Subject: Covid-19 guidance
Importance: High

Good morning Minister,

Thank you for your earlier call re advices and guidance on Covid-19 Virus to the nursing home sector given the vulnerability of the resident population.

As discussed we are in constant contact with HSE and HSPC and have circulated guidance to members on a number of occasions as matters develop over the last number of weeks. As new guidance and information is provided we circulate immediately.

As discussed we are concerned at the fact that private and voluntary nursing homes have not received PPE and members are reporting that they are unable to access same. I have requested HSE to provide and note statement by HSE CEO that there are “adequate stocks” in place despite the challenges in the market.

I can confirm that I have requested HSE to confirm arrangements for the provision by HSE of PPE Inc face masks as may be required by nursing homes.
Finally I have provided attached guidance prepared by our colleagues in Scotland and requested a review of same by HSE/ HSPC so that we are in a position to provide dedicated guidance to the nursing home sector.

I will keep you informed as matters develop and appreciate your commitment to ensure that we work in partnership in the interests of the 25,000 residents in the private and voluntary nursing home sector.

Best regards,
Tadhg

(See attached file: Covid-19 Report Ver 1 (3).pdf)
CORONAVIRUS (COVID-19) INFORMATION FOR SCOTTISH CARE MEMBERS

VERSION 1
24 FEBRUARY 2020
CORONAVIRUS (COVID-19) INFORMATION FOR SCOTTISH CARE MEMBERS

Members will be increasingly aware of the global spread of Coronavirus (COVID-19). The following briefing paper has been prepared with the most up to date advice. You will appreciate that this is a continually moving issues and members should keep up to date with all public information. The primary site for such information, notification and guidance is https://www.hps.scot.nhs.uk/a-to-z-of-topics/wuhan-novel-coronavirus/. This paper is based on published UK and Scottish Government advice.
BACKGROUND

WHAT IS THE VIRUS?

A coronavirus is a type of virus. As a group, coronaviruses are common across the world. Typical symptoms of coronavirus include fever and a cough that may progress to a severe pneumonia causing shortness of breath and breathing difficulties.

Generally, coronavirus can cause more severe symptoms in people with weakened immune systems, older people, and those with long-term conditions like diabetes, cancer and chronic lung disease. This clearly includes many individuals who live in care homes or who are being supported to live at home. The older population is therefore a particular community of concern.

Novel coronavirus (COVID-19) is a new strain of coronavirus. It is also called Coronavirus.

Currently, there is no vaccine and no specific treatment for infection with the virus.

WHERE DID IT COME FROM?

In late December 2019, the People's Republic of China reported an outbreak of pneumonia due to unknown cause in Wuhan City, Hubei Province.

In early January 2020, the cause of the outbreak was identified as a new coronavirus. While early cases were likely infected by an animal source in a 'wet market' in Wuhan, ongoing human-to-human transmission is now occurring.

On the 30 January 2020 the World Health Organization declared that the outbreak constitutes a Public Health Emergency of International Concern.

As of 23 February, a total of 6,324 people have been tested in the UK, of which 6,315 were confirmed negative and 9 positive. These figures do not yet include the confirmed cases from the Diamond Princess cruise ship.
GENERAL INFORMATION

TRAVEL

The Government has published advice in relation to those who have recently travelled to or from identified infected areas. At the current time these areas are stated as mainland China, Thailand, Japan, Republic of Korea, Hong Kong, Taiwan, Singapore, Malaysia or Macao. Travellers to or from these areas within the last 14 days should visit the NHS Inform website for the most up-to-date information and advice.

Care home providers may wish to seriously think about whether it would be appropriate to accept a resident who falls within the above travel areas.

The Risk Areas as of the 6th February are identified at https://www.hps.scot.nhs.uk/web-resources-container/covid-19-risk-areas/

However, given the spread of the virus, especially in mainland Europe, in recent days this may be subject to alteration and change.

RISK DEFINITIONS AND CASE IDENTIFICATION

There is Guidance for both primary and secondary clinical settings available at https://www.hps.scot.nhs.uk/a-to-z-of-topics/wuhan-novel-coronavirus/#publications

The main current analysis is the following:

If the patient satisfies epidemiological and clinical criteria, they are classified as a possible case.

Epidemiological criteria

In the 14 days before the onset of illness:

- Travel to a risk area. This includes transit through a risk area, of any length of time. Up-to-date risk areas can be found at 2019-nCoV risk areas
• Contact * with a confirmed case of 2019-nCoV (see definition below).

*Clinical criteria*

• severe acute respiratory infection requiring admission to hospital with clinical or radiological evidence of pneumonia or acute respiratory distress syndrome  

OR

• acute respiratory infection of any degree of severity, including at least one of shortness of breath or cough (with or without fever)  

OR

• fever with no other symptoms

*Contact with a case is defined as:*

• living in the same household  

OR

• direct contact with the case or their body fluids or their laboratory specimens  

OR

• in the same room of a healthcare setting when an aerosol generating procedure is undertaken on the case  

OR

• direct or face to face contact with a case, for any length of time  

OR

• being within 2 metres of the case for any other exposure not listed above, for longer than 15 minutes  

OR

• being otherwise advised by a public health agency that contact with a confirmed case has occurred.
INFORMATION FOR SOCIAL CARE PROVIDERS

It will be self-evident that good infection control and immunological practice is paramount at this time and providers should ensure themselves that all staff both those with direct care roles and others should be aware of best practice. This is especially in relation to hand and personal hygiene.

- Providers should consider the development of a SOP (Standard Operating Practice) to prevent the spread of COVID-19.

- Providers should consider the development of an SOP for dealing with a suspected or confirmed case of COVID-19 whether in a care home or if a staff member comes into contact with an individual during a home visit. Such a protocol should include instructions on Personal Protective Equipment; the potential creation and use of isolation rooms in the care home; key contact and notification information; procedures in relation to laundry, decontamination of environment, conduct around food dispensing.

- Providers should identify what resources they have available in terms of PPE equipment. It is important to note that there should be as wide a selection as possible in order to meet all staffing needs. So, for instance, there should be an audit to ensure that there are sufficient disposable gloves of the right size. Using gloves which are not the right size can result in either these falling off or breaking if used. PPE equipment should also include FFP3 and surgical masks, although there is some pressure upon their availability.

- Providers should consider providing residents and service users with information in relation to hygiene and transmission. Together with what actions the organisation may need to take in the event of an instruction to self-isolate or any other escalation of the disease.

- Providers need to, as a matter of some urgency, develop their own operational resilience planning. This will relate closely to plans which should already be in case in relation to any major incident. The distinction being that there may be factors limiting the ability of staff to travel to work if there is any instruction to self-isolate.
• At a time of real uncertainty and growing public concern it will be important for providers to communicate regularly and supportively with staff and to do so using the most up to date guidance and advice. It is important that individuals are reassured as much as possible and that there is no sense of false alarm. More harm may result from unnecessary panic and alarm than from the virus itself.

• Providers should inform the Care Inspectorate of their resilience plans and procedures.

SPECIFIC GUIDANCE IF YOU ARE IN CONTACT WITH OR ARE REQUIRED TO ASSIST SOMEONE WHO IS SYMPTOMATIC AND SUSPECTED OF HAVING COVID-19

1. Providing assistance:

If you do need to provide assistance to an individual who is symptomatic and identified as a possible case, wherever possible, place the person in a place away from others. If there is no physically separate room, ask others who are not involved in providing assistance to stay at least 2 metres away from the individual. If barriers or screens are available, these may be used.

2. Personal Protective Equipment (PPE)

Use and dispose of all PPE according to the instructions and training previously provided by your employer or organisation. Disposable gloves and fluid repellant surgical face masks are recommended and, if available, disposable plastic aprons and disposable eye protection (such as face visors or goggles) should be worn. Wash your hands thoroughly with soap and water before putting on and after taking off PPE.

3. Cardiopulmonary resuscitation

If you are required to perform cardiopulmonary resuscitation (CPR), you should conduct a risk assessment and adopt appropriate precautions for infection control.

Where possible, it is recommended that you do not perform rescue breaths or mouth-to-mouth ventilation; perform chest compressions only. Resuscitation Council (UK) Guidelines 2010 for Basic Life Support state that studies have shown that compression-only CPR may be as effective as combined ventilation and compression in the first few minutes after non-asphyxial arrest (cardiac arrest due to lack of oxygen).
If a decision is made to perform mouth-to-mouth ventilation in asphyxial arrest, use a resuscitation face shield where available.

4. Hand hygiene

After contact with the individual, wash your hands thoroughly with soap and water at the earliest opportunity. Alcohol hand gel is recommended if soap and water is not available. Avoid touching your mouth, eyes and/or nose, unless you have recently cleaned your hands after having contact with the individual.

5. Cleaning the area where assistance was provided

Cleaning will depend on where assistance was provided. If within premises or a public building and cleaners are available, they should be asked to undertake the cleaning in line with the advice provided for cleaning of aircraft. If the area can be cordoned off until a negative test result is available, then cleaning staff could use their normal protocols after this.

6. If there has been a blood or body-fluid spill

Keep people away from the area. Use a spill-kit if available, using the PPE in the kit or PPE provided by your employer/organisation and following the instructions provided with the spill-kit. If no spill-kit is available, place paper towels/roll onto the spill, and seek further advice from emergency services when they arrive.

7. Contacts of the unwell person

If anyone had direct contact with the individual and makes themselves known to you, ask them to call NHS 111 and explain what has happened.

8. What to do if you become unwell following contact with someone who may be at risk of COVID-19

If you have already been given specific advice from your employer or Health Protection Scotland about who to call if you become unwell, follow that advice.

Otherwise, if you develop fever, cough or difficulty breathing within 14 days of assisting someone unwell and at risk of COVID-19, call NHS 111 (or 999 if it is a medical emergency) and explain that you recently provided assistance.

(Taken from Public Health England)
If you have any questions relating to this guidance document, please contact Scottish Care:

25 Barns St
Ayr
KA7 1XB

01292 270240

Scottish Care
Voice of the independent care sector
Tadhg

Many thanks for your email and for your assurances which are very welcome.

I fully acknowledge and welcome your commitment to work in partnership with the HSE and ourselves. We are following the advice of the Chief Medical Officer and the National Public Health Emergency Team and I will follow up with them with regard to your query set out below.

In addition, we are being updated by David Walsh and Sandra Tuohy who have assured us that they are working with you as you confirm below.

Best wishes

Kathleen

Sent from IBM Notes Traveler

> From: "Tadhg Daly" <tdaly@nhi.ie>
> To: "kathleen_maclellan@health.gov.ie" <kathleen_maclellan@health.gov.ie>, "Niall_Redmond@health.gov.ie" <Niall_Redmond@health.gov.ie>
> Cc: "Fiona Kenny" <fa@nhi.ie>
> Date: Fri, 28 Feb 2020 16:46
> Subject: Covid-19
Good afternoon Kathleen and Niall, I am taking the opportunity of communicating with you re Covid-19. I can confirm that we have circulated all updates and guidance to date to the nursing home sector provided by HSE/ HSPC. NHI proposes that there is a requirement for dedicated guidance and advices for the Nursing Home sector and our members given the vulnerability of residents and I have been in contact with Ms Sandra Tuchy, Asst Nat Director, Services for Older People, HSE. Our request for guidance is now urgent as it has been confirmed that there is one case of Coronavirus on the island of Ireland. HSE proposes to establish a working group to develop guidance for nursing home sector. We are linking with HSE on the development of guidance and as a first step propose a review the guidance provided by our colleagues in Scotland, Scottish Care (attached) together with UK Government advices (https://www.gov.uk/government/publications/guidance-for-social-or-community-care-and-residential-settings-on-covid-19/guidance-for-social-or-community-care-and-residential-settings-on-covid-19) [https://www.gov.uk/government/publications/guidance-for-social-or-community-care-and-residential-settings-on-covid-19/guidance-for-social-or-community-care-and-residential-settings-on-covid-19]. In respect to PPE equipment, I note that the HSE have confirmed to media that there is “adequate stock”. This is not the case for our member Nursing Homes who require stock of PPE. We require confirmation of procedures in place to provide nursing homes with stock of PPE? I can confirm that I have been in contact with Minister Daly also on this matter. We remain committed to work in partnership with the Department and HSE in the interests of the 25,000 residents in the private and voluntary nursing home sector. I look forward to hearing from you. Best regards, Tadhg
Fw: Scottish Care Coronavirus guidance
Kathleen MacLellan to: Sarah Cooney, Karl Duff
Cc: Niall Redmond

From: Kathleen MacLellan@SLAINTE
To: Sarah Cooney@SLAINTE, Karl Duff@SLAINTE, Niall Redmond@SLAINTE

See below

Kathleen

Dr Kathleen MacLellan
Assistant Secretary, Social Care Division

An Roinn Sláinte
Department of Health

Bloc 1, Plaza Miesach, 50 - 58 Sráid Bhagóid Íochtarach, Baile Átha Cliath, D02 XW14
Block 1, Miesian Plaza, 50 - 58 Lower Baggot Street, Dublin, D02 XW14

Designated Public Official under Regulation of Lobbying Act 2015

--- Forwarded by Kathleen MacLellan@SLAINTE on 28/02/2020 10:38 ---

From: David Walsh <David.Walsh@hse.ie>
To: "kathleen_maclellan@health.gov.ie" <kathleen_maclellan@health.gov.ie>
Date: 27/02/2020 08:09
Subject: FW: Scottish Care Coronavirus guidance

As discussed Kathleen

Thanks

David

From: Tadhg Daly [mailto:tdaly@dni.ie]
Sent: 25 February 2020 09:18
To: David Walsh
Cc: Fiona Kenny; Michael McGlynn
Subject: FW: Scottish Care Coronavirus guidance
Importance: High

CAUTION: This email originated from outside of the organisation. Do not click links or open attachments unless you recognise the sender and know the content is safe.

David,

As discussed just now see attached guidance issued by our counterparts in Scotland re Covid 19.

Thank you for the information to date and I can confirm that we have circulated. Can you ensure to keep NHU informed and we will in turn communicate with the nursing home sector.
Appreciate your commitment to get officials in public health to review attached with a view to producing a guidance for the sector.

Thanks
Tadhg

When we go through tough time, little things like talking about our problems, getting regular exercise, drinking less alcohol and being involved in activities we enjoy can make a big difference to how we feel. Find the little things that work for you at yourmentalhealth.ie.

"Tá an fheisnéis sa riomhphost seo (ceangailte san áireamh) faoi rún. Bainneann sé leis an té ar scéaladh chuige amhain agus tá sé ar líntin go bhaighfidh sláidh amhain é agus gurb iadsan amhain a dhéanfaidh breithníú air. Más rud é nach tusa an dlúine ar leis é, tá cosc leat an aon fheisnéis atá ann, a úsáid, a chruthaíonn leat, a scaipeadh, a nóchtadh, a fhóilsiú, nó a chóipheadh. Seans gurb iad tuairimí pearsanta an údar atá an riomhphost agus nach tuairimí FSS iad.

Má tutar tú an riomhphost seo trí dhearmad, bheadh muid buíoch dá go ruthaíonn an Deasc Seirbhísí ECT ar an nguthán ag +353 818 300300 nó ar an riomhphost chuig service.desk@hse.ie agus ansin glan an riomhphost seo de! chéars."

"Information in this email (including attachments) is confidential. It is intended for receipt and consideration only by the intended recipient. If you are not an addressee or intended recipient, any use, dissemination, distribution, disclosure, publication or copying of information contained in this email is strictly prohibited. Opinions expressed in this email may be personal to the author and are not necessarily the opinions of the HSE."

If this email has been received by you in error we would be grateful if you could immediately notify the ICT Service Desk by telephone at +353 818 300300 or by email to service.desk@hse.ie and thereafter delete this e-mail from your system"
Attention Minister Daly,

Best regards,

Tadhg

From: Tadhg Daly
Sent: Friday 28 February 2020 10:12
To: jim.daly@oir.ie
Cc: Fiona Kenny <ea@nhi.ie>; darren.hourihane@oireachtas.ie
Subject: Covid-19 guidance
Importance: High

Good morning Minister,

Thank you for your earlier call re advices and guidance on Covid-19 Virus to the nursing home sector given the vulnerability of the resident population.

As discussed we are in constant contact with HSE and HSPC and have circulated guidance to members on a number of occasions as matters develop over the last number of weeks. As new guidance and information is provided we circulate immediately.

As discussed we are concerned at the fact that private and voluntary nursing homes have not received PPE and members are reporting that they are unable to access same. I have requested HSE to provide and note statement by HSE CEO that there are “adequate stocks” in place despite the challenges in the market.

I can confirm that I have requested HSE to confirm arrangements for the provision by HSE of PPE inc face masks as may be required by nursing homes.

Finally I have provided attached guidance prepared by our colleagues in Scotland and requested a review of same by HSE/ HSPC so that we are in a position to provide dedicated guidance to the nursing home sector.

I will keep you informed as matters develop and appreciate your commitment to ensure that we
work in partnership in the interests of the 25,000 residents in the private and voluntary nursing home sector.

Best regards,
Tadhg
From: Padraig_Kelly@health.gov.ie on behalf of MinisterDaly_Office@health.gov.ie  
Sent: Wednesday 20 May 2020 08:07  
To: Adam Fleming  
Subject: Fw: Covid-19 guidance

--- Forwarded by Padraig Kelly/SLAINTE on 20/05/2020 08:07 -----

From: MinisterDaly Office/SLAINTE  
To: Tadhg Daly <tdaly@ghi.ie>  
Date: 28/02/2020 14:47  
Subject: Re: FW: Covid-19 guidance  
Sent by: Lorraine O’Hara

Dear Mr Daly,

On behalf of Jim Daly, Minister for Mental Health and Older People, I wish to acknowledge receipt of your recent guidance in relation to Covid-19 below.

Kind Regards  
Lorraine O’Hara

--- Forwarded by Padraig Kelly/SLAINTE on 20/05/2020 08:07 -----

From: Tadhg Daly <tdaly@ghi.ie>  
To: "ministerdaly_office@health.gov.ie" <ministerdaly_office@health.gov.ie>  
Cc: Fiona Kenny <ea@ghi.ie>  
Date: 28/02/2020 10:14  
Subject: FW: Covid-19 guidance

Attention Minister Daly,  
Best regards,  
Tadhg

From: Tadhg Daly
Good morning Minister,

Thank you for your earlier call re advices and guidance on Covid-19 Virus to the nursing home sector given the vulnerability of the resident population.

As discussed we are in constant contact with HSE and HSPC and have circulated guidance to members on a number of occasions as matters develop over the last number of weeks. As new guidance and information is provided we circulate immediately.

As discussed we are concerned at the fact that private and voluntary nursing homes have not received PPE and members are reporting that they are unable to access same. I have requested HSE to provide and note statement by HSE CEO that there are “adequate stocks” in place despite the challenges in the market.

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Finally I have provided attached guidance prepared by our colleagues in Scotland and requested a review of same by HSE/ HSPC so that we are in a position to provide dedicated guidance to the nursing home sector.

I will keep you informed as matters develop and appreciate your commitment to ensure that we work in partnership in the interests of the 25,000 residents in the private and voluntary nursing home sector.

Best regards,
Tadhg

[attachment "Covid-19 Report Ver 1 (3).pdf" deleted by Lorraine O'Hara/SLAINTE]
Covid-19
Tadhg Daly
to:
  kathleen_macelllan@health.gov.ie, Niall_Redmond@health.gov.ie
28/02/2020 16:46
Cc:
  "Fiona Kenny"
Hide Details
From: "Tadhg Daly" <tdaly@nhi.ie>
To: "kathleen_macelllan@health.gov.ie" <kathleen_macelllan@health.gov.ie>,
  "Niall_Redmond@health.gov.ie" <Niall_Redmond@health.gov.ie>
Cc: "Fiona Kenny" <ea@nhi.ie>

1 Attachment

Covid-19 Report Ver 1 (3).pdf

Good afternoon Kathleen and Niall,

I am taking the opportunity of communicating with you re Covid-19.
I can confirm that we have circulated all updates and guidance to date to the nursing home sector provided by HSE/ HSPC.
NHL proposes that there is a requirement for dedicated guidance and advices for the Nursing Home sector and our members given the vulnerability of residents and I have been in contact with Ms Sandra Tuohy, Asst Nat Director, Services for Older People, HSE.
Our request for guidance is now urgent as it has been confirmed that there is one case of Coronavirus on the island of Ireland.

HSE proposes to establish a working group to develop guidance for nursing home sector.
We are linking with HSE on the development of guidance and as a first step propose a review the guidance provided by our colleagues in Scotland, Scottish Care (attached) together with UK Government advices
In respect to PPE equipment, I note that the HSE have confirmed to media that there is “adequate stock”. This is not the case for our member Nursing Homes who require stock of PPE. We require confirmation of procedures in place to provide nursing homes with stock of PPE?

I can confirm that I have been in contact with Minister Daly also on this matter.
We remain committed to work in partnership with the Department and HSE in the interests of the 25,000 residents in the private and voluntary nursing home sector.

I look forward to hearing from you.

Best regards,
Tadhg
Tadhg

Many thanks for your email and for your assurances which are very welcome.

I fully acknowledge and welcome your commitment to work in partnership with the HSE and ourselves. We are following the advice of the Chief Medical Officer and the National Public Health Emergency Team and I will follow up with them with regard to your query set out below.

In addition, we are being updated by David Walsh and Sandra Tuohy who have assured us that they are working with you as you confirm below.

Best wishes

Kathleen

Sent from IBM Notes Traveler

> From: "Tadhg Daly" <tdaly@nhi.ie>
> To: "kathleen_macelllan@health.gov.ie" <kathleen_macellean@health.gov.ie>,
> "Niall_Redmond@health.gov.ie" <Niall_Redmond@health.gov.ie>
> Cc: "Fiona Kenny" <ea@nhi.ie>
> Date: Fri, 28 Feb 2020 16:46
> Subject: Covid-19
> 
> Good afternoon Kathleen and Niall, I am taking the opportunity of communicating with you re Covid-19. I can confirm that we have circulated all updates and guidance to date to the nursing home sector provided by HSE/ HSPC. NHI proposes that there is a requirement for dedicated guidance and advice for the Nursing Home sector and our members given the vulnerability of residents and I have been in contact with Ms Sandra Tuohy, Asst Nat Director, Services for Older People, HSE. Our request for guidance is now urgent as it has been confirmed that there is one case of Coronavirus on the island of Ireland. HSE proposes to establish a working group to develop guidance for nursing home sector. We are linking with HSE on the development of guidance and as a first step propose a review the guidance provided by our colleagues in Scotland, Scottish Care (attached) together with UK Government advice (https://www.gov.uk/government/publications/guidance-for-social-or-community-care-and-residential-settings-on-covid-19/guidance-for-social-or-community-care-and-residential-settings-on-covid-19) [https://www.gov.uk/government/publications/guidance-for-social-or-community-care-and-residential-settings-on-covid-19/guidance-for-social-or-community-care-and-residential-settings-on-covid-19] In respect to PPE equipment, I note that the HSE have confirmed to media that there is "adequate stock". This is not the case for our member Nursing Homes who require stock of PPE. We require confirmation of procedures in place to provide nursing homes with stock of PPE? I can confirm that I have been in contact with Minister Daly also on this matter. We remain committed to work in partnership with the Department and HSE in the interests of the 25,000 residents in the private and voluntary nursing home sector. I look forward to hearing from you. Best regards, Tadhg