

CONFIDENTIAL

Stephen Donnelly TD Minister for Health Department of Health Block 1 Miesian Plaza 50-58 Lower Baggot St Dublin 2

10 February 2021

Ref: PQ/EMcC/SD/20210210

Dear Minister,

Re: Ministerial Directions under Section 29 Health Act 2007 as amended (the 2007 Act) (Section 29 Directions)

I acknowledge receipt of your letter dated 4 February 2021 and the Ministerial directions issued under Section 29 of the 2007 Act requiring HIQA to comply with the following;

1. Provide a "full report of the risk assessment completed by the Chief Inspector on 26 November 2020 including relevant service details (e.g. risk profile and status) for the purpose of ensuring it is available to the HSE"

I note that the report and associated information are required for the purpose of ensuring a coordinated national approach to the COVID-19 response, as regards the safe delivery of services during the pandemic. In accordance with Section 29(2) of the 2007 Act, I now enclose the full November 2020 report detailing nursing homes at potential risk should they have a COVID-19 outbreak. This report includes statutory, voluntary and private nursing homes and reflect the regulatory information available on each centre at that time

Since this risk assessment, a number of additional nursing homes have had COVID-19 outbreaks. Some of these centres were unable to effectively manage and control the outbreak and as a consequence required significant public health, regulatory and HSE support.

Head Office:
 Unit 1301, City Gate, Mahon,
 Cork, T12 Y2XT, Ireland

Dublin Regional Office: George's Court, George's Lane, Dublin, D07 E98Y, Ireland

Tel: +353 (0) 21 240 9300 Fax: +353 (0) 21 240 9600 Tel: +353 (0) 1 814 7400 Fax: +353 (0) 1 814 7699 In the vast majority of these centres, the deficits identified again include:

- Insufficient base staffing levels
- Standalone registered providers with limited inbuilt resilience and peer support
- · Ineffective governance (management and clinical) arrangements
- Poor infection prevention and control practices commensurate with relevant HPSC guidance

In accordance with Ministerial direction, I will simultaneously furnish this report to the HSE in accordance with Section 38 of the 2007 Act.

Yours sincerely,

PHELIM QUINN
Chief Executive

Cc. Mary Dunnion, Chief Inspector of Social Services, Director of Regulation Yvonne O'Neill, Interim National Director of Community Operations, HSE

Regulatory assessment of a designated centre's potential risk in the event of a COVID-19 outbreak			
Explanation			
Column L - Risk Profile (Overall regulatory compliance) This section presents the baseline risk level assigned to a centre reflecting the totality of the information we hold pretaining to a centre (inspection activity, notifications and unsolicited information). The higher the number the			
greater the risk	Risk level assigned		
Green	1		
Yellow	2		
Orange	3		
Red	4		

Column M - Number of Beds			
Our experience to date is that the smaller the centre the greater the impact of a COVID-19 outbreak. This se	ction		
quantifies the risk according to the size of the centre with smaller centres allocated a higher risk rating.		Risk level a	as gned
09 - 40			
41 - 100			
101 +		1	

Column N - Regulatory Risk This section quantifies the risk according to non-compliance with key regulations before the ons of the cunt public health emergency and the resources available to individual centros. Where a cent doing regula history and access to the resources of a wider group the identificial isk lower. Where centro has one	
regulatory history and no access to the resources of a wider g p the identified risk igher	k level assigned
The provider of the centre has access to the resources of a wid p and centre a good regul history	1
The provider of the centre does not have access to the resources wider gro and the re ha good regulatory history	2
The provider of the centre has access to the re rces o wider grou ut the cen has a history of two or more non-compliances across 6 key regulation	3
The provider of the centre does not have a s to the resou of a wid roup and had a history of two or more non-compliances across 6 k tions	4
A number of centres a deemed to t high based on add onal information that we hold through a n of the a ve	5

Column O and Colum Total Risk Sco and Overall Potential Risk level	
Accepting that risk is m actoral and amic the above three categories were combine uild a risk profile	
pertinent to nursi home risk in the context of the current public health e gency and p esent th	Overall pot ial risk
as low, medium o gh as requested by Minister Donnelly	leve
A centre with a t $\frac{1-6}{1-6}$ is more likely to have the ability and the support to iden $\frac{1-6}{1-6}$ manage a $\frac{1-6}{1-6}$ contro an outbreak of $\frac{1-6}{1-6}$ viD-19 and is thereby classed as a low risk	w
ntre total score of 7 - 10 will have greater inbuilt resilience to identif nage and c rol an outb k	
of C D 19 and some access to external supports but may still require low vel ex al suppor hereby cla d	
as a medium risk	Medium
A centre with a total score of 11 - 14 will be challenged to identify, ma and control a utbreak o OVID-19	
and is likely to require significant external supports in th of an ou ak. Such cent are classified as high	
risk	High

HIQA_Confiden S29_InformationRequest 09/02/21