

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

# Head Office, Mahon 21 March 2012

#### Present:

Name	Details	Initials
Dolores Quinn	Vice Chairperson	DQ
Pat McGrath	Chairperson	PMcG
Philip Caffrey	Board Member	PC
Geraldine McCarthy	Board Member	GMcC
Sam McConkey	Board Member	SMcC
Sheila O'Connor	Board Member	SOC
Cillian Twomey	Board Member	СТ
Grainne Tuke	Board Member	GT
Bryan Barry	Board Member	BB

# In Attendance:

Tracey Cooper	Chief Executive Officer	TC
Kathleen Lombard	Board Secretary	KL
Niall Byrne	Deputy Director of Operations, SSI	NB
Sean Angland	Head of Corporate Services	SA
Deirdre Mulholland	Head of Standards and Methodology, HCQS	DM

**Apologies:** 

Angela Kerins	Board Member	AK
Marty Whelan	Head of Communications	MW
Richard O'Sullivan	Legal Adviser	ROS
Jane Grimson	Director of Health Information	JG

Note: Dolores Quinn, vice chairperson, chaired the meeting as the Chairperson participated via phone link.

Part 1: Board only session

Part 2: Board and Executives

#### 1. Quorum

It was noted that a quorum was present and the Board meeting was duly convened.

#### 2. Conflict of interest

SOC indicated her involvement as a patient advocate on the team investigating the care provided for people requiring acute admissions in AMNCH and advised she would leave the room during any discussions in this regard to avoid the perception of conflict of interest.

**3. Minutes of the meeting of 18<sup>th</sup> January and 20<sup>th</sup> February 2012** The minutes of the 18<sup>th</sup> January and 20<sup>th</sup> February were approved. The email approval of the 2011 Draft accounts was formally noted.

#### 4. Review of Actions

KL advised that a number of additional papers had been provided at the meeting to address the following actions:

A short report on the PRISM project	SA
Definition of child protection and child welfare	NB
Definition/what constitutes a "cert of compliance for fire safety" and "a suitably qualified person"	NB

All other actions had been completed with the exception of the action to review the information provided to the Board which arose from the Board performance evaluation. This is scheduled for the final meeting of the Board in May.

Additional papers were provided in relation to the above actions.

# PRISM

SA talked through his paper on the development of PRISM, the single Authority wide information management hub intended to facilitate the management of information across all the functions. He explained that it is a multiphase programme of work, the next Phase being the completion of process alignment work. A programme team has been established to complete this work.

- Child Protection and Welfare
  NB's paper briefed the Board in relation to the concepts of Child Protection and
  Child Welfare. He explained that the HSE has a function to promote the welfare
  of children who are not receiving adequate care and protection and who may be
  at risk from abuse or neglect.
- Fire safety compliance

NB provided a paper clarifying the requirements for a registration application in relation to the confirmation that all statutory requirements relating to fire safety and building control have been complied with.

NB clarified that the confirmation of compliance is provided (as outlined in the Health Act 2007) by a "properly and suitably qualified person" although there is no definitive criteria, qualifications or expertise prescribing what is meant by "properly and suitably qualified". It was agreed that this is a weakness and there is a need for a single definition and register of such people to be drawn up. TC will consider this matter further with a view to resolving.

A discussion followed on the fact that some HSE residential centres may have difficulty in providing this confirmation. TC advised that she had written to the CEO of the HSE drawing attention to this matter and had also brought it to the attention of the Minister.

At this point in the meeting, the vice Chairperson related issues discussed at the Board only session;

- The imminent departure of the Secretary General of the DOH, Michael Scanlan, and the potential impact of changes in key personnel at this critical time in the expansion of the Authority.
- The DOH letter regarding the Authority's allocation for 2012 and reference to the expansion of regulatory functions. TC will present on this matter during the meeting.

# 5. Matters arising from the minutes

No matters arising were raised.

#### 6. Report of the Chief Executive

The report of the Chief Executive was considered. TC expanded on and clarified a number of points including:

- The two vacant Director positions were about to be advertised. A schedule for short listing and the interview process is being finalised.
- A brief update on the investigation report into care provided for people requiring acute admissions in AMNCH was provided, during which SOC left the room, due to her involvement as a patient advocate on the investigation team. TC advised that excerpts of the report had been issued to relevant parties and recommendations are currently being worked on. The Minister has been briefed on the high level findings. It is likely to be early May before the final report will come to the Board for approval. SOC rejoined the meeting.
- The budget allocation notification for 2012 from the DOH indicated the provision for preparing for anticipated regulatory growth. TC and SA are in discussions with the DOH on this matter as certain functions are subject to additional staff resources and approvals being secured from the Department of Public Expenditure.

- The organisational review of the Authority is still being processed. A new Regulatory Management Group is currently being established to oversee the amalgamated functions of HQS and SSI.

# 7. Presentation on Regulatory Functions

TC presented on the anticipated expansion of functions, outlining the intended schedule of new functions over the next 2 years. A number of issues were discussed including:

- The required number and types of staff.
- The risks involved due to the scale of expansion including the reputational risk inherent to the growth and complexity in functions and the impact of the expansion on existing functions.
- The uncertainty of data for the disability sector and lack of clarity around the form and numbers of centres.
- The establishment of the Patient Safety Authority.

It was clarified that development work has begun on all of these functions and a business case will soon be submitted to the DOH for the resources required to commence these new functions. The Board thanked the CEO for her presentation and asked that regular updates are provided on the expansion programme.

### 8. Update from SSI

NB briefed the Board in relation to progress on the registration of Designated Centres for Older People and advised that the target of having all centres registered by the 30<sup>th</sup> June 2012 is achievable. He clarified that while it is the providers' responsibility to have completed registrations submitted in good time to ensure they are processed, every effort is being made to avoid the situation where providers do not get registered by the due date. Currently consideration is being given to scenario planning for issues arising from the final tranche of registrations.

#### 9. Update on the AMNCH investigation

This item was covered under the CEO's report.

#### 10. Annual report 2011

The Board considered the Annual report and acknowledged the vast amount of quality work that had been achieved by the Authority during 2011. **It was** resolved by the Board that the Annual Report be approved and submitted to the Minister.

#### 11. Budget 2012

SA presented an outline Budget to the Board for 2012. It was clarified that the DOH's letter of determination includes provision for regulatory development. SA explained the budget lines to the Board and that the budget will be readjusted as necessary throughout the year. **It was resolved by the Board** that the 2012 budget for the Authority be approved.

#### 12. Internal Financial Controls

SA outlined that, in compliance with the Code of Practice for the Governance of State Bodies, there has been a review of the effectiveness of the internal financial controls. This has been implemented by an internal audit and the report is included in the Board papers for the Board's consideration. The report was considered by the ACGC earlier in the month and was assured that there were no issues of significant concern. The Comptroller and Auditor General met with the ACGC in relation to their audit and also provided assurance through their report. The Board noted the report and thanked SA and Eleanor Noonan, Finance Manager, for the strong financial controls that are in place.

# 13. Annual Compliance Report

KL presented a report to the Board and explained that it included a summary of assurances from the Executive Management around the controls for carrying out the functions of the Authority. The substance of the report has already been considered by respective Board committees. A draft summary report was presented for inclusion in the Annual report. **It was resolved by the Board** that the draft summary report be approved and included in the annual report.

# 14. Report from Board Committees

- a. <u>Health and Social Care Governance Committee</u> GMcC reported the following:
  - An annual compliance statement on the functions of the SSI and HCQS Directorates was reviewed.
  - An update on the information received by the HCQS Directorate was received.
  - The key risks to the Directorate activities were reviewed and
  - the main priorities for the Directorates in the coming year were discussed.
- b. <u>Information, Research and Technology Committee</u>

DQ reported the following:

- An annual compliance statement on the functions for Health Information and Health Technology Assessment was reviewed.
- The key risks to the Directorate activities were reviewed and
- the main priorities for the Directorates in the coming year were discussed.
- c. <u>Audit and Corporate Governance Committee</u>

BB reported the following

- An annual compliance statement on the functions of Corporate Services, Communications and the CEO's office was reviewed.
- An update on the internal audit programme was received including the internal financial controls review and preliminary work on the registration process and information governance reviews.

- A meeting had taken place with the Comptroller and Auditor General who had been satisfied with the controls in place.
- The risk register had been reviewed and improvements were acknowledged in the quality of that report.

#### d. Remunerations and Nominations Committee

The main points arising from this meeting was in relation to the process for the recruitment of the Director positions including the selection of an Executive Search service and the timelines involved.

## 15. Risk report and action status

KL provided a brief overview of the risk report to the Board, highlighting key changes since the last report was presented.

# 16. Chairperson's report

The Chairperson's report was noted. The Chairperson also added that he had completed the annual review of the CEO. This will now go the Remunerations and Nominations Committee.

## 17. Human Resources report

SA presented a HR report to the Board and included figures in relation to the current headcount, the level of sick leave, rates of access to an Employee Assistance Programme, and other issues. It was clarified that there no HR information management system and that all information is collated manually. SA suggested that an updated report would be presented to the Board at the end of each quarter.

#### 18. Correspondence

The letter of determination from the DOH was noted.

#### 19. AOB

It was agreed that the dates for the next Board meetings would be re circulated. The AMNCH investigation report should come before the Board before the Board transition on 15<sup>th</sup> May.

Signed:

Pat McGrath

Chairperson

Kathleen Lombard

**BoardSecretary** 

# Actions arising from the meeting on 21 March 2012:

No	Action	Person Responsible	Timeframe	
1.	Regular updates on the expansion programme to be provided	CEO	CEO's reports	
2.	Clarification of additional Board dates	KL	By end of week	
3,	Board information review	PMcG/KL	April	

# **Recurrent actions**

HR report to be provided – include total	SA	End of each quarter
number of staff and number employed		
through a recruitment agency		
Update on progress of registrations	NB	Each board meeting

