NPHET Vulnerable People Subgroup Overview of meetings to date 18th June 2020

Chair: Dr Kathleen MacLellan, Assistant Secretary, Social Care Division, Department of Health

Date Established: 3rd March 2020

Date of First Meeting: 6th March 2020

Mandate: To provide oversight and assurance with regard to the specific preparedness, measures and actions that need to be taken to protect vulnerable groups and individuals in society. An integrated, cross-Government approach is being taken by the Subgroup with the responsibility for the planning and implementation of actions to support specific vulnerable groups remaining with the relevant Department whose remit they fall within e.g. Prisoners are under the remit of the Department of Justice and Equality (DJE).

The term vulnerable people is being used to include older people, people with a disability, mental health service users, those with an underlying illness or condition, children in care and those accessing social inclusion services (not an exhaustive list). Note that locations include longterm residential care (LTRC) which includes nursing homes.

The Secretariat is provided by the Social Care Division, Department of Health.

The subgroup has met on **10 occasions** between 6 March and 6 June 2020, and an overview of these meetings is set out below. There is a dedicated webpage for the subgroup which has uploaded the terms of reference, membership and minutes of all meetings: https://www.gov.ie/en/collection/301f5e-the-national-public-health-emergency-team-nphet-subgroup-vulnerable-/

Terms of Reference

- 1. Identify categories of vulnerable people
- 2. Identify State Agencies responsible for service provision
- 3. Design a standardised checklist to provide assurance that measures are in place, updated in line with NPHET directions, approved at appropriate senior level¹ and implemented. Such measures are likely to include:
 - Guidance for service users, families and staff
 - Communications plan
 - Compliance with data protection regulations
 - Preparedness plan to include containment measures; mitigation measures; hand hygiene, personal protective equipment (PPE) and waste management; environmental cleaning; patient/people placement where relevant - moving of patients/people in the facility, visitor access
 - Capacity Contingency Plan

¹ Responsibility to ensure that all content and actions are in line with NPHET directions lies with the relevant Departments/Agencies.

- Business Continuity Plan.
- 4. Establish communication processes for completed standardised checklist to the Subgroup
- 5. Design the Subgroup Assurance Framework
- 6. Agree Subgroup Modus Operandi
- 7. Report to NPHET:
 - Progress Updates
 - Escalation of high risks as appropriate.

Membership Sub-Group

- Department of Health (Chair)
- Department Justice and Equality
- Department of Children and Youth Affairs
- Department of Housing, Planning and Local Government/ Local Government
 Management Agency
- Department of Education and Skills
- Department of Defence
- Department of Rural and Community Development
- HSE Community Operations
- Public Health Specialist(s) (HSE)
- Voluntary Sector representative
- Patient Representative
- Regulator(s)
- Department of Health

1. Meeting 6th March

The first meeting of the subgroup was held on 6th March during which a number of house-keeping protocols were agreed including the Terms of Reference and other governance arrangements. There was a discussion on the categories of vulnerable people that would need to be protected in the event of a Covid-19 outbreak and the range of State Agencies responsible for service delivery to these cohorts. A draft table of Vulnerable People/Responsible Department/Agency was circulated at the meeting for consideration in this regard.

Communications to provide information and assurance to vulnerable people was a consistent theme during the meeting. A dedicated stream of communications focused on vulnerable people was subsequently developed and a comprehensive plan designed by the end of that week.

There was also a significant focus on the need to provide for a framework of community supports to help vulnerable people as part of the response to COVID-19. As an immediate action from the subgroup was for an advisory group to be set up tasked with facilitating effective community engagement to assist in the care of vulnerable groups who are living in the community. Given their remit in this regard, the Department of Rural and Community Development(D/DRC) agreed to chair this working group.

ALONE, who are a member of the subgroup representing Older persons and the voluntary sector, noted their work in collaboration with the Department of Health and the HSE on a coordinated

national response to support older people who have concerns, may be at risk or who have contracted COVID-19. The supports offered include a new national support line launching on Monday 9 March, and additional outreach and coordinated support.

The on-going preparatory and operational work programmes of Departments including the HSE was noted.

2. Meeting 11th March 2020

All subgroup members were asked to complete a standard checklist designed to gather information and provide assurances in relation to the measures in place across Government Departments and State Agencies to support vulnerable groups.

It was noted that capacity and business continuity plans for all sectors, when developed, would need to take account of the ability of community services to expand capacity to meet an increased requirement in the community. They should also take account of the actions for each COVID-19 stage – containment, delay and mitigation.

It was noted that a whole of Government Action Plan in response to COVID-19 was in development.

The D/RCD noted the establishment of an *Advisory Group on a community response to vulnerable people*, which held its first meeting on 9th March 2020. The overarching purpose of the Advisory Group is to encourage and facilitate community engagement in response to the needs of vulnerable people living in the community. Emanating from this advisory group, the follow actions were recommended:

- ✓ Expand the Seniors Alert Scheme utilising the estimated 80,000 pendant alarms already in the community;
- ✓ Focus on the use of Volunteer Centres;
- ✓ Significant expansion of community supports for older people through ALONE;
- ✓ Focus on networks such as the Community Outreach Programme, Irish Rural Link and The Wheel;
- ✓ Define clear roles for volunteers in the community that can be fast-tracked through the Garda vetting process; and
- ✓ Support flexibility for community & voluntary programmes

3. Meeting 18th March 2020

As noted in the Terms of Reference of the subgroup, relevant Departments and State Agencies remain responsible for ensuring that appropriate plans are in place for vulnerable groups within their remit, in the range of associated settings. These plans must address the needs of these groups and set out actions to be taken to mitigate impact on these groups. At such, Departments and Agencies were requested to update the group on preparedness plans in place.

The D/RCD chaired an Advisory Group to the NPHET Subgroup Vulnerable People on its community response to vulnerable people, an Action Plan was developed by D/RCD and published on 20th March 2020 which identified a number of key actions for immediate priority.

The development of a framework for community support was discussed and the important of a whole of government approach involving local authorities, the voluntary sector, DRCD and the HSE was recommended. In addition, a large volume of support is being offered from various bodies such as the GAA and An Post. It was agreed to draft a paper for information for the COVID-19 Senior Official Group (SOG) chaired by Department of Taoiseach (D/Taoiseach).

The group was updated on the significant work being progressed on the development of public health guidance in relation to COVID-19 and the associated HSPC governance framework linked to the NPHET Expert Advisory Group (EAG). Work is ongoing to set up a single point of contact for all

queries on guidance which will provide information on all current guidance in place and the timeline for the development of any further guidance.

The meeting was updated on Communications with Vulnerable People and Community Support Coordination.

An action was agreed that a new short-life interagency working group led by the Department on nursing homes/other long stay under the auspices of the NPHET Subgroup on Vulnerable People. The aim of this group was to examine issues relating to COVID-19 arising in the nursing home sector and to develop proposed measures to respond to those issues, where necessary.

HSE updated that a *COVID-19 Vulnerable People Response Group* had been established by the HSE chaired by the Chief Operations Officer taking an integrated approach including a range of areas including older people and palliative care. This was building on the on-going operational actions of the HSE across community services including older people.

4. Meeting 25th March 2020

This meeting was updated on the development of the Cocooning Guidance by the Health Protection Surveillance Centre (HPSC) for those over 70 and those extremely medically vulnerable to COVID-19. The guidance was subsequently published on Friday 28 March in line with the new measures announced by Government.

A paper "Community Support Framework" was presented to the subgroup. This paper set out a comprehensive overview of the cross-government approach to supporting vulnerable people as part of the response to Covid-19 and noted the important work of all Department's and State Agencies in this regard. Within this context the key role of Local Authorities (LAs) in leading the delivery of supports on the ground was noted.

As an action arising from this meeting the following Departments were tasked with working to agree a structure for the operationalisation and delivery of supports on the ground - Department of Housing, Planning and Local Government (D/HPLG), Department of Rural and Community Development (D/RCD) and Department of Health. A paper was presented to the COVID-19 Senior Officials Group (SOG) on Friday 28 March setting out the framework for the delivery of community supports under the direction of the local authorities. It was noted that this framework was adopted by COVID-19 SOG and was being fast-tracked in line with the additional measures announced by Government on Friday 28 March.

A subgroup of COVID-19 SOG was convened to oversee the programme of work under community supports framework. Chaired by D/HPLG it has membership from D/Taoiseach, D/RCD, D/, County and City Management Association (CCMA) and Local Government Management Agency (LGMA). This group had its first meeting on Sunday 30 March.

The meeting was informed that as many of the most vulnerable people (those over 70) are resident in Nursing Homes it was essential that supports are provided to ensure the continued functioning of Nursing Homes and safety of residents during this period.

It was noted in the report to NPHET following this meeting that given recent data in relation to the number of COVID-19 cases in Nursing Homes, a paper is been prepared for the next NPHET meeting (31 March) for consideration. Separately the D/Health was in discussion with the Department of Public Expenditure and Reform (D/PER) on a package of financial assistance for the sector.

In relation to the Departments communications strategy, the meeting was informed that:

- ✓ A public information booklet had been launched and would be distributed to each household shortly. The booklet was to be available in multiple languages and an Easy Read version of it was in development.
- ✓ Further to the new measures announced, a targeted campaign had been developed to support the cocooning of those over 70 and those medically extremely vulnerable to COVID-19
- ✓ The D/Health is also working with D/HPLG and D/RCD on the launch of the community support framework.

5. Meeting 1st April 2020

The meeting was updated on the framework for community supports and the announcement of this initiative on 2nd April by the Tánaiste, Minister for Community and Rural Affairs, Minister of State for Local Government, and the CEO of Fingal County Council representing the Local Authority network.

It was noted that the subgroup of the COVID-19 Senior Officials Group (SOG) has responsibility for the oversight of this initiative. The Department of Health is represented on this group, with responsibility for providing public health advice and developing guidance as appropriate for the community and volunteers.

At recent NPHET meetings (31 March and 3 April) a set of enhanced public health measures were recommended aimed at residents living in Long Term Residential Care Settings (nursing homes, disability and mental health) and home support services. Following these meetings, the Department wrote to HSE Community Operations, HIQA, Mental Health Commission, Nursing Homes Ireland to inform them of these measures. Letters were also sent to the umbrella organisations for the home support providers - Home Community Care Ireland (HCCI) for the provide providers and National Community Care Network (NCCN) for the voluntary sector providers.

The number of outbreaks in LTRC settings, particularly in private nursing homes, remains a key concern in the system and work is underway to develop the appropriate data collection systems for the community in conjunction with the HSE and HIQA. It was noted that HIQA, who are a member of the subgroup, have already commenced work to risk rate LTRC facilities.

The group was also updated on the recent guidance developed to protect those 70 years of age or those extremely medically vulnerable to COVID-19 (cocooning). It was noted that the system is working hard to meet the needs of vulnerable people who may need to cocoon, self-isolate or whose current accommodation may not meet the requirements for self-distancing. For example, there were updates from the relevant departments in relation to those living in direct provision, prisoners and for groups such as traveller and Roma communities or the homeless. It was noted that issues would need to be progressed at on operational level with the HSE to support vulnerable groups to cocoon or self-isolate and these matters were referred to the chair of the HSE Vulnerable Group for direct follow up with relevant departments.

6. Meeting 15th April

Operational issues remain the responsibility for relevant Departments/state agencies and it was noted that key operational issues were being progressed by the HSE and relevant Departments outside of the subgroup meetings for example in relation to the Roma community and undocumented migrants.

The work of the *HSE Covid-19 Vulnerable People Response Group* was noted. Membership of the group comprises of key personnel across Primary Care, Social Inclusion, Disability Services, Older Persons Services and Mental Health Services. In addition, HSE Community Operations provides regular updates and assurances on the implementation of the NPHET actions.

The subgroup was given an update on work of this group and it was noted that operationally staffing remains a major challenge for Nursing Homes with work ongoing in this regard.

The subgroup was updated on the current situation in relation to the long-term residential care (LTRC) sector, including numbers of outbreaks and COVID-19 related deaths. The D/Health continued to look at the international evidence in relation to enhanced measures to support residents in LTRC settings and a further paper was circulated to NPHET on 17 April. At this meeting a further set of immediate additional actions were agreed aimed at establishing the level of risk of transmission related to staff COVID-19 status and further understand patient mortality in long term residential healthcare settings, to inform and direct the public health response. They were:

- I. a census of mortality will be conducted by the D/Health with HIQA and the MHC supporting the distribution of the census;
- II. national testing of staff across all settings will take place with an initial widespread approach and thereafter ongoing testing, which may include both staff and patients, to be conducted on a rolling basis;
- III. the publication and assessment of a COVID-19 quality assurance regulatory framework for these settings by HIQA;
- IV. the implementation of previous recommended actions with enhanced reporting through an expanded 'Nursing Homes/LTRC settings Actions Tracker', which is to include the roll out of the Contact Management (CRM) system.

The subgroup also noted that the Working Group set up on Nursing Home Sector has concluded its work and the Financial Assistance Scheme had been announced by the Minister. The scheme went live on 17 April 2020. This working group was then stood down.

Finally, this meeting was informed that Covid-19 is a significant source of stress for people, and the focus of communications is on supporting people to cope during this period while staying at home and looking after your mental well-being. A new initiative for mental well-being was launched - www.gov.ie/together

7. Meeting 29th April

ALONE updated the subgroup on its working supporting older people as part of the response to COVID-19. Over 16,000 calls have been received, 46,000 calls have been made, and over 8,000 practical units of support have been arranged since early March. Furthermore, it was noted that over 50% of older people who contact ALONE require some form of practical support. During this period levels of stress are increasing, and ALONE has now partnered with the Samaritans to offer people psychological and emotional support.

It was noted that €1.1m for additional supports were announced by Minister Harris earlier in the week to address health and well-being initiatives, including stress and anxiety. The Mental Health Commission (MHC) joined as a new member of the subgroup.

The cooperation of the Disability umbrella bodies, HSE and families in the response to covid-19 to date was acknowledged. The meeting was informed of a number of initiatives across disability services, including adaption of existing services, reassignment of staff, greater use of technology and individual supports being implemented in lieu of closed day services. As part of this discussion the ongoing substantial work of the HSE on operational matters in relation to LTRC settings more broadly, including Nursing Homes, was noted. The meeting was updated with regard to the "Ethical

framework for decision making in a pandemic" which includes a number of substantive ethical principles and procedural values that can be applied to, and employed during, the decision-making process in a pandemic. It was noted that a further paper is in development regarding Long Term Residential Care.

The meeting was updated on the census conducted over the weekend of April 17th following the action agreed at the NPHET on Friday 17th April and all facilities were communicated with that evening to ask them to complete the template circulated by 18:00 on Sunday 19th April. This contact was done with the assistance of HIQA and the Mental Health Commission (MHC). A phone line and email address were provided over the weekend to provide assistance to the Person-in Charge to fill out the required template. Initial indications were that there was a strong response at 89.7%. The findings from this census would be presented to NPHET at their meeting on 28 April.

To note the Irish Prison Service (IPS) raised an issue of the wearing of surgical masks in non-health care settings, such as prisons, direct provision centres. The Chair referred the query to the Expert Advisory Group (EAG) of NPHET for consideration.

HSE updated the group on work progressing on communication with Nursing Home Ireland and other larger providers to provide guidance and advice with particular emphasis on supporting the admission, transfer and discharge of persons into nursing homes. It was noted that staffing remains a major challenge for Nursing Homes and progress in relation to the development of IT systems to support the community including public health and outbreak response teams was noted.

8. Meeting 7th May

The Department of Justice and Equality informed the sub-group of their intention to conduct a review of the gender implications of COVID-19 which will look at both the direct and indirect impacts on women and resources available to them by Government in response to COVID-19. The sub-group secretariat circulated a template to members for completion and direct return to the D/Justice by 29th May.

In relation to the community support framework, it was acknowledged that there has been a positive cross Departmental collaboration, with progress made in a short space of time and the significant support this framework has provided to vulnerable people nationally. It was noted that the impact of this work should be examined with a view to looking at how this framework can be utilised to provide community supports in the longer term and post COVID-19. D/HPLG and D/RCD noted that an evaluation of this work is planned.

D/Health further updated the subgroup on the census of mortality in LTRC settings which was conducted over the weekend of April 17th in line with the NPHET recommendation. It was noted that nationally we collect data on COVID related mortality both lab confirmed and probable, in line with ECDC recommendations, in both hospitals and the community. Most other countries do not report the data in LTRC settings in such a comprehensive manner. The aim of this census was to provide a snapshot of mortality in LTRC settings over the period January to 17th April 2020 in order to information could guide our public health actions in this regard.

Data was compared between this census of mortality and other sources of mortality data from HIQA and HPSC. It demonstrated that confirmed cases matched closely between these sources. This would suggest that both the HIQA and HSPC sources are robust indicators that capture the COVID-19 mortality rate in LTRC settings.

D/Health updated the group on the situation in nursing homes and current enhanced measures in place to support nursing homes as part of the response to COVID-19.

HIQA also updated the group on the work of HIQA and the current implementation of the regulatory framework for LTRCs. It was noted that HIQA has conducted a number of desktop reviews and site

visits as part of this work and they are also engaged with regulatory colleagues across Europe to share learnings.

9. Meeting 20th May

A draft paper *Draft Guidance on Visitations to Residential Care Facilities* was circulated to the group in advance of this meeting and joining the group for this discussion were Dr Kevin Kelleher (Assistant National Director for Public & Child Health HSE) and Dr. Siobhan Kennelly (NCAGL for Older Persons, HSE).

The purpose of the paper circulated was to provide public health guidance to facilitate the reintroduction of visitors to long term residential care facilities as part of planning for decisions in relation to the Roadmap to the Re-Opening of Society and Business. It was noted that given the current level of community transmission of the virus, the impact on residents, and the importance of having visits from family and friends as part of overall wellbeing, it was planned, subject to NPHET considerations, to re-introduce visiting in those facilities with no outbreak of COVID-19.

For those facilities where there is an ongoing COVID-19 outbreak, there is no change in the public health guidance. During an ongoing outbreak of COVID-19, family and friends should be advised that all but essential visiting (for example end of life) is suspended in the interest of protecting residents, visitors and staff.

For those facilities where there is no ongoing COVID-19 outbreak, the HPSC has developed public health guidance on how visiting can be introduced in a controlled manner that minimises risk. This includes allowing a up to 2 visitors per week for up to 30 minutes.

The subgroup discussed the guidance and the difficulty of not seeing loved ones face-to-face for families over the past few months was acknowledged, and it was hoped that these new measures will bring some positive benefits to residents.

The meeting was also informed that as part of the roadmap to reopening society and business, and in line with public health guidance, from May 18, the guidance in relation to people who are 70 and over or are medically vulnerable to Covid-19 will changed. As part of these changes people who are cocooning can visitor others (in small groups) and have visitors to their home. The guidance will also recommend dedicated shopping hours for those who are cocooning and travel will be permitted from 5km up to 20km for the general population.

10. Meeting 3rd June

The Chair acknowledged feedback from a number of Departments/Agencies regarding the publication of High-Level Actions online. It was agreed that each Department/Agency would arrange for publication and updating of such actions on their individual websites. The Department has provided links to other Departments/Agencies on its website at: https://www.gov.ie/en/collection/301f5e-the-national-public-health-emergency-team-nphet-subgroup-vulnerable-/#further-information-resources

In line with the Roadmap for the re-opening of Society and Business, and subject to public health recommendations from the NPHET and a Government decision, considerations for moving to PHASE 2 were discussed. It is envisaged that that moving to the next phase of the Roadmap will include important changes for many people, including vulnerable people, in how they are able to go about their daily life.

The terms of reference of the NPHET subgroup on Vulnerable people takes a whole of government approach and focuses on the policy responsibilities of the various Departments and Agencies and their work on ensuring preparedness plans and contingencies are in place to mitigate the impact of

cases, mitigation measures and spread of COVID-19. Government departments, state agencies and other stakeholders have a responsibility to advance their considerations to ensure planning and effective communications are in place in moving to PHASE 2 for the vulnerable groups and service users under their remit.

As part of this work the meeting on the 3rd June focused on:

- I. Potential changes to the cocooning guidance based on the roadmap
- II. Discussion on the D/Taoiseach paper social implications of COVID-19
- III. Updates from subgroup members on their ongoing policy work in relation to PHASE 2 of the Roadmap and any changes for groups or services under their remit.

The D/Health updated the group on the work of the Community Capacity Working Group to develop plans for the resumption of health services in the community including to older persons, people living with disabilities and those accessing mental health or social inclusion services.

A number of subgroup members outlined plans for resumption of services under their Department/ State Agency remit, including D/CYA and D/JE, and a number of issues were raised including safeguarding, the associated costs of alternative ways of providing services and the contribution of informal care.

NPHET Vulnerable Group Secretariat, 15 June 2020