

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

## VC Mahon and Smithfield 24<sup>th</sup> September 2012

#### Present:

Name	Details	Initials
Pat McGrath	Chairperson	PMcG
Philip Caffrey	Board Member	PC
Sam McConkey	Board Member	SMcC
Cillian Twomey	Board Member	CT
Grainne Tuke	Board Member	<b>GT</b>

#### In Attendance:

Tracey Cooper	Chief Executive Officer	TC
Kathleen Lombard	Board Secretary	KL
Hilary Coates	Head of Safety and Learning	HC ·
Richard O'Sullivan	Legal Adviser	ROS
Marie Kehoe O'Sullivan	Director of Safety and Quality Improvement	MKOS
Sean Angland	Head of Corporate Services	SA
Jane Grimson	Director of Health Information	JG
Marty Whelan	Head of Communications	MW
Mairin Ryan	Director of Health Technology Assessment	MR

Apologies:

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Γ	Niall Byrne	Deputy Director of Operations, SSI	NB HERE

#### 1. Quorum

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

#### 2. Conflict of interest

No conflicts of interests were stated.

## 3. Minutes of the meeting of 11<sup>th</sup> July

The minutes of  $11^{th}$  July were reviewed by the Board. SMcC proposed the approval of the minutes and GT seconded the motion. Accordingly the minutes were approved.

The Board's email decision of the 31<sup>st</sup> August for the authorisation of expenditure for the finance system for the Authority was formally noted by the Board.

#### 4. Review of Actions

KL advised that the majority of outstanding actions relate to when new members of the Board are appointed. PMcG advised that he and the CEO had commenced actions in relation to the CEO's performance review.

## 5. Matters arising from the minutes

No matters arising were raised.

The Chairperson took the opportunity to provide feedback to the Executive from the Board only session. This included;

- Concern at the delay in the appointment of Board members as the Board is currently at guorum level.
- Potential collaboration between HIQA and Gorta on standards for differentlyabled children for a project in India.
- The recent review of the registration of Nursing Homes identified issues relating to the work of HIQA. The Executive is to consider the report and brief the Board on the main findings.
- The Standards for Safer Better Healthcare and the degree to which the Authority's role extends to HR and financial management. The Executive is to consider these issues and the Authority's role around providing guidance and support.

## 6. Report of the Chief Executive Officer

The CEO updated the Board on a number of issues including;

- · The planning for regulatory growth
- The Ministers intention to establish a Patient Safety Agency whose role may be to act as a support to the wider health system
- The nomination of MKOS to the Medical Council
- The nomination of Deirdre Mulholland to An Bord Altranais
- In relation to the report relating to the registration of nursing homes, the CEO outlined the approach for the first 3 year cycle of registration. To date the focus has been on safety and establishing a baseline of quality in the sector. The approach for the next cycle of registration will be on quality improvement. The newly configured Safety and Quality Improvement Directorate will work on developing guidance to assist with this approach.
- The forthcoming legislation in the area of Research Ethics was noted and a briefing on this subject was requested by the Board at its next meeting.

• The Board also requested a briefing on the work of the HTA Directorate as part of the Cochrane Fellowship and the EUnetHTA Joint Action partnership.

## 7. Regulatory growth; timeline and resources

The CEO presented a Gantt chart illustrating anticipated timescales for the various functions and outlined the preparations in advance of commencing new regulatory functions, including substantial internal organisational development. It was noted that this represented a significant expansion within a short space of time. The Board requested that an update be provided at each Board meeting.

# 8. Draft National Standards for residential Centres for people with disabilities (adults and Children)

Sinead McEvoy, Senior Policy Manager joined the meeting for this item. SMcE presented on the background to the Standards and the work that the Authority had done to revise previous standards to make them appropriate for the commencement of registration and inspection of residential centres for people with disabilities. She clarified that as a result of feedback that the Standards have been separated into two to address this feedback and therefore there is now a set of standards for adults with disabilities and a set of standards for children with disabilities with a common introduction and a common glossary. The next steps will involve a public consultation process after which the final Standards will be presented to the Board for approval. The Standards will then be submitted to the Minister for approval and publication in early 2013.

The Board noted the volume of centres engaged in providing services for people with disabilities and requested that more detail is provided on the numbers of centres, the configuration and resources at the next Board meeting.

### 9. Risk report and action status

KL presented the risk management report and register to the Board, highlighting that there were no major changes to the risks and their ratings. The Board noted the report and that the ACGC had reviewed the register in detail at its meeting earlier in September.

#### 10. Finance Report

SA presented a finance report covering the period to the 31<sup>st</sup> July. Currently the Authority's spend is under budget arising primarily from payroll savings. SA clarified a number of aspects of expenditure for the Board.

#### 11. HR report

SA presented a report outlining the current headcount, leave and other HR matters for the Board's information. Further detail was requested by the Board in relation to level of extended absences.

#### 12. Corporate planning

KL advised the Board that a corporate plan for the Authority is due to be developed. Key steps and timelines were indicated including the need for Board engagement at key points during the process. Dates will be requested from Board members for this engagement.

## 13. Approval of appointment of the Director of Regulation to be the Chief Inspector

It was reported to the Board that following a recruitment process carried out in accordance with Section 26 of the Health Act 2007, a new Director of Regulation (who it was intended would also be appointed and act as the new Chief Inspector of Social Services), Mr Phelim Quinn, had been recruited by the Authority. It was noted that Mr Quinn would commence his employment with the Authority as Director of Regulation on 1 November 2012 and take up his position at that time. It was further noted that in accordance with sub-section (2) of Section 40 it was intended that Mr Quinn was to be appointed as the Chief Inspector of Social Services and that pursuant to sub-sections (4) and (5) of Section 40, the terms and conditions, including remuneration and any allowances for expenses, of Mr Quinn's appointment requires the approval of the Minister for Health, which approval also requires the consent of the Minister for Finance (now the Minister for Public Expenditure and Reform).

After due consideration the Authority resolved to appoint Mr Phelim Quinn as Chief Inspector of Social Services pursuant to sub-section (2) of Section 40 of the Health Act 2007, subject to the provisions of subsection (6) of Section 40 and subject to receiving a letter from the Minister for Health confirming the approval of the Minister for Health, to be given with the consent of the Minister for Finance (now the Minister for Public Expenditure and Reform), to the terms and conditions, including remuneration and any allowances for expenses, of Mr Quinn's appointment as detailed in, inter alia, Mr Quinn's contract of employment issued on 29 May 2012.

It was further noted by the Board that upon Mr Quinn's commencement with the Authority and subject to receipt of the written ministerial approval referred to above, a certificate of his appointment would be issued to Mr Quinn, pursuant to subsection (7) of Section 40 of the Act and subject as aforesaid it was resolved to issue the said certificate at such time.

For the avoidance of doubt, it was noted that upon the receipt of the ministerial approval referred to above and upon the subsequent appointment of Mr Phelim Quinn as Chief Inspector, the appointment of the CEO, Dr Tracey Cooper as acting Chief Inspector would cease.

#### 14. HTA on Deep Brain Stimulation

Patrick Moran, Information Scientist joined the meeting for this item. With MR, he presented on the background, process and findings of the HTA, explaining that the HTA was conducted at the request of the HSE to evaluate the provision of a national DBS service for PD, ET and dystonia compared with continuing to provide this service via the Treatment Abroad Scheme. The HTA was conducted according to the Authority's HTA process for conducting HTA's and concluded that a national DBS programme will cost more, but would improve the patient experience by eliminating the logistical and financial burden of having to travel and improve continuity of care and integration of services.

It was clarified that the Authority's function is to evaluate the clinical and cost effectiveness of health technologies and provide advice to the Minister and the HSE. The Board discussed the report and asked that additional consideration be given in the context of 4.3, Economic evaluation, of the draft report. MR will reflect on the discussion and the draft report will come before the Board for approval on October 11<sup>th</sup> when the Board will meet to consider the final draft of the Disability Standards.

#### 15. Chairperson's report

The Chairperson's Report was noted. It was also noted that a letter was issued to the Minister in relation to the appointment of new Board members.

The Chairperson referred the Board to a short position paper in relation to possible collaboration with Gorta on Child protection and Disability Standards for a project in India. PMcG absented himself from the meeting and GT took the Chair. The Board members queried the Executive on the level of resources required for this collaboration. It was agreed to approve the collaborative project in principle as the resources required are anticipated to be quite small. The Executive agreed to meet with Gorta to explore further the resource implications and then report back at the next meeting of the Board.

PMcG returned to the meeting and was advised of this decision. It was also agreed that SMcC would act as liaison person on the Board in any further developments on the matter in order to avoid any perceived conflict of interest by PMcG.

#### 16. Report from the Committees

PC, interim Chair of the Audit and Corporate Governance Committee (ACGC) reported on the last meeting of the Committee. A verbal clarification was provided by SA in relation to an inaccurate media story on HIQA funding, where the issue related to record keeping with the DOH. The Committee had also requested the Executive to consider the registrations and information governance audits and represent specific action plans at the next meeting of the Committee.

## 17. Correspondence

A letter relating to findings from the 2011 annual audit had been received from the C&AG. This will be considered at the next meeting of the ACGC and will then come back to the Board.

#### 18. AOB

There being no other business, the meeting concluded.

Signed:

Pat McGrath

Chairperson

Kathleen Lombard

**Board Secretary** 

## Actions arising from the meeting on 24th September 2012:

No	Action	Person Responsible	Timeframe
1.	Findings from recent report on the registration of nursing homes to be considered and reported to Board	NB	November
2.	The Authority's scope around HR and financial management in the context of the National Standards for Safer Better Healthcare to be considered and reported back to Board	HC	November
3.	Briefing on the Research Ethics function	JG	November
4.	Briefing on HTA's work vis-a-vis the Cochrane fellowship and the EUnetHTA Joint Action	MR	November
5.	Briefing on the numbers and configuration, registration process and resources	NB	November
6.	Briefing and definitions on leave absences	SA	As below
7.	Additional consideration to be given to Section 4.3 of the draft HTA report and brought back to Board	MR	October
8.	Meeting with Gorta to explore resource implications around collaboration and report back to board	TC	November

## **Carried forward actions:**

1.	Report to the Board when a review of the registration cycle is completed	NB	Sept
2.	Extract main themes from Board performance review 2011/2012 and include actions	KL/PMcG	New Board
3.	Dates for Board training to be set	KL	New Board
4.	Board information review (deferred)	PMcG/KL	new Board
5.	Actions relating to CEO's performance - Modify appraisal template - Review Process	TC/PMcG	End May
6.	A full report on all absences in the Authority to be provided at a Board meeting where there is a full complement of Board members.	SA	When full Board membership is in place
7.	A paper outlining factors for consideration around holding public Board meetings to be drafted for discussion	KL/TC	September/ November

## Recurrent actions:

	1 1	HR report to be provided - include total number of staff and type of employment	SA	End of each quarter
		Regular updates on the expansion programme to be provided	CEO	CEO's reports