

Ms Aine McGuirk, Chair, Irish Association of Social Workers, 114-116 Pearse Street, Dublin 2. 5 November 2020

Re: Response to letter dated 8<sup>th</sup> October 2020 'The absence of social work clinical expertise on the EAG to NPHET'

Dear Ms McGuirk,

I would like to thank you for your letter sent on the 8 October 2020 outlining your concerns regarding the absence of social work clinical expertise on HIQA's COVID-19 Expert Advisory Group.

Since March 2020, the COVID-19 Evidence Synthesis Team within the HTA directorate has been providing support to NPHET through evidence synthesis methodologies incorporating the scientific literature, international public health recommendations, and existing data sources. From September 2020, as part of the move towards a sustainable response to the public health emergency, HIQA now provides evidence based advice in response to requests from NPHET. To ensure this evidence, and subsequent advice, is comprehensive, interpreted accurately, and considers additional clinical and organisational factors which may be relevant, HIQA formed a COVID-19 EAG. The advice provided to NPHET is informed by research evidence developed by HIQA's COVID-19 Evidence Synthesis Team, with expert input from HIQA's COVID-19 Expert Advisory Group.

Topics for consideration are outlined and prioritised by NPHET. Depending on the topic identified, different forms of clinical input are required to ensure the advice provided is as robust as possible. The standing members of the EAG reflect the position that the majority of topics to date have been related to disease pathology and processes; for example, recent topics have included duration of infectiousness, the distribution of the incubation period, immunity and reinfection, and the accuracy of diagnostic testing. We have also included a patient & public representative. As we are cognisant of people's clinical time, these standing members were identified from disciplines whose clinical input had been required to date and was likely to be

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needed on a recurring basis. However, additional expertise is sought on an ad hoc basis when a relevant topic is identified. For example, during a recent evidence synthesis, input was sought from a behavioural economist, mathematical modellers, and members of the Contact Management Programme in Ireland. As the pandemic progresses, it is anticipated that input will be required from a growing number of disciplines. Of course, we note the valuable clinical input that Health and Social Care Professionals, including Social Workers, will be able to provide for certain topics. Thank you for your proposal of Dr Sarah Donnelly whom I will contact to invite onto the EAG should an appropriate topic be prioritised by NPHET.

Thank you again for your letter and I hope my response has alleviated your concerns. Please do not hesitate to contact me should you wish to discuss further.

Yours sincerely,

Dr Máirín Ryan

Deputy CEO & Director of Health Technology Assessment

Health Information and Quality Authority

Cc: Sinead McGarry

Marty Whelan, Head of Communications & Stakeholder Engagement, HIQA