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An tÚdarás Um Fhaisnéis
agus Cáilíocht Sláinte

HIQA opening statement

Special Committee on COVID- 19 Response

26 May 2020

Safer Better Care

I welcome this opportunity to address the Special Committee on Covid-19 Response. I am joined by my colleague Mary Dunnion, Chief Inspector of Social Services and Director of Regulation.

HIQA, through the Chief Inspector, registers and inspects 584 nursing homes accommodating approximately 30,000 residents.

From the onset of this public health emergency, HIQA has endeavoured to make an effective contribution to the national response through our interactions with the Department of Health, the HSE, providers, residents and relatives.

Whilst routine inspections were not initially possible, HIQA has a process in place whereby all designated centres are formally contacted by an inspector on a regular basis to assess how they are managing in the provision of safe services to vulnerable service users. In addition, the Chief Inspector issued eight regulatory notices with the aim of reducing the regulatory burden on providers.

Inspections required to register new centres or to facilitate increased capacity have been expedited within days. HIQA has provided information to the Department of Health and the HSE on those centres with a history of poor compliance with key regulations, as these services were at increased risk of a COVID-19 outbreak.

Formal processes are in place whereby HIQA escalates actual or potential risk to the HSE's crisis management teams. On a weekly basis, the Chief Inspector and her leadership team meet the HSE to formally discuss ongoing issues and to escalate risk in the sector.

To support the public health response, HIQA provided the HSE with key information, such as the locations of nursing homes, the number of residential beds and staffing levels. Furthermore, the HSE and the Department of Health availed of HIQA's online notification system to ensure the timely distribution of information to all nursing homes.

Currently 80% of nursing homes are operated by private providers. Although funded through the Nursing Home Support Scheme (Fair Deal), the HSE did not know this sector. As a consequence, the infrastructure required by the HSE to support the private sector was under resourced and became increasingly challenged.

In addition, the current model of private residential care for older persons has no formal clinical governance links with the HSE. Importantly, this means there is no national clinical oversight of the care being delivered to some of our most vulnerable citizens.

Many nursing homes and disability centres were adequately prepared for and managed to contain COVID-19 outbreaks. However, the private nursing home sector faced unique challenges, regarding, for example:

- timely testing and results
- access to sustainable levels of PPE, oxygen and subcutaneous fluids
- base-line staff numbers, including senior nursing expertise in infection control.

In recognition of the difficulties faced by the providers of residential services, HIQA initiated a number of interventions from 5 March. These included the escalation to the HSE and the Department of Health of risks and trends requiring a more coordinated national response.

On 18 March, HIQA made a formal offer to assist the HSE in liaising with designated centres. This was in recognition of the fact that there was no established relationship between the HSE and the private sector.

Every day, HIQA collates data on the number of designated centres with suspected and confirmed cases of COVID-19, as well as the numbers of unexpected deaths in designated centres. Since the end of March, this information has been supplied on a daily basis to the Department of Health initially, and then to the HSE and the HPSC.

From 1 April, HIQA requested a formal escalation pathway for a more strategic coordinated approach to:

- the supply of PPE,
- resident and staff testing and results,
- a longer-term approach to staffing, and
- infection control advice.

To provide support and assistance to providers and staff, HIQA established an *Infection Prevention and Control Hub* on 6 April 2020. HIQA also continues to review information received from members of the public, care staff, and family members.

It must be acknowledged that the creation of crisis management teams in each CHO area and the resources provided by the HSE at the community level played a significant part in supporting the private sector, and importantly, in protecting residents.

COVID-19 has presented significant challenges to the current models of care in place for our older citizens. Since our establishment, HIQA has endeavoured to influence policy in the area of older persons' services based on our experience of the sector and on best-practice developments in other jurisdictions.

HIQA believes that the quality and safety of our health and social care services would be greatly improved by a review of the current regulatory framework and the introduction of an accountability framework, to include a commissioning model.

As part of an accountability framework, HIQA believes that a system of care management could be introduced across the HSE's community service areas. Such a model would be closely aligned to the principles and goals articulated within Sláintecare, as the key aim of the system is to support people in, or close to their own homes as possible.

These care plans are based on multi-disciplinary assessments and would enable a sustained shift away from the institutional model towards a more person-centre system whereby care is provided in the home.

Thank you for your attention this afternoon. I look forward to answering any questions you may have.



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