

**MINUTES OF THE BOARD MEETING OF
HEALTH INFORMATION AND QUALITY AUTHORITY
25 January 2017, Smithfield 9.30 am – 2.30 pm**

Present:

Name	Details	Initials
Brian McEnery	Chairperson	BMcE
Mary Fennessy	Board Member	MF
Molly Buckley	Board Member	MB
Martin Sisk	Board Member	MS
Stephen O’Flaherty	Board Member	SOF
Anne Carrigy	Board Member	AC
Barbara O’Neill	Board Member	BON
Judith Foley	Board Member	JF

In Attendance:

Phelim Quinn	CEO	PQ
Kathleen Lombard	Board Secretary & Chief Risk Officer	KL
Mary Dunnion	Director of Regulation	MD
Mairin Ryan	Director of HTA and Deputy CEO	MR
Marie Kehoe O’Sullivan	Director of Safety and Quality Improvement	MKOS
Marty Whelan	Head of Communications	MW
Kevin O’Carroll	In lieu of RF, Director of Health Information	KOC
Sean Angland	Acting Chief Operating Officer	SA

Apologies:

Paula Kilbane	Board Member	PK
David Molony	Board Member	DM
Una Geary	Board Member	UG
Sheila O’Malley	Board Member	SOM
Rachel Flynn	Director of Health Information	RF

1. Quorum

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

The Chairperson reported that during the Board only session the following items were agreed by the Board:

- The performance assessment of the CEO for 2016
- The performance objectives for the CEO for 2017.

2. Conflict of Interest

No conflicts of interest were declared.

3. Minutes of the Board meeting of 30 November 2016

The minutes of the meeting of 30 November were reviewed by the Board. It was agreed that the minutes were an accurate reflection of the meeting. BON proposed approval of the minutes and MS seconded the proposal; **accordingly it was resolved that the minutes of 30 November 2016 be approved by the Board.**

3.1 Minutes of the Board meeting of 15 December 2016

The minutes of the Board only meeting of 15 December 2016 were reviewed by the Board during the Board only session and it was agreed that they were an accurate reflection of the meeting. MF proposed approval of the minutes and SOF seconded the proposal; **accordingly it was resolved that the minutes of 15 December 2016 be approved by the Board.**

3.2 Formal note of email approval by the Board for award of a tender for the National Patient Experience Survey

The email approval by the Board for award of tender for a managed service in respect of the National Patient Experience Survey was formally noted.

4. Review of Actions

The following updates were provided in relation to actions arising from previous Board meetings:

- The oversight agreement between HIQA and the Department of Health (DOH) will be progressed when a template for such agreements is issued from the Department of Public Expenditure and Reform
- An update on designated centres deemed to be high risk will be provided under the CEO report agenda item
- Other agenda items were noted as either complete, on the agenda or not yet due for delivery.

5. Matters arising

There were no matters arising.

6. National Standards for the Conduct of Reviews of Patient Safety Incidents

Sarah Murphy (SM) Project Lead and Vicki O'Dwyer (VOD) Research Officer joined the meeting for this item.

MKOS introduced this item explaining that the standards are the first to have been developed jointly with another organisation. They were developed at the request of the DoH following the Chief Medical Officer's Report on perinatal deaths in the Midland Regional Hospital in Portlaoise.

SM and VOD presented an overview of the standards including their scope and structure, the process for development of the standards and the engagement with stakeholders.

The following was clarified for the Board:

- As the Standards have been developed jointly with the Mental Health Commission (MHC) they will also go for approval to the MHC Board before they are submitted to the Minister.
- New regulations on open disclosure are anticipated which will be important in the context of the implementation of the Standards.

The Board indicated their satisfaction with the quality of the Standards and the assurances on the process as described in the Quality Assurance Framework for developing standards. MS proposed approval of the National Standards for the Conduct of Reviews of Patient Safety Incidents and MB seconded the proposal; **accordingly it was resolved that the National Standards for the Conduct of Reviews of Patient Safety Incidents be approved by the Board.**

7. Revised National Standards for the Prevention and Control of Healthcare associated Infections (NSPCHCAI)

Dr Fiona McKenna (FMCK) project lead and Rachel Dardis (RD) Research Officer joined the meeting for this item.

FMCK advised the Board that since the draft Standards were presented to the Board in September 2016, a public consultation process on the standards was undertaken. The Board was briefed on the public consultation process and the themes that emerged. It was clarified that the standards relate to the acute services provided by the HSE. They are a revision of the previous NSPCHCAI published in 2009 and reflect the most up to date practice.

The following was clarified for the Board:

- Primary and community health and social care services are outside the scope of the standards. Additional standards will be developed which will focus on primary and community care.
- While HIQA's remit does not cover private healthcare, it is hoped that the standards will be adopted by the private healthcare sector in preparation for the extension of HIQA's remit into the private sector.

The Board welcomed the Standards as providing a fresh focus on healthcare associated infections. AC proposed approval of the NSPCHCAI and JF seconded the proposal; **accordingly it was resolved that the National Standards for the Prevention and Control of Healthcare Associated Infections be approved by the Board.**

The Standards will now be submitted to the Minister.

8. Draft Business Plan 2017 and Budget

Following the presentation of an outline Business plan for 2017 at November's Board meeting, a number of adjustments have been made to the plan. SA clarified that while we do not have the letter of allocation from the DoH, the public service estimates have been published which included the estimate for HIQA for 2017. The Business plan is based on this figure. The following was also highlighted:

- There are a number of prioritised objectives
- A number of significant projects have been included (CICER, NPES and preparation for Ionising Radiation and funding has been allocated in the accompanying budget paper
- Reference will be made to reflect that the achievement of the objectives depends on the adequacy of resources.

The Board emphasised that a multi-annual plan should be developed estimating costs and resources for the commencement of new functions over the next number of years. It was agreed that a comprehensive workforce plan will be developed and reviewed by the Resource Oversight Committee before it is submitted to the DoH.

MS proposed approval of the Business Plan and Budget for 2017 and SOF seconded the proposal; **accordingly it was resolved that the Business plan and budget for 2017 be approved by the Board.**

9. HTA on Medical Thrombectomy

Patricia Harrington and Conor Teljeur joined the meeting for this item. The background to the HTA and the process for conducting it were presented. The HTA was undertaken at the request of Beaumont Hospital for the purpose of assessing the clinical effectiveness, cost effectiveness, budget impact and implications of the technology, in order to inform decisions around a national emergency endovascular service.

A statement of assurance was provided to the Board confirming that the HTA was undertaken in compliance with the processes outlined in the HTA Quality Assurance Framework.

Key issues were brought to the attention of the Board including equity of access to quality stroke services and the implications for the National Ambulance Service as access to thrombectomy will necessitate transfer of patients from acute stroke centres and therefore some additional resources in terms of ambulances and staff.

Advice on the basis of the findings is that a national emergency endovascular service is clinically effective and with one additional biplane angiography suite, would also be cost effective.

The Board acknowledged the quality of the work on the HTA and the added value of working with other jurisdictions on aspects of the project. It was noted that the HTA will be useful in informing public policy and ultimately be reflected in practice.

MB proposed approval of the HTA on Mechanical Thrombectomy and AC seconded the proposal; **accordingly it was resolved that the HTA of a National Emergency Endovascular service for Medical Thrombectomy in the Management of Acute Ischemic Stroke be approved by the Board.**

The HTA will now be submitted to the Minister for Health and the HSE as advice.

10. Annual Governance and Compliance Report

KL and SOF presented a report compiled by the Audit Risk and Governance Committee which demonstrates compliance with internal control requirements outlined in the Code of Practice for the Governance of State Bodies. The report sets out a range of assurances derived from relevant sources such as internal control reports from the executive management, internal audit reports, external audit, risk management and the financial statements review. The report provides assurances to the Board in advance of the approval by the Board of the annual report and the annual accounts for 2016.

The comprehensive report was welcomed by the Board and it was agreed that it will be referenced in the statement of Internal Financial Control.

11. Board workplan 2017

KL presented a work plan for the Board for 2017. It is structured to meet the key responsibilities of the Board such as leadership, strategy and performance oversight and reflects the Formal Schedule of Matters for Board Decision.

MS proposed approval of the 2017 Board workplan and SOF seconded the proposal; **accordingly it was resolved that the 2017 workplan for the Board be approved by the Board.**

12. National Patient Experience Project (NPEP)

Tracy O'Carroll (TOC) Project Manager for the NPEP joined the meeting for this agenda item. TOC provided an outline of the background and purpose of the project. She explained that HIQA is the lead body in a partnership approach with the HSE and the DoH and has responsibility for managing and co-ordinating the project, developing the survey model and methodology and implementing the survey. She explained that following the survey, a national report and Hospital Group reports will be published. In addition, there will be individual hospital reports.

In 2018, it is intended that quality improvement plans will be put in place for each hospital and hospital group.

The Board welcomed the clear and comprehensive information provided by the presentation.

13. CEO's report

PQ reported developments from a strategic, governance and operational perspective since the last formal Board meeting and highlighted the following:

- HIQA will be presenting on the *Future of Healthcare* to the Joint Oireachtas Committee on Healthcare next week
- The National Standards for Safer Better Maternity Services were launched on 21 December 2016.
- Oversight provided by the Regulatory Risk group meetings in relation to high risk centres, together with a summary of those centres. MD provided further information to the Board on designated centres for people with disabilities located in the North West region of the country known as Community Health Organisation 1. MD also referenced the fact that risks had also been identified in services provided by St John of God in the North East and appropriate regulatory action was being considered.

In this regard it was noted that an implementation plan has been agreed to address the issues relating to these services and to establish good governance in the area. Regular updates will be reported to HIQA on the delivery of the plan. In addition, correspondence will issue on the enforcement options available to HIQA. Inspection activity will continue in parallel.

MD also advised the Board that in some centres, good care is being provided but the facilities do not comply with regulations. In these circumstances, decisions are required in relation to funding for these centres.

It was identified that previous older persons inspections report included residents' dependency levels in designated centres and if this would be an appropriate factor to again reflect. MD agreed to review and revert to the Board.

PQ informed the Board that he, together with the Director of HTA and the Director of Regulation met with the Director General of the HSE where the following risk areas issues were brought to the attention of the HSE:

- Antimicrobial resistance: timeliness in effectively quantifying and addressing the emergent Gram-negative resistance problem in hospitals, community and residential settings
- Pre-hospital emergency care: Ongoing safety concerns in relation to delay in response to ambulance calls due to current arrangements for call handling and dispatch in Dublin
- Ongoing deterioration in the timeliness of access to rapid cancer diagnostic clinics for possible Breast, Lung and Prostate cancer

- Persistent poor performance over time across a number of hospitals in working to meet national standards, as identified through repeated thematic inspection, and associated business intelligence data.

14. Corporate Performance report

PQ presented the Corporate Performance Report to the Board which included a full report against all of the 2016 objectives. While the majority of objectives were delivered, some were not achieved by the end of year deadline. The following summary was provided:

- items 6, 7 and 9 on the agenda has seen a further three objectives completed
- a small number of objectives have been delivered in part and will be progressed during quarter one in 2017
- a small number could not be progressed due to external factors.

A summary of the corporate risks was included and a report on HR related activities. The Board noted the report.

15. HIQA Website

Cormac Farrell (CF) from the Communications and Stakeholder Engagement office presented on a new website for HIQA. He highlighted that analysis showed that the existing site had become outdated, did not accommodate smart phone functionality and was difficult to navigate. CF explained that feedback through public consultation identified key issues with the existing website and the new website was developed to address these issues. Over the coming weeks, CF explained that the new website will go live following testing of the site and content sign off by relevant managers.

The Board welcomed the new website and the improved accessibility it will provide.

16. Health and Safety Report

SA provided a Health and Safety Annual Report for 2016. Key activities during the year included:

- The development of a new health safety and welfare framework
- Review of relevant documentation and a range of standard operating procedures and guidance was put in place

In addition, SA provided a summary of the accidents during 2016. These have been reviewed and actions to drive learning are being implemented.

17. HIQA – 10 years on

MW advised the Board that HIQA will be established 10 years in May 2017. It was agreed that the occasion would be marked with a forward looking focus on key themes in the health and social care sector. MW gave an outline of some of the activities that are being considered for the occasion and will keep the Board updated as they progress.

18. Chairpersons report

The Chairperson's report was noted.

19. Committee Report

A report on the meetings of the Board Committees was included with the Board papers. The following report summarises the key items covered by each of the committees:

ARGC meeting (19 January 2017)

- Review of audit report on financial controls and procurement
- Review of Follow Up report on audit recommendations
- Consideration of a report on legislative compliance
- Annual assurance report for the Board on internal controls and compliance

Resource Oversight Committee (17 January 2017)

- Report to the Committee on the CEO's performance during 2016 and the objectives for 2017
- Report on the performance of the EMT members
- Review on end of year delivery of resource related objectives
- Update on workforce planning
- Draft budget for 2017
- External report on technology support and structure for HIQA was provided for information
- Terms of Reference for the Resource Oversight Committee (ROC) were amended and recommended for approval by the Board.

AC proposed approval of the terms of reference for the ROC and BON seconded the proposal; **accordingly it was resolved that the terms of reference for the Resource Oversight Committee be approved by the Board.**

20. Correspondence

No correspondence was included for the Board's information.

21. Any other Business

There was no other business and the meeting concluded.

Signed


Brian McEnery
Chairperson


Kathleen Lombard
Board Secretary

Actions arising from the Board meeting on 25 January 2017

No	Action	Person Responsible	Timeframe
1	a comprehensive workforce plan to be developed and reviewed by the Resource Oversight Committee before it is submitted to the DoH.	SA	February 2017
2	Clarification re dependency levels in designated centres and consideration for inclusion in inspection reports	MD	March 2017
3	Further detail on approach for 10 year establishment anniversary to be provided	MW	March 2017

Carried forward Actions

No	Action	Person Responsible	Timeframe
1	The oversight agreement between HIQA and DoH to come to the Board	PQ/SA	March
2	further update to the Board in May 2017 on implementation of Board evaluation report	KL	May 2017

Recurrent actions

No	Action	Person Responsible	Timeframe
1	It was agreed that correspondence arising from Board discussions will be circulated to the Board for information	KL	As arises
2	Training opportunities to be communicated to Board members	PQ/SA	As arises
3	It was agreed that all changes in reports presented to the Board will be highlighted for ease of reference	All	As arises
4	The Board will be kept updated of progress on the procurement and implementation of a Human Resources Information System	SA	As arises
5	Keep Board informed of developments relating to specific high risk centres	MD	As arises

