

**MINUTES OF THE BOARD MEETING OF  
THE HEALTH INFORMATION AND QUALITY AUTHORITY (The Authority)**

**30 September 2015  
Smithfield 10.30pm - 2.30pm**

**Present:**

<b>Name</b>	<b>Details</b>	<b>Initials</b>
Brian McEnery	Chairperson	<b>BMcE</b>
David Molony	Board Member	<b>DM</b>
Mary Fennessy	Board Member	<b>MF</b>
Una Geary	Board Member	<b>UG</b>
Judith Foley	Board Member	<b>JF</b>
Sheila O'Malley	Board Member	<b>SOM</b>
Stephen O'Flaherty	Board Member	<b>SOF</b>
Anne Carrigy	Board Member (by phone)	<b>AC</b>
Paula Kilbane	Board Member	<b>PK</b>
Molly Buckley	Board Member	<b>MB</b>
Barbara O'Neill	Board Member	<b>BON</b>

**In Attendance:**

Phelim Quinn	CEO	<b>PQ</b>
Kathleen Lombard	Board Secretary & Chief Risk Officer	<b>KL</b>
Sean Angland	Head of Corporate Services	<b>SA</b>
Mairin Ryan	Director of HTA	<b>MR</b>
Mary Dunnion	Acting Director of Regulation	<b>MD</b>
Rachel Flynn	Acting Director of Health Information	<b>RF</b>
Marty Whelan	Head of Communications	<b>MW</b>

**Apologies:**

Martin Sisk	Board Member	<b>MS</b>
Marie Kehoe O'Sullivan	Director of Safety and Quality Improvement	<b>MKOS</b>

**1. Quorum**

It was noted that a quorum was present and the Board meeting was duly convened. The Chairperson extended a formal welcome to Molly Buckley and Paula Kilbane, who had been appointed on the 29<sup>th</sup> July to the Board of the Authority, to their first Board meeting. The Chairperson also, on behalf of the Board, extended condolences to MKOS on the passing of her father earlier today.

## **2. Conflict of Interest**

No conflicts of interest were declared.

## **3. Minutes of the Board meeting of 30 July 2015**

The minutes of the 30<sup>th</sup> July 2015 were reviewed by the Board. It was noted the wording on item 14 of the minutes should be strengthened to reflect need for clear direction. It was also agreed that the action relating to HR reports can be removed from the list of recurring actions given that there is a standing HR report on Board agendas. Subject to these amendments, it was agreed that the minutes were an accurate reflection of the meeting. UG proposed approval of the minutes and SOM seconded the proposal; **accordingly it was resolved that the minutes of 30 July 2015 be approved by the Board.**

**3.1** The email approval by the Board of the new committee membership in August 2015 was formally noted.

## **4. Review of Actions**

The following updates on the actions were noted:

- The Board evaluation document is on the agenda for discussion
- Additional risks have been considered by the Executive and will be discussed under the Risk item
- A meeting took place with DoH on the review of maternity services. A formal response is expected supporting the approach proposed by the Authority to reconsider the timing of the Authority's review of maternity services in light of the other initiatives currently underway in this area. In this context, it was suggested that the Chairperson and the CEO should meet with the Minister's advisors on the issue of maternity services. It was clarified that action has taken place relating to maternity services and there are now Directors of Midwifery in maternity hospitals with an overall Group Director of Midwifery at Group Hospital level.

## **5. Matters arising**

There were no matters arising.

## **6. Corporate Plan**

PQ presented a draft corporate plan to the Board for consideration. He outlined the process to date including engagement with the Board, staff and external stakeholders. PQ also briefed the Board on feedback received from meetings with the DoH and DOCYA on 29<sup>th</sup> September. The main themes from the feedback, together with consideration of the challenges and changes in the wider environment have informed the main elements of the plan. The draft plan was discussed in detail and there was broad agreement on the main elements of the plan. However, it was agreed that while the annual business plans will expand the detail around the high level objectives that the following should be included:

- Additional detail on measures of success
- A short descriptor of what is expected to be achieved over the life of the plan
- A short reflection of what had been achieved over the life of the current plan
- What are the challenges and risks e.g. resources.

It was agreed that a special meeting of Board would be arranged towards the end of October to consider a revised plan.

## **7. Protected Disclosure Policy and procedure**

SA presented a revised Protected Disclosure policy and procedure for approval by the Board. He explained that the thrust of the policy is to facilitate persons working in, with, or on behalf of the Authority to report potential wrongdoings without suffering any ill-effects.

In response to a query by the Board relating to the recipient for cases where concerns are raised with an external party, it was clarified that provisions of the Protected Disclosure Act 2014 include a schedule setting out "prescribed persons" for this purpose. It was agreed that this should be appended to the document. Subject to this amendment, SOF proposed approval of the Protected Disclosure Policy and Procedure and DM seconded it; **accordingly it was resolved that the Protected Disclosure Policy and Procedure be approved by the Board.**

## **8. Public Service Pension Scheme**

SA introduced a paper explaining the background to the Authority's existing pension arrangements. Because of the many changes in recent years to public pensions the Authority's pension arrangements had not been approved and had operated on an administrative basis. The Department of Public Expenditure and Reform has now updated and revised the administrative arrangements for the establishment and approval of pension schemes in non-commercial state agencies. As part of this arrangement, an updated set of Superannuation Rules was incorporated in Rules for Pre-existing Public Sector Scheme Regulations 2014. This provides a mechanism for the formal establishment of the pension scheme for the Authority. SA recommended to the Board that the rules set out in the Schedule to the Rules for Pre-existing Public Service Pension Scheme Members Regulations 2014 (S.I. No. 582 of 2014) are adopted as the superannuation scheme for the Authority.

SOM proposed approval for the adoption of the Schedule to the Rules for Pre-existing Public Service Pension Scheme Members Regulations 2014 (S.I. No. 582 of 2014) as a scheme for the granting of superannuation benefits to the staff of the Authority. MB seconded the proposal; **accordingly it was resolved, and approved by the Board, that the Schedule to the Rules for Pre-existing Public Service Pension Scheme Members Regulations 2014 (S.I. No. 582 of 2014) is adopted as the superannuation scheme for the Authority.**

## **9. National Standard Demographic Dataset and Guidance**

RF introduced the revised National Standard Demographic Dataset and Guidance explaining that the earlier version of this standard was first published in 2013 when a deficit was identified by a number of stakeholders. As a result of feedback received since the standards were first published, the Health Identifiers Act 2014 and the introduction of a national postcode system, the standards have now been revised. The process for the development and revision of the Standards was provided to the Board together with a statement of assurance that the HI Directorate has developed the standards in line with international best practice.



BON proposed approval of the National Standard Demographic Dataset and Guidance and UG seconded the proposal; **accordingly it was resolved that the National Standard Demographic Dataset and Guidance be approved by the Board.**

#### **10. CEO report**

PQ reported developments from a strategic and operational perspective since the last formal Board meeting including:

- The appointment of the Director of HTA, MR, to the Steering Group with responsibility for developing a National Trauma Network policy
- Centres that are currently under close review by the Regulatory Risk Committee.
- The conducting of a staff survey
- Audit activity and
- Induction activity.

It was also noted that Rachel Flynn had been appointed as the Director of Health information. The Board extended congratulations to Rachel.

#### **11. Corporate Performance – to end of August 2015**

SA advised the Board that the corporate performance report shows that at the end of August 2015, eighteen objectives are outside of the target timeframe. An exception report outlined the reasons for the deviance of these objectives. It was noted that a recent vacancy has impacted on the ability to deliver the review of the implementation of the National Guidance for Deaths and Serious Incidents of Children in Care. The Board noted the report.

#### **12. Corporate Risk report**

KL provided an overview to the corporate risk register explaining that the main changes have been highlighted in red in the introduction document. A table providing a high level summary of the Directorate risks was included in the report.

It was noted that as a result of a recent audit on the investigation process, where the assurance rating “satisfactory” was assigned, the risk relating to potential legal challenge of regulatory processes will be reduced. SA provided a full report in relation to an ICT risk and the actions that have been/ and are being taken to ensure the risk is well managed. It was also acknowledged that ICT had been audited recently and that there had been a satisfactory finding in respect of the areas audited.

#### **13. Board evaluation**

KL advised that this evaluation had been carried out earlier this year and had been presented at the May Board meeting when there were a reduced number of Board members and when it was agreed to revisit the evaluation when there was a full Board. The evaluation was carried out in two parts; one seeking views from Board members and the second seeking the views of the Executive Management. A summary of proposed actions were set out. It was noted that many of these actions had already been implemented such as identifying and submitting to the Minister, requisite competencies for new appointees to the Board and ensuring that an early and comprehensive induction was provided to the new members of the Board.

It was agreed that an update on the actions will be provided to the Board in six months time. It was also agreed that it would be appropriate that an external evaluation of the Board be conducted during 2016.

#### **14. HR report**

SA provided an overview of HR activity to the Board including the current headcount, recruitment activity and an update of HR projects. An update was provided on the *Excellence Through People* initiative and an employee survey which are currently underway. Preliminary results in respect of these will be provided at the next Board meeting.

#### **15. Finance Report**

SA provided an update to the Board on spend to end August 2015. Reasons underpinning variances from planned budget were provided. A revised income and expenditure forecast has just been completed and a summary of the revised figures were included with the paper. A number of positions have not yet been filled and together with a number of leavers and this has contributed to an under spend in salaries. The Board noted the report.

#### **16. Update on registration of designated centres**

MD provided an update to the Board on progress of the registration programme of designated centres. It was advised that inefficiencies identified in some of the administrative processes had been addressed and this had resulted in significant improvement in the pace of registration. A table outlining the target versus actual number of centres was provided to the Board. The Board acknowledged the progress made and asked that their appreciation be conveyed to the team carrying out this work.

#### **17. Committee Report**

A report on the meetings of the Board Committees was included with the Board papers. A brief summary of items covered by these committees was provided by the Chairs of the Committees:

- ACGC (10 September 2015)
  - The corporate risk register and the risks within corporate services and the CEO's office were reviewed.
  - Progress on the internal audit plan was reviewed.
  - Two audits were presented and considered in detail by the Committee; one relating to ICT and business continuity and one on investigations. Both audits received a satisfactory assurance rating. A number of actions arose from the Committee's discussion.
  - The evaluation of the ACGC committee was considered.
- Health and Social Care Governance Committee (17 September 2015)
  - A presentation on the health and social care functions of the Authority was given to the Committee. The recently appointed Board members attended as part of their introduction to the business of the Authority.
  - The delivery of the objectives for the Regulation and Safety and Quality Improvement Directorates were reviewed.

- The risks relating to the work of these directorates were considered.
- The results of the evaluation of the HSCGC were also discussed.
- RNC (29 September 2015)  
The RNC report had been provided during the Board only session and included:-
  - The midyear review of the CEO's performance. The findings of the review had been related to the Board.
  - The processes and methodologies relating to the appointment of staff had been considered, including panel composition for senior appointments.
  - The appointment of the Director of Health Information had been endorsed.
  - The remit of the committee had been examined, resulting in the decision to broaden the TOR to reflect oversight needs of the Authority.
  - The evaluation of the RNC was considered.

### **18. Chairperson's Report**

The Chairperson's report was noted.

### **19. Correspondence**

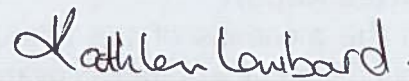
No correspondence for discussion.

### **20. Any other Business**

The CEO had briefed the Board on a specific HR related issue.

**Signed:**

  
Brian McEnery  
Chairperson

  
Kathleen Lombard  
Board Secretary



## Actions arising from the Board meeting on 30<sup>th</sup> September 2015

No	Action	Person Responsible	Timeframe
1	Chairperson and the CEO to meet with the Minister's advisors to discuss maternity services.	PQ	At earliest opportunity
2	Board meeting to be arranged to consider a revised corporate plan	KL	Before end October
3	Schedule setting out "prescribed persons" to be appended to the Protected Disclosure Policy and Procedure	SA	Before publication
4	An update on the actions from the Board to be provided to the Board in six months time	KL	Scheduled for March Board meeting
5	An external evaluation of the Board to be arranged during 2016	KL	March 2016
6	Preliminary results from <i>Excellence Through People</i> initiative and employee survey to be provided	SA	November Board meeting

### Carried forward actions

No	Action	Person Responsible	Timeframe

### Recurrent actions

1	A progress chart for disability registration to be included on all Board agendas	PQ	All Board meetings
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