### Implications for HIQA of the crisis in Ukraine

### **Background**

At the March Board meeting, it was suggested that the EMT should consider if there are any implications for HIQA of the evolving crisis in Ukraine. EMT has considered issues arising for each function and addressed as appropriate.

A summary of the issues raised, the resultant actions and the proposed additional actions where appropriate, is provided to the Board for information.

#### **Issues raised**

Issues which have been raised for consideration are outlined below with any subsequent action already taken and any additional action proposed:

# Nursing homes

#### <u>Issue</u>

Nursing home providers have been approached to use vacant space for housing of people from Ukraine. HIQA knows of one provider who is using a vacant floor (unregistered part of the designated centre) in a registered centre to accommodate people from Ukraine. HIQA is also aware that other de-registered homes have been earmarked.

DCDEIY is the lead Department on sourcing accommodation for people from Ukraine.

#### Action(s) taken to date

A letter was sent to the Assistant Secretary for Social Care, Dept. of Health by the Chief Inspector acknowledging the humanitarian crisis the Ukrainian situation poses and also highlighting the regulatory concerns for vulnerable adults in the event that designated centres are used as emergency accommodation. The letter from the CI also provided information to the Department of Health on centres that have closed since 2019 as well as new builds which may aid in the consideration of accommodation. The letter also sought a meeting with the Department to discuss queries providers raised with the CI regarding the recruitment of people who have recently arrived from Ukraine.

The CI spoke with the PO, Dept. of Health (13/04/2022) to appraise them of her concerns.

### Proposed additional action

The CI will monitor the designated centre through the regulatory framework and a programme of inspections and take action if the situation poses a risk to the residents of the centre.

#### Designated centres for people with disabilities

#### Issue

There is currently no capacity in designated centres to accommodate people with disabilities from Ukraine. There is no emergency registration provision in the legislation.

### Action(s) taken to date

The CI has escalated to the Dept. of Health concerns regarding the opening of unregistered centres on numerous occasions in the past, most recently in January 2022. The CI also reiterated these concerns regarding the absence of emergency registration to the Bi-lateral Regulatory Amendments Group chaired by the Dept. of Health by email on 11/04/2022.

# Proposed additional action

The CI will continue to monitor the situation.

#### Children's Services

#### **Issue**

Tusla is developing a planned response to the Ukraine crisis. Actions being proposed;

- ➤ Increase foster care placement up to a maximum of 4 children. Allow for siblings to share rooms.
- ➤ Emergency foster care for a period of 20 weeks after which the foster carer would have to commence the full assessment process.
- Potential for increased children residential centres (not sure if Tusla commissioned or Tusla provided).
- Other professional staff to be employed to undertake specific tasks for CRC and foster care under the supervision of a social worker.
- Higher use of aftercare Aftercare planning

The CI has concerns with regard to Tusla's capacity regarding placement especially for children with complex needs.

#### Action(s) taken to date

The CI and Head of Children's met twice with DCDEIY and Tusla to discuss the approach. The CI has reviewed and provided feedback regarding Tusla's plan (01/04/2022).

#### Proposed additional action

The CI is awaiting further update from DCDEIY. The CI is continuing to monitoring services.

## • International Protection Accommodation Services (IPAS)

#### **Issue**

The influx of refugees from Ukraine has the potential to impact the plans with regard to the duration of HIQA's interim role in monitoring IPAS. Main areas of impact may be the DCDEIY's capacity to progress this area of policy in the context of other demands on their time (both progression of HIQA's monitoring or the new system of international protection accommodation).

It may also result in an increase in Direct Provision type accommodation for refugees from Ukraine who will be equally vulnerable to those in pre-existing Direct Provision – yet HIQA's role is not currently intended to extend to this group.

### Action(s) to date

This matter remains a standing item for discussion with DCEDIY as part of HIQA's ongoing routine engagement with the Department in preparation for the originally planned role for HIQA. It has been outlined to HIQA that in policy terms the Department regards the pre-existing plans for HIQA's role to be unchanged. Moreover the response to the Ukrainian situation by the State remains in an early emergency phase.

## Potential additional action – dependent upon how this evolves

As the situation evolves over the coming weeks, there may be a need for HIQA to officially query with the Department whether our role should be expanded to include services provided to people from Ukraine that are more permanent. However at the current time it would likely be premature to consider such an action. Moreover, it should be noted that currently HIQA does not have the legal remit to inspect any such services – either preexisting IPAS services or those being provided to people from Ukraine.

## · Healthcare monitoring

#### <u>Issue</u>

The additional influx of refugees will have resource implications for the health service which is already strained due to underlying capacity deficits and COVID-19. The extra demands will result from the gross increase in population numbers, a high proportion of women and children in that cohort meaning that service utilisation in these areas will be impacted, and also the impact of the conflict – especially on children and adolescents (implications for CAMHS in particular).

## Proposed action

Healthcare monitoring will need to take these factors into account on inspection. With the recent launch of HIQA's new inspection methodology against the *National Standards for Safer Better Healthcare* for inpatient facilities, HIQA has an approach to inspection which may be readily adaptable to any risks that may arise as a consequence of these factors across the health service. However to date, no further specific action has been deemed necessary in response to this evolving situation.

#### Budget implications for the health and social care system

#### Issue

The very significant level of government funding required to manage the refugee situation may require funds to be re-directed from within areas of health and social care that HIQA interfaces with. This may begin to emerge through monitoring or regulation.

# Cyber security

#### <u>Issue</u>

HIQA is aware of the increased risk of cyber-attack as a direct consequence of the conflict. HIQA has 24 x 7 cyber security monitoring in place. This contract expires mid May 2022. A cyber security tender has been issued and received a significant number of responses from the market. Evaluation of the tender has been prioritised. To ensure the continuity of the cyber security monitoring on HIQA's assets, our current service with BDO has been extended for another 2 months to protect HIQA's systems and its data.

### Action(s) taken to date

We have 24 x 7 cyber security monitoring service which will continue to be in place until the successful tenderer is on-boarded.

## Proposed additional action

A new cyber security tender was issued and is currently being evaluated. Once the successful tenderer is identified, on boarding the successful tenderer will commence to ensure the continuity of the cyber security monitoring service.

# Regulation IT systems (PRISM and portal)

#### Issue

There should be minimum impact on regulation technology systems (PRISM and portal) as both children's services and planned IPAS are currently outside the scope of PRISM.

### Proposed action:

Continuing to manage IPAS outside of PRISM may need to be reviewed if the number of IPAS services increases significantly. The risk to our existing PRISM system will be a major part in the decision making.

#### IT equipment

#### Issue

If additional staff are required to regulate an increased number of centres and services, this would result in an increase in technology hardware requirements for new starters.

## Action(s) taken to date

We have ordered additional equipment due to the anticipated logistical delivery issues in the market as well as expected new starters for IPAS and other commencements.

# • HRB funded placements for researchers

## <u>Issue</u>

HRB has announced a supplemental grant scheme targeted to eligible active grant awards (includes HIQA's CICER and LENS awards) which aims to enable researchers from Ukraine to remain engaged with health and social care research. The Ucrisis 2022 grant scheme will operate on a rolling basis, with an accelerated application review process in place to facilitate timely announcement of outcomes. If HIQA decides to pursue this grant scheme, it will require identification of researchers from Ukraine with suitable skills and development of appropriate research projects that support current research and take consideration of the duration of ongoing awards.

## Health & Social Care Regulatory Forum

### Issue

Following a discussion at the recent Health and Social Care Regulatory Forum meeting, the Chair wrote to the Secretary General of the Department of Health emphasising its willingness to work with the Department in responding to the Ukraine crisis to reduce the risk to public health, through regulation, promotion of safety and offering the expert knowledge of the constituent organisations. The Department has responded with details of its Ukrainian refugee coordination group.