SECRETARIAT FOLLOW-UP QUESTIONS FROM PAC MEETING HELD ON 10TH MAY

- A note comparing the cost per test under the Cervical Screening programme between Irish and US Laboratories.

HSE Response:

<table>
<thead>
<tr>
<th>Lab</th>
<th>Cost per cytology</th>
<th>Cost per HPV</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lab A</td>
<td>€23.00 per pap test</td>
<td>€20.00 per HPV test</td>
</tr>
<tr>
<td>Lab B</td>
<td>€22.00 per pap test</td>
<td>€21.70 per HPV test</td>
</tr>
<tr>
<td>Lab C</td>
<td>€20.50 per pap test</td>
<td>€22.90 per HPV test</td>
</tr>
</tbody>
</table>
A copy of the contract between the HSE and the US laboratories.

HSE Response:

The laboratory contracts are commercially sensitive and unfortunately cannot be released. However we can provide a summary of the contracts to the Committee but given time constraints we will revert with these as soon as possible.
A note on process followed following notification from the State Claims Agency that it had paid out in a case without an admission of liability.

HSE Response:

State Claims Agency (SCA) have advised that the HSE are not made aware when the SCA have paid out in a case without an admission of liability.
A note on the number of HSE staff that have been sanctioned as a result of disciplinary procedures and the nature of those sanctions.

HSE Response:

National Human Resources:

Please find details of dismissals and disciplinary investigations ongoing. The data attached is what is known or reported centrally as input of staff at central level has been sought, therefore the actual figures will be higher as many of the disciplinary issues and cases are managed locally.

<table>
<thead>
<tr>
<th>Year</th>
<th>Grade</th>
<th>Reason</th>
</tr>
</thead>
<tbody>
<tr>
<td>12 cases in 2015</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2015</td>
<td>Paramedic</td>
<td>Serious Misconduct</td>
</tr>
<tr>
<td>2015</td>
<td>Paramedic</td>
<td>Serious misconduct</td>
</tr>
<tr>
<td>2015</td>
<td>Social worker</td>
<td>Bullying</td>
</tr>
<tr>
<td>2015</td>
<td>Adolescent psychiatrist</td>
<td>Misconduct</td>
</tr>
<tr>
<td>2015</td>
<td>Staff nurse</td>
<td>Serious misconduct</td>
</tr>
<tr>
<td>2015</td>
<td>HCA</td>
<td>Poor performance</td>
</tr>
<tr>
<td>2015</td>
<td>HCA</td>
<td>Serious misconduct</td>
</tr>
<tr>
<td>2015</td>
<td>Counsellor</td>
<td>Dignity at work</td>
</tr>
<tr>
<td>2015</td>
<td>HCA</td>
<td>Assault</td>
</tr>
<tr>
<td>2015</td>
<td>Porter</td>
<td>Absences from work</td>
</tr>
<tr>
<td>2015</td>
<td>Care assistant</td>
<td>Fraud</td>
</tr>
<tr>
<td>2015</td>
<td>Programme director</td>
<td>Serious misconduct</td>
</tr>
<tr>
<td>3 cases in 2016</td>
<td></td>
<td></td>
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<tr>
<td>2016</td>
<td>Clerical officer</td>
<td>Serious misconduct</td>
</tr>
<tr>
<td>2016</td>
<td>Household Attendant</td>
<td>Serious misconduct</td>
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<tr>
<td>2016</td>
<td>Audiologist</td>
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<tr>
<td>4 cases in 2017</td>
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<td></td>
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<tr>
<td>2017</td>
<td>HCA</td>
<td>Garda vetting issues</td>
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<td>2017</td>
<td>Staff nurse</td>
<td>Absence</td>
</tr>
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<td>2017</td>
<td>Attendant</td>
<td>Absence from work</td>
</tr>
<tr>
<td>2017</td>
<td>Nurse</td>
<td>Serious misconduct</td>
</tr>
<tr>
<td>Division</td>
<td>Hospital Group/CHO/Corporate Function/Section 38</td>
<td>Hospital Name/Sub Location/Function/Section 38 - ID Agency</td>
</tr>
<tr>
<td>---------------</td>
<td>--------------------------------------------------</td>
<td>--------------------------------------------------------</td>
</tr>
<tr>
<td>Social Care</td>
<td>Area 6 – Wexford, De Laoghaire, Dublin South East</td>
<td>National Rehabilitation Hospital</td>
</tr>
<tr>
<td>Acutes</td>
<td>University of Limerick Hospital Group</td>
<td>Ennis Hospital</td>
</tr>
<tr>
<td>Acutes</td>
<td>University of Limerick Hospital Group</td>
<td>Croom Hospital</td>
</tr>
<tr>
<td>Acutes</td>
<td>University of Limerick Hospital Group</td>
<td>Croom Hospital</td>
</tr>
<tr>
<td>Acutes</td>
<td>University of Limerick Hospital Group</td>
<td>University Hospital Limerick</td>
</tr>
<tr>
<td>Acutes</td>
<td>University of Limerick Hospital Group</td>
<td>University Hospital Limerick</td>
</tr>
<tr>
<td>Mental Health</td>
<td>Area 9 – Dublin North, Dublin North Central, Dublin North West</td>
<td>Nil</td>
</tr>
<tr>
<td>Primary Case</td>
<td>Area 9 – Dublin North, Dublin North Central, Dublin North West</td>
<td>Nil</td>
</tr>
<tr>
<td>Social Care</td>
<td>Area 9 – Dublin North, Dublin North Central, Dublin North West</td>
<td>Nil</td>
</tr>
<tr>
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<td>CHO Area 8</td>
<td>Laois CAMHS</td>
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<td>Mental Health</td>
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<td>Mental Health</td>
<td>CHO Area 8</td>
<td>St Loman’s</td>
</tr>
<tr>
<td>Westmeath</td>
<td>CHO8</td>
<td>ID Services</td>
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<tr>
<td>South East</td>
<td></td>
<td>All grades</td>
</tr>
<tr>
<td>Acutes</td>
<td></td>
<td>Portlaoise</td>
</tr>
</tbody>
</table>
A note on whether an audit process is being conducted into the State screening programmes.

HSE Response:

While recent focus has been on CervicalCheck the HSE intends to look at the quality and patient safety systems across all four screening programmes. We are currently sourcing some international screening expertise to support all four programmes. Separately we are conscious Dr Scally will be looking at the four programmes and we want to have resource in place that can support Dr Scally's review. Our plan is to engage with Dr Scally on this matter in our initial meetings.
• A note on the process engaged in and steps taken by the HSE in developing its communications strategy in response to the outcomes of the audit of cervical screening.

HSE Response:

We are still sourcing all the communications documentation from the audit of cervical screening and will revert as soon as possible.
• A note regarding the March 2016 memo to include the author and sources of information and advices (legal or otherwise).

HSE Response:

The memo was drafted by the then Head of Screening Services, Clinical Director and Cervical Check Programme manager.
Question 1 (Deputy Alan Kelly)

TRAIL OF WHO RECEIVED MEMOS:

The 2016 memos have no specific dates or actual signatures. Could all emails, any in house computer system containing these memos, covering letters, internal post etc be given to PAC and all individuals who actually received a copy of these memos and when.

HSE Response:

Response: Office of the National Director Strategic Planning and Transformation

The communications referred to as Memo’s are Briefing Notes which are not normally signed. Each Briefing Note is titled as a Briefing Note and refers to the month in which it was shared e.g. February 2016; March 2016; April 2016; July x 2 2016; and October 2016.

Briefing Notes would have been supported with verbal context either in advance of sharing or on foot of the same at scheduled meetings etc.

1) Briefing Note received 26th February 2016, dated February 2016, shared by the Office of the National Director Health and Wellbeing, with the following Office
   - Office of the National Director, Quality Assurance and Verification Division, 4th March 2016

2) Briefing Note received 9th March 2016, dated March 2016, was shared with the following by the National Office Health and Wellbeing;
   - Office of the Director General for meeting on 24th March 2016
   - Office of the Assistant Secretary, Acutes Hospital Division, Department of Health and Office of the Chief Medical Officer, Department of Health 29th March 2016

3) Briefing Note received 21st April 2016, dated April 2016, signed off by A/AND NSS, was shared with the following by the National Office Health and Wellbeing;
   - Office of the National Director, Quality Assurance and Verification Division, 27th April 2016
   - Office of the Chief Medical Officer, Department of Health 26th April 2016

   Note: This Briefing Note was also shared directly with the DoH by A/AND NSS on 22nd April 2016.

4) Briefing Note received 30th June 2016, dated July 2016, signed off by A/AND NSS, was shared with the following by the National Office Health and Wellbeing;
   - Office of the Director General for meeting on 1st July 2016

5) Briefing Note received 11th July 2016, dated July 2016, signed off by Programme Manager, CervicalCheck, NSS was shared with the following by the National Office Health and Wellbeing;
   - Office of the Director General for meeting on 12th July 2016
   - Office of the Assistant Secretary, Acutes Hospital Division, Department of Health and Office of the Chief Medical Officer, Department of Health 12th July 2016
6) Briefing Note dated October 2016, which was signed off by John Gleeson, Programme Manager, CervicalCheck and Dr. Grainne Flannelly, Clinical Lead, CervicalCheck, was shared by AND, NSS, directly with Department of Health Offices/Officials on 10th October 2016 via email and copied to Office of the National Director Health and Wellbeing.

- Office of the Assistant Secretary, Acutes Hospital Division, Department of Health and Office of the Chief Medical Officer, Department of Health 10th October 2016.

Note: As at 15th May 2018 – further searches on-going in Archive to determine if October 2016 Briefing Note was shared elsewhere within the HSE.

In addition we have now setup a small team to support the disclosure process for the Scally review and ensure all documents are provided. They are now in place and have commenced the discovery process which will include the documents and emails requested.
1. In the 2016 memos given to PAC it states “Pause all letters” who wrote these letters to patients? Was it centralised or decentralised?

Response: Office of the National Director Strategic Planning and Transformation
The letters to treating Consultants to inform patients concerned of the results of the audit findings were developed by the CervicalCheck Programme on foot of a review of good practice in other jurisdictions in relation to the disclosure of audit results in Cancer Screening. Legal advice was also sought by CervicalCheck on the communication process and content of letters as appropriate.

The CervicalCheck Programme managed the issuing of the communications directly to treating clinicians concerned (29 treating Clinicians referred to in October 2016 Briefing).

2. Can we find out the date of the correspondence from Cervical Check to clinicians informing them of the issues with regards to the women’s cases? Also, was this correspondence copied to relevant hospital managers?

Response: Office of the National Director Strategic Planning and Transformation
The CervicalCheck Programme commenced issuing letters in February 2016. The issuing of letters was temporarily paused on foot of escalation of legal issues by one of the Laboratories concerned. The issuing of letters resumed in June 2016. Letters in relation to what CervicalCheck referred to as ‘historic cases’ (initial audit process took time to set up and complete) for a period were issued over the period July – August 2016. After that time the Programme has advised that letters for more recent cases reviewed as part of the ongoing CervicalCheck Clinical Audit process would issue from September 2016 at 4-6 a month. The dates for all the correspondence concerned (203 letters referred to in October 2016 briefing) would vary and be reflected on final correspondence as issued directly to the treating clinician concerned.

The letters concerned contained confidential patient information and were issued directly to the treating clinicians. This type of correspondence would not be typically be copied to Hospital Managers.
Question 3 (Deputy Alan Kelly)
PR WITH THE HSE AND DEPARTMENT OF HEALTH:

1. The HSE has an in-house National Director for Communications and verifications. Who was that person in 2016? and was he/she involved in discussions re media as per comment in memos received by PAC last Thursday; i.e. "continue to prepare reactive communications response for a media headline that "screening did not diagnose my cancer"? If so, could all communications, via internal mail, email, memos, letters etc regarding this be given to PAC?

HSE Response:

The HSE has a National Director of Communications. The relevant person in 2016 was and is Mr. Paul Connors. Mr. Connors was not involved in discussions re media as per comment in the memos received. Furthermore, he had no knowledge of this matter until 12:50 on Wednesday 25th April 2018.

2. Did the HSE from 2008 ever hire an external PR, in relation to this, if so, whom, and for what purpose? In regard to the memo’s did the HSE staff named in memos or others ever hire PR for advice in regard to Cervical Cancer matters/concerns.

HSE Response:

Neither the HSE nor the Cancer Screening Service hired an external PR firm in relation to this matter. No HSE staff named in memos or others hired PR for advice in regard to Cervical Cancer matters/concerns.
Question 4 (Deputy Alan Kelly)

LEGAL ADVICE: (1/1/2016 TO DATE):

1. Could the HSE outline what legal firms they employed to give advice on the cervical check issues? Also the dates of any meetings between the HSE and these legal teams.

2. Did the HSE ever seek legal advice through the Department of Health from the Attorney General on these matters and if so for what purpose and on what dates?

HSE Response:

There were discussions with each of the three laboratories on this matter. As a result of a legal query by one laboratory legal advice was sought in relation to one of the laboratories. This was provided by Arthur Cox. The matter was then resolved.

The HSE did not seek legal advice through the Department of Health or the AG office.
**Question 5 (Deputy Alan Kelly)**

**HSE RISK COMMITTEE:**

1. Name the Chair of the Risk committee and the Audit Committee in 2016 and the other committee members.

2. Was this person or committee ever informed at any stage regarding this serious matter? If so, by whom and what form of communication was used?

3. Did anyone on this committee ever receive a copy of any of the "memos"?

4. Could PAC have a copy of the Risk register from 2008 to date?

5. Name the individual(s) who had responsibility for the area of “Cervical Check” and "Health and Wellbeing" on the risk register, were they ever informed? If so, when?

6. When did the Risk committee and the Audit Committee become aware of the seriousness of these matters? Who told them? And by what means of communication was used to impart information?

7. When was the HSE Directorate members made aware of these matters? By whom and what medium was used to communicate this?

**HSE Response:**

1. **Name the Chair of the Risk committee and the Audit Committee in 2016 and the other committee members.**

**Risk Committee 2016**

- Mr. Tom Beegan (Chairman) – CEO and President, Tom Beegan and Associates, and former CEO, Health and Safety Authority.
- Mr. Ger Crowley – Social Worker
- Mr. Simon Kelly – Energy Consultant and former CEO of the National Standards Authority of Ireland
- Mr. Pat Kirwan – Deputy Director, State Claims Agency
- Ms. Margaret Murphy – WHO Patients for Patient Safety
- Dr. Stephanie O’Keeffe – National Director Health and Wellbeing.
- Ms. Rosemary Ryan – Manager Client Enterprise risk Management Services, IPB Insurance.
- Mr. Colm Campbell – former Assistant Chief of Staff for the Defence Forces.
- Dr. Sheelah Ryan – public health physician, former CEO of HSE West/WHB

**Audit Committee 2016**

- Mr. Peter Cross (Chairman) – Managing Director of Trasna Corporate Finance (and a Fellow of Chartered Accountants Ireland).
- Mr. Joe Mooney – former Principal Officer of the Department of Finance.

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1 Appointed to replace Mr. Tom Beegan as Chair of the Risk Committee on the 7th November 2016 and resigned from the Audit Committee on 19th December 2016 to replace Tom Beegan as Chair of HSE Risk Committee.
Mr. John Hynes – former Secretary General at the Department of Social and Family Affairs.
Mr. David Smith – Principal Officer at the Department of Health.
Mr. Stephen McGovern – CRH Group Regulatory, Compliance and Ethics Project Lead: E-Learning (and a Fellow of Chartered Accountants Ireland)
Dr. Sheelah Ryan – public health physician, former CEO of HSE West/WHB
Prof. Patricia Barker – Chartered Accountant, Director of Tallaght Hospital, former Vice President (Academic) DCU
Ms. Anne O’Connor – HSE National Director Mental Health.

2. Was this person or committee ever informed at any stage regarding this serious matter? If so, by whom and what form of communication was used?

It is not the purpose of either the Audit or the Risk Committee to manage operational issues and in this context it would not have expected to be made aware of the issues regarding the CervicalCheck audit. Both Committees act in an advisory capacity and have no executive function. Given the risk to public confidence in the screening programme and the concerns in relation to the women affected by the current controversy the Chair of the Risk Committee requested the Chair of the Serious Incident Management Team to provide a report to the Committee at its meeting on Friday 11th May 2018.

3. Did anyone on this committee ever receive a copy of any of the "memos"?

No

4. Could PAC have a copy of the Risk register from 2008 to date?

Given the short notice to gather this information from 2008 to date we will revert to the committee as soon as possible.

5. Name the individual(s) who had responsibility for the area of “Cervical Check” and "Health and Wellbeing" on the risk register, were they ever informed? If so, when?

Dr. Stephanie O’Keeffe, former National Director of Health and Wellbeing (H&W) had responsibility for the H&W risk register from July 13 till Dec 17. Each Assistant National Director in the H&W Division had responsibility for managing and mitigating risks in their respective service areas. The AND for National Screening Services (Majella Byrne until March ’16; Simon Murtagh (interim) from March ‘16 until August ‘16 and Charles O’ Hanlon from late August ‘16 - May ‘18) is responsible for screening services risk management. Within the National Screening Service, Programme Managers and/or clinical directors have responsibility for each of the four national screening programmes (breastcheck, cervicalcheck, bowelscreen, diabetic retinopathy). Dr. O’Keeffe maintained responsibility for National Screening Services during a transition period (Jan-Feb ‘18) when the National Screening Services came under the direction of Dr Jerome Coffey National Cancer Control Programme (March 18). Mr Damien McCallion who recently took up the post of National Director Screening Services now has the responsibility.

Dr. Stephanie O’Keeffe was not advised of any difficulties, concerns or worries regarding clinician compliance with open disclosure request.

6. When did the Risk committee and the Audit Committee become aware of the seriousness of these matters? Who told them? And by what means of communication was used to impart information?

See reply at 2. above.
7. When was the HSE Directorate members made aware of these matters? By whom and what medium was used to communicate this?

The Directorate has collective responsibility as the governing authority for the HSE in accordance with the Health Service Executive (Governance) Act 2013.

The duties of the Directorate are set out in the HSE’s Code of Governance. In practice, the Directorate delegates to the Director General all the functions of the HSE, except for specific functions it reserves to itself. These include responsibility for reviewing, approving and monitoring the progress of the HSE Corporate, Service and Capital Plans. The Directorate also approves significant expenditure as well as ensuring that financial controls and systems of risk management in place are robust and accountable.

It is not the purpose of the Directorate to manage operational issues and in this context it would not have expected to be made aware of the issues regarding the CervicalCheck audit.
Question 6 (Deputy Alan Kelly)

INTERNAL AUDIT DIRECTOR OF HSE:

1. Did the Director of Internal audit ever receive a copy of these memos’ or other relevant information in relation to this matter?

2. Did the Director of Internal audit ever have concerns regarding "Cervical Check" and the contract which the HSE signed?

3. Did he or any of the 40 staff in that division ever raise concerns in regard to Cervical Check on any front, financial, VFM, risk to HSE or any findings in the course of their work?

4. Is there any "special reports" either asked for by the HSE Directorate or produced by the Head of internal audit regarding this matter? If so can PAC have a copy?

HSE Response:

1. Did the Director of Internal audit ever receive a copy of these memos’ or other relevant information in relation to this matter?

   No

2. Did the Director of Internal audit ever have concerns regarding "Cervical Check" and the contract which the HSE signed?

   No

3. Did he or any of the 40 staff in that division ever raise concerns in regard to Cervical Check on any front, financial, VFM, risk to HSE or any findings in the course of their work?

   No

4. Is there any "special reports" either asked for by the HSE Directorate or produced by the Head of internal audit regarding this matter? If so can PAC have a copy?

   There are no HSE Internal Audit reports on Cervical Check.
**Question 7 (Deputy Alan Kelly)**

**HSE NATIONAL PERFORMANCE MANAGEMENT GROUP (NPOG):**

Could PAC receive a copy of all minutes of this group for 2016, 2017, and 2018.

**HSE Response:**

NPOG notes for 2016 to 2018 are submitted as an appendix

For 2016 and 2017 we have provided the Minutes for the Health and Wellbeing Division as they had responsibility for CervicalCheck.

For 2018 the NPOG process has changed. It is a single meeting covering all services and therefore they are combined meeting notes.
**Question 8 (Deputy Alan Kelly)**

**LEAD COLPOSCOPISTS MEETINGS:**

Could we get the minutes of these meetings from 2014-2018

**HSE Response:**

The Colposcopists Group held their inaugural meeting on 1st September 2017. The draft minutes of the meeting are appended for information.
Question 9 (Deputy David Cullinane)

MEMO'S:

- Times and dates for each of the three memos
- Details on who wrote the memo’s, the process involved and the line management structures and all associates correspondence
- Who signed off on the memos and all associated correspondence
- Who sent the memo’s to the Dept
- Who received the memo’s to the Dept
- All communication between the HSE and Dept re the memo’s
- Who sent the memo’s to Tony O’Brien
- All correspondence to and from Tony O’Brien’s office to the memo’s (Aoife Ohaodha)
- A detailed list of all individuals and organisations who received the memos
- A detailed list of all HSE and Department meetings that the memo’s were discussed or listed for discussion
- A detailed list of all HSE and Department meetings that the issue of incorrect smear tests and the audit process was discussed

HSE Response:

MEMO’S:

- Times and dates for each of the three memos

Response: Office of the National Director Strategic Planning and Transformation

In relation to the three Briefing Notes shared with PAC on 10th May 2018, that are being referred to as Memos, they were received from colleagues in the NSS as follows;

- Briefing Note dated March 2016 – Received by Office of the National Director Health and Wellbeing 9th March 2016
- Briefing Note dated July 2016 and signed off by A/AND NSS – Received by the Office of the National Director, Health and Wellbeing 30th June 2016
- Briefing Note dated July 2016 and signed off by Programme Manager, CervicalCheck - Received by the Office of the National Director, Health and Wellbeing 11th July 2016

Please note that there were six briefing notes in total provided by NSS on this matter. Each Briefing note reflected the most current position in relation to the Audit process and communicating the findings of the same to treating clinicians to inform their patients as appropriate.

Other Briefing Notes were received as follows;

- Briefing Note dated February 2016 – Received by the Office of the National Director Health and Wellbeing 26th February 2016
- Briefing Note dated April 2016 – Received by the Office of the National Director Health and Wellbeing 22nd April 2016
- Briefing Note dated October 2016 – Issued to the DoH and copied to the Office of the National Director Health and Wellbeing 10th October 2016

- Details on who wrote the memo’s, the process involved and the line management structures and all associates correspondence

Response: Office of the National Director Strategic Planning and Transformation

The Briefing Notes were written by staff in CervicalCheck Programme/NSS. CervicalCheck Programme is governed by the NSS. The NSS during this timeframe was part of the Health and Wellbeing Division of the HSE.
• **Who signed off on the memos and all associated correspondence**

**Response: Office of the National Director Strategic Planning and Transformation**

The Briefing Notes were written by staff in CervicalCheck Programme/NSS. CervicalCheck Programme is governed by the NSS. The NSS during this timeframe was part of the Health and Wellbeing Division of the HSE.

If the ‘associated correspondence’ is the letters to treating clinicians concerning their patients these were also written by the CervicalCheck Programme.

• **Who sent the memo’s to the Dept**

**Response: Office of the National Director Strategic Planning and Transformation**

Four of the Briefing Notes were shared with the Department of Health as follows;

- Briefing Note received 9th March 2016, dated March 2016, which was signed off by Majella Byrne, AND, NSS, was shared with the Department of Health Offices/Officials on 29th March 2016 via email by Office of the National Director Health and Wellbeing.

- Briefing Note received 22nd April 2016 which was signed off by Simon Murtagh, A/AND, NSS, was shared with the Office of the CMO by Office of the National Director Health and Wellbeing on 26th April 2016. This Briefing Note was also shared directly with the DoH by NSS (Simon Murtagh, A/AND NSS on 22nd April 2016).

- Briefing note received 11th July 2016, dated July 2016, signed off by John Gleeson, Programme Manager, CervicalCheck Programme was shared with the Department of Health Offices/Officials on 12th July 2016 via email by the Office of the National Director Health and Wellbeing.

- Briefing Note dated October 2016, which was signed off by John Gleeson, Programme Manager, CervicalCheck and Dr. Grainne Flannelly, Clinical Lead, CervicalCheck, was shared by Charles O’Hanlon, AND, NSS, directly with Department of Health Offices/Officials on 10th October 2016 via email.

• **Who received the memo’s to the Dept**

**Response: Office of the National Director Strategic Planning and Transformation**

According to the records held by the Office of the National Director Health and Wellbeing Office of the Assistant Secretary, Acutes Hospital Division, Department of Health (Tracey Conroy) and Office of the Chief Medical Officer, DoH (Dr. Tony Holohan)

• **All communication between the HSE and Dept re the memo’s**

**Response: Office of the National Director Strategic Planning and Transformation**

1) Briefing Note received 9th March 2016, dated March 2016, which was signed off by Majella Byrne, AND, NSS, was shared with the following Department of Health Offices/Officials on 29th March 2016 via email from Office of the National Director Health and Wellbeing;

   - Tracey Conroy; Assistant Secretary, Acutes Hospital Division, Department of Health
   - Dr. Tony Holohan; Chief Medical Officer, Department of Health

   The Briefing notes were shared on foot of a scheduled HSE NSS/NCCP/DoH monthly meeting where this matter was discussed and ND H&W was advised that a briefing note was requested (3rd March 2016).

2) Briefing Note received 22nd April 2016, reflecting latest position from the NSS on the management of Laboratory dispute process etc, which was signed off by Simon Murtagh, A/AND, NSS, was shared with the Office of the CMO on 26th April 2016 as part of the papers for a scheduled meeting between the HSE’s Health and Wellbeing SMT and the SMT of the Office of the CMO, DoH (scheduled for 27th April 2016).

3) Briefing note received 11th July 2016, dated July 2016, signed off by John Gleeson, Programme Manager, CervicalCheck was shared with the following Department of Health Offices/Officials on 12th July 2016 via email by Office of the National Director Health and Wellbeing.
The Briefing notes were shared on foot of a scheduled HSE NSS/NCCP/DoH monthly meeting were this matter was discussed and an updated briefing note was requested (29th June 2016).

4) Briefing Note dated October 2016, which was signed off by John Gleeson, Programme Manager, CervicalCheck and Dr. Grainne Flannelly, Clinical Lead, CervicalCheck, was shared by Charles O’Hanlon, AND, NSS, directly with the following Department of Health Offices/Officials on 10th October 2016 via email further to a request for the same;

- Tracey Conroy; Assistant Secretary, Acutes Hospital Division, Department of Health
- Dr. Tony Holohan; Chief Medical Officer, Department of Health

The Briefing Note was copied to National Director Health and Wellbeing.

- who sent the memo’s to Tony O’Brien
  Response: Office of the National Director Strategic Planning and Transformation
  The Office of the National Director Health and Wellbeing shared Briefing notes with the Office of the Director General in March and July 2016.

- All correspondence to and from Tony O’Brien’s office to the memo’s
  Response: Office of the National Director Strategic Planning and Transformation
  To:
  Briefing Note dated March 2016 – Shared by Office of the National Director Health and Wellbeing with the Office of the Director General for meeting on 24th March 2016

  Briefing Note dated July 2016 and signed off by A/AND NSS – Shared by the Office of the National Director, Health and Wellbeing with Office of the Director General 20th June 2016

  Briefing Note dated July 2016 and signed off by Programme Manager, CervicalCheck - shared by the Office of the National Director, Health and Wellbeing with the Office of the Director General 12th July 2016

- A detailed list of all individuals and organisations who received the memos
  Response: Office of the National Director Strategic Planning and Transformation
  Based on records held by former National Office of Health and Wellbeing the Briefing Notes were shared with the following Offices in the HSE for information purposes-

- National Office Health and Wellbeing (all six Briefing Notes)
- National Office Quality Assurance and Verification (February and April Briefing Notes)
- Director General’s Office (Briefing Notes dated March 2016 and two Briefing Notes in July 2016 (received from NSS 30th June 2016 and 11th July 2016)
- Department of Health (Acute Hospitals Division/Cancer Policy Unit and Office of the CMO) (Four Briefing Notes March 2016; April 2016; July 2016 (Briefing Note received 11th July 2016) and October 2016.

- A detailed list of all HSE and Department meetings that the memo’s were discussed or listed for discussion
  Response: Office of the National Director Strategic Planning and Transformation
  CervicalCheck Audit process was discussed/listed for discussion at meetings as follows;

NSS/Health and Wellbeing meetings

- CervicalCheck Audit was on the agenda or referred to in management report for scheduled formal 1-2-1 meetings between ND Health and Wellbeing and AND NSS (three individuals during this timeframe, one in an
acting capacity April – August 2016) and other meetings specifically related to the CervicalCheck Audit process (approximately 23 meetings from February 2016 – December 2017).

**National Director Health and Wellbeing and Director General meetings**
- CervicalCheck Audit was on the agenda for scheduled formal 1-2-1 meetings between ND Health and Wellbeing and Director General in March 2016 and at two meetings in July 2016.

**National Director Health and Wellbeing and Office of the CMO, Department of Health**
- CervicalCheck Audit was on the agenda for scheduled formal 1-2-1 and team meetings between ND Health and Wellbeing and her SMT and the Office of the CMO and his SMT at four meetings in 2016 (2 x scheduled meetings 14th and 27th April 2016 (meeting due to take place 14th April 2016 deferred)); 30th June 2016; 22nd September 2016)

**HSE and Acutes Hospital Division Department of Health and Office of the CMO**
- CervicalCheck Audit was on the agenda for scheduled formal monthly meetings between the HSE (NCCP/NSS) and the Acutes Hospital Division/Cancer Policy Unit at five meetings in 2016 (3rd March 2016; 8th June 2016; 3rd August 2016 and 14th September 2016).

* A detailed list of all HSE and Department meetings that the issue of incorrect smear tests and the audit process was discussed

**Response: Office of the National Director Strategic Planning and Transformation**
As per previous response (confirmed via record searches completed to 15th May 2018)
Question 10 (Deputy David Cullinane)

CIRCULAR (SENT TO CONSULTANTS):

- who wrote the circular
- a copy of the circular and all drafts
- a detailed note on the process that led to the drafting and clearing of the circular
- a list of all individuals who received the circular
- a list of individuals in the HSE who received the circular
- a list of individuals in the Department who received the circular

HSE Response:

CIRCULAR (SENT TO CONSULTANTS):

• who wrote the circular

Response: Office of the National Director Strategic Planning and Transformation

The Communications Protocol/Guidance for Doctors was developed by the CervicalCheck Programme for treating clinicians to support their communications with their patients in relation to the findings of the audit as pertained to the individuals concerned.

• a copy of the circular and all drafts

Response: Office of the National Director Strategic Planning and Transformation

Copy of Communication Protocol dated July 2016 attached.

Drafts received by National Office Health and Wellbeing April and June 2016 attached.

• a detailed note on the process that led to the drafting and clearing of the circular

Response: Office of the National Director Strategic Planning and Transformation

The content of the communications protocol was developed by the CervicalCheck Programme on foot of a review of good practice in other jurisdictions in relation to the disclosure of audit results in Cancer Screening and other guidelines as appropriate. Legal advice was also sought by CervicalCheck on the communication process and content of letters as appropriate.

• a list of all individuals who received the circular

Response: Office of the National Director Strategic Planning and Transformation

➢ Copy of the Circular (Communications Protocol/Guidance Note) was shared directly by CervicalCheck Programme with treating clinicians with formal correspondence in relation to the findings of the CervicalCheck Clinical Audit process as pertained to their individual patients (the majority of the correspondence issued was issued at various dates throughout 2016)

➢ Corporately - Draft versions received by Office of the National Director Health and Wellbeing, HSE, for Information purposes (April and June 2016). Final version received October 2016

➢ Final version shared by NSS with AHD/Cancer Policy Unit and Office of the CMO Department of Health October 2016 (10th October 2016). This email was copied to National Director Health and Wellbeing, HSE.

• a list of individuals in the HSE who received the circular

Response: Office of the National Director Strategic Planning and Transformation

➢ Corporately - Draft versions received by Office of the National Director Health and Wellbeing for Information purposes (April and June 2016). Final version received October 2016.

• a list of individuals in the Department who received the circular

Response: Office of the National Director Strategic Planning and Transformation

➢ Final version shared by NSS with AHD/Cancer Policy Unit and Office of the CMO Department of Health October 2016 (10th October 2016). This email was copied to National Director Health and Wellbeing, HSE.
**Question 11 (Deputy David Cullinane)**

**OPEN DISCLOSURE:**

A detailed note on all guidelines in place in 2016 regarding open disclosure relevant to Cervical Check

**HSE Response:**

Cervical Check adopted the HSE Open Disclosure Policy and this is the policy that was applied in the Cervical Check service.