

**MINUTES OF THE BOARD MEETING OF
HEALTH INFORMATION AND QUALITY AUTHORITY
24 January 2018, Smithfield
10 am – 3 pm**

Present:

| Name | Details | Initials |
|--------------------|----------------|-----------------|
| Brian McEnery | Chairperson | BMcE |
| Una Geary | Board Member | UG |
| Molly Buckley | Board Member | MB |
| Martin Sisk | Board Member | MS |
| Stephen O’Flaherty | Board Member | SOF |
| Paula Kilbane | Board Member | PK |
| Barbara O’Neill | Board Member | BON |

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 |
| Rachel Flynn | Director of Health Information and Standards | RF |
| Marty Whelan | Head of Communications | MW |
| Sean Angland | Acting Chief Operating Officer | SA |
| Bala Krishna | Chief Information Officer | BK |

Apologies:

| | | |
|---------------|--------------|-----------|
| Mary Fennessy | Board Member | MF |
| Judith Foley | Board Member | JF |
| Anne Carrigy | Board Member | AC |

1. Quorum

It was noted that a quorum was present and the Board meeting was duly convened. A Board only session took place before the opening of the meeting in line with the Code of Practice for the Governance of State Bodies.

2. Conflict of Interest

No conflicts of interest were declared.

3. Minutes of the Board meetings

3.1 26 October 2017

The minutes of the meeting of 26 October 2017 were reviewed by the Board. SOF proposed approval of the minutes and MS seconded the proposal; **accordingly it was resolved that the minutes of 26 October 2017 be approved by the Board.**

3.2 6 December 2017

The minutes of the meeting of 6 December 2017 were reviewed by the Board. MB proposed approval of the minutes and UG seconded the proposal; **accordingly it was resolved that the minutes of 6 December 2017 be approved by the Board.**

3.3 13 December 2017

The minutes of the meeting of 13 December 2017 were reviewed by the Board. SOF proposed approval of the minutes and UG seconded the proposal; **accordingly it was resolved that the minutes of 13 December 2017 be approved by the Board.**

3.4 Formal note of email approval by the Board of terms of reference for a Section 9 Investigation and accompanying letter to Minister

The email approval by the Board of the terms of reference and the letter of response to the Minister in respect of the requested investigation into the safety, quality and standards for the safe conduct of obstetric and gynaecological surgery outside of core hours and response to major emergencies at the National Maternity Hospital (NMH) was formally noted for the minutes.

3.5 Formal note of email approval by the Board of the minutes of private meetings of 26 October and 27 October

The email approval by the Board of the minutes of private meetings of the Board of 26 and 27 October was formally noted for the minutes.

4. Review of Actions

All actions were noted as complete, on the agenda or an update was provided to the Board.

5. Matters arising

There were no matters arising.

5a. Matters arising from the Board only session

The Board were updated on the handling of an alleged protected disclosure.

The Board were advised by the Resource Oversight Committee of the CEO's performance review which was carried out by the Chairperson and BON, Board member.

6. Scheme of delegation for Section 9 investigation

As part of the governance arrangements for undertaking the investigation into the safety, quality and standards for the safe conduct of obstetric and gynaecological surgery outside of core hours and response to major emergencies at the NMH, approval for delegation to the CEO of the function of undertaking an investigation was sought from the Board.

The CEO explained that delegations in relation to the investigation function are done on a case by case basis and that this delegation is an appendix to the full scheme of delegation that was last approved by the Board on 24 May 2017. SOF proposed approval of the appendix to the full scheme in respect of the function of investigation into the NMH and MB seconded the proposal; **accordingly it was resolved that the delegation to the CEO for carrying out the investigation into the NMH be approved by the Board.**

7. Policy for the selection of a Deputy Chairperson of the Board

KL advised that at the last meeting of the Board, it was suggested that the Board should formalise an approach for the selection of a deputy Chairperson of the Board to ensure that there are effective arrangements in place for occasions when the Chairperson may be absent. The Board considered the draft policy and the following was suggested that;

- provision for self nomination should be included in the policy
- the position of deputy Chairperson should be reviewed annually
- the decision would be communicated to the Department of Health.

MS proposed approval of the process for the selection of a Deputy Chairperson and SOF seconded the proposal; **accordingly it was resolved that a Deputy Chairperson will be selected when the policy is finalised.**

KL agreed to amend the draft policy and to bring back to the Board for approval.

8. National Standards for Children's Residential Centres

RF introduced Linda Weir (LW) Head of Standards, who joined the meeting for this item.

LW presented on the development of the standards and outlined in detail the core elements in the development process. This included a review of evidence, a literature review, and stakeholder engagement and public consultation processes. LW highlighted that there were forty detailed submissions which represented a much broader community. The submissions were reviewed and themed and reflected where appropriate in the draft standards. A statement of assurance was also provided to the Board, outlining compliance with the standards development process.

The Board considered the standards and noted that the recipient of the services were at the centre. The Board queried protocols for staff in the residential centres and it was noted that the issue of staff retention did arise during the consultation process. It was also noted that social care workers are not recognised as a profession.

It was noted that MF, Board member with expertise in the area of children's services, was absent from the meeting. RF agreed to contact her to ascertain if she had any relevant observations. LW advised the Board that subject to the Board's approval, the draft standards will be submitted to the Minister for Health for approval, in consultation with the Minister for Children and Youth Affairs.

The Board commended the team for the work on the standards. MS proposed approval of the draft standards and BON seconded the proposal; **accordingly it was resolved that the draft National Standards for Children's Residential Centres be approved by the Board.**

9. Board Work plan 2018

KL advised the Board that an annual work plan for the Board is developed to ensure that all the matters required for Board attention are set out and addressed during the year.

MB proposed approval of the Board's 2018 work plan and MS seconded the proposal; **accordingly it was resolved that the 2018 Board work plan be approved by the Board.**

10. CEO's report

The CEO's report included a range of strategic developments, operational issues, corporate governance initiatives and important stakeholder engagement. PQ provided an overview of key areas of activity including

- the investigation into Tusla's handling of referrals of allegations of sexual abuse involving adults of concern. He advised that the investigation is in its final stage and that a meeting took place in December with the Department of Children and Youth Affairs (DCYA) in relation to risks identified and communicated to DCYA and Tusla during the investigation
- a large number of reports had been published since the last meeting of the Board and
- the Regulatory Risk Committee's work in providing oversight and governance of designated and non designated centres rated at higher risk.

In particular, a number of strategic items as follows received attention by the Board:

10.1 Draft Business Plan 2018 and funding

PQ advised that following the Board meeting of 6 December, the outline business plan for 2018 was submitted to the DoH. The cover letter highlighted resourcing required to deliver the plan and risks to the delivery of specific objectives, should resources not be available.

10.2 HRB grant work stream

MR advised the Board that following the strategy session with the Board in September 2017, where it had been suggested that academic partnerships should be explored to extend and leverage expertise in key areas, the HTA has partnered with two academic institutions on two grant applications aimed at building wider HTA capacity. The outcome of the applications will not be known until later in the year and the Board will be updated.

10.3 Commencement order for special care units

PQ advised the Board that the Minister for Health and the Minister for Children and Youth Affairs had signed the commencement order for the regulation of special care residential centres on 1 January 2018.

10.4 Regulation of Medical Ionising radiation exposure

John Tuffy (JT) Inspector Manager joined the meeting to present on the preparation by HIQA for undertaking the regulation of patient exposure to ionising radiation. He outlined that HIQA will become the Competent Authority for regulating medical exposure under the European Medical Exposures Directive which is due to be transposed into Irish law by statutory instrument in February 2018. JT explained what is meant by ionising radiation and medical exposure and the types of facility HIQA will regulate. The following points were highlighted:

- the extent of the functions that are likely to be included in the statutory instrument and what this will mean for the regulation function
- the plans and methodologies underway for undertaking this function
- communication plans and engagement with stakeholders
- the costs of IT system requirements to manage the function and
- issues relating to the draft legislation.

In response to the Board's questions in relation to the new function it was clarified the types of risks and incidents that arise in ionising radiation facilities and the nature of the issues arising from the consultation on the legislation including defining professional responsibilities.

The Board thanked JT for his presentation and noted the significance of the requirement in the EU directive that the competent authority is given the resources necessary to fulfil its obligations. The Board agreed that this must be emphasised when engaging with the Department of Health (DoH).

10.5 Disability residential centres – risk

PQ advised that he had met with the Secretary General of the DoH and the Director General of the HSE on potential implications for services and service users arising from non compliance in relation to residential disability services.

10.6 Legal opinion on the legislative requirement for HIQA to have regard to resources available to the HSE

Aoife McCann (AMcC) senior legal advisor joined the meeting for this item to brief the Board on the opinion provided by Senior Counsel with respect to the functions of the Chief inspector and the provision in Section 8 of the Health Act to have regard to the HSE's resources. AMcC summarised the main points of the advice including:

- HIQA's functions under Section 8 of the Health Act and the Chief Inspector's functions under section 41 of the Act are separate and distinct
- The legislation sets out that the functions carried out by HIQA (as opposed to the Chief Inspector's functions) should have regard to the HSE resources, for example when setting standards
- For the Chief Inspector to have regard to the resources of the HSE would give rise to potential inequity as the regulatory function could be interpreted as being applied differently to public and private providers and therefore open to legal challenge from a number of quarters.

In respect of the development of standards by HIQA, it was clarified for the benefit of the Board that each set of standards undergoes a process of engagement with key stakeholders and wider consultation. The Board suggested that in consultation on standards development, views on resource implications should be sought from relevant stakeholders. It was also agreed by the Board that the legal advice was unequivocal and should be shared with the Minister and DOH officials. In that context, it was noted that the Chairperson will meet with the Minister in mid February and this matter will be raised by the Chairperson. The CEO will also attend the meeting and the legal advice will be provided in advance. Concerns were raised by the Board with regard to future legislative developments, for example, the licensing framework and the importance of ensuring that the potential for inequitable application of standards should be highlighted during legislative development. AMcC left the meeting at this point.

11. Corporate Performance and Risk Report

SA introduced the report on corporate performance and risk, outlining HIQA's end of year performance against the 2017 business plan objectives and including the end of year finance and HR report. It was reported that seventy six percent of the objectives were achieved, 11% were not achieved due to factors outside of HIQA's control and a further 13% were not achieved for a variety of reasons which are outlined in the report.

It was noted that the full amount of grant was not drawn down and therefore this occurrence should be factored into budget discussions for 2018.

12. ARGC annual assurance report

SOF as Chair of the Audit Risk and Governance Committee (ARGC) presented on that Committee's annual assurance report to the Board. The purpose of the report is to show compliance with internal control requirements and to provide the Board with a

mechanism for reviewing the effectiveness of HIQA's internal control arrangements in advance of approving the annual report and the annual accounts. The report is supported by a range of activities carried out by the ARGC during the year including:

- Review of assurance reports from members of the Executive
- Review of a range of internal audit reports
- Review of the audit findings of the Comptroller and Auditor General
- Review of Risk management arrangements and
- Review of financial statements.

The Board considered the report and noted that it was robust and comprehensive.

13. Staff survey 2017

Tarik Laher (TL) of IPSOS MRBI joined the Board meeting to present on a recent staff survey carried out by IPSOS on behalf of HIQA.

He outlined to the Board the main findings and the areas for improvement. It was noted that the vast majority of results have improved since the last staff survey in 2015. Areas for improvement highlighted through the survey include the physical working environment and a desire for improvement in learning and development opportunities.

In response to the Board's queries on these matters, PQ advised that a number of initiatives are planned to address these areas including the development of an accommodation strategy and delivery of a learning and development strategy. The Board welcomed the improvement in results overall and emphasised the need to continue the focus on areas for improvement as expressed by staff through the survey.

The Board thanked TL for his presentation, who then left the meeting.

14. Chairperson's report

The Chairperson's report was noted.

15. Board Committees report

A report on the meetings of the Board Committees was included with the Board papers and was noted by the Board. SOF reported that the ARGC had reviewed an internal audit on financial controls at their recent meeting and it was noted that overall it was a very positive report. The Committee had also received a gap analysis review of the project plan for addressing new and existing information governance requirements. It was noted that while a lot had been done, the report was useful in highlighting areas for inclusion in the plan.

16. Correspondence

The following correspondence was included in the pack;

- response regarding the request for an investigation into the NMH
- letter to the DOH regarding the outline Business plan for 2018 and the required resources
- letter from the DOH regarding the ongoing Estimates and Health vote processes
- letter from the Minister regarding the launch of Ireland's National Action Plan on antimicrobial resistance
- letter from the Minister regarding the national clinical guideline for diagnosis, staging and treatment of lung cancer.

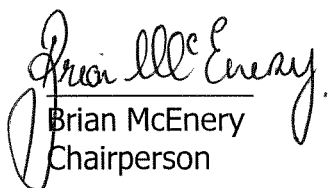
17. Any other Business

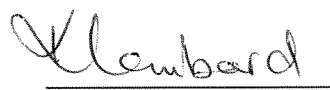
KL advised that;

- HIQA would be transferring to a new Board system and therefore training for the Board would be arranged for a date sometime in February
- An additional meeting of the Board would be arranged for mid February for the purpose of reviewing, and approval if satisfied, the annual financial statements before they are submitted to the Comptroller and Auditor General
- Ethics in Public office submissions must be made by 31 January 2018.

There was no other business and the meeting was concluded.

Signed


 Brian McEnery
 Chairperson


 Kathleen Lombard
 Board Secretary

Actions arising from the Board meeting on 24 January 2018

| No | Action | Person Responsible | Timeframe |
|-----------|---|---------------------------|---------------------|
| 1 | Amend the draft policy for the nomination of a deputy Chairperson | KL | March Board meeting |
| 2 | Contact MF re observations on the national standards for children's residential services | RF | immediate |
| 3 | Resourcing requirement in the EU Directive on ionising radiation to be emphasised with DoH | PQ | February |
| 4 | Engagement process with the HSE to be reviewed to ensure that the emphasis on resource issues is adequate | RF | February |
| 5 | <ul style="list-style-type: none"> - the legal advice regarding the provision for having regard to the resources of the HSE to be shared with the DoH - the Chairperson and CEO to raise the matter with the Minister and his officials at their meeting in mid February - Concerns with regard to future legislative developments, for example, the licensing framework and the importance of ensuring that the dual approach to regulation would not be repeated for future functions. | PQ | February |
| 6 | Incomplete drawdown of funding during 2017 to be factored into 2018 budget | SA | February |
| 7 | Arrange additional meeting of the Board | KL | February |
| 8 | Training to be arranged on new Board system | KL | February |

Carried forward Actions

| No | Action | Person Responsible | Timeframe |
|-----------|--|---------------------------|------------------|
| 1 | Regulation papers to be the subject of a future Board meeting – in strategy context | KL | March 2018 |
| 2 | An annual lecture hosted by HIQA to be considered | PQ | End 2017 |
| 3 | Amend ToR for Resource Oversight Committee when Performance Delivery Arrangement is finalised with the DoH | KL | December 2017 |

Recurring actions

| No | Action | Person Responsible | Timeframe |
|-----------|---|---------------------------|------------------|
| 1 | Ensure that complaints are considered as a learning opportunity and improvements are made where appropriate | PQ/MW | ongoing |
| 2 | Risk re disability services to be monitored at each Board meeting | PQ/KL | ongoing |

