

**MINUTES OF THE BOARD MEETING OF
HEALTH INFORMATION AND QUALITY AUTHORITY**

**21 March 2018, Mahon
10.30 am – 14.30 am**

Present:

Name	Details	Initials
Brian McEnery	Chairperson	BMcE
Martin Sisk	Board Member	MS
Stephen O’Flaherty	Board Member	SOF
Barbara O’Neill	Board Member	BON
Molly Buckley	Board Member	MB
Enda Connolly	Board Member	EC
Jim Kiely	Board Member	JK
Deirdre Madden	Board Member	DM
Caroline Spillane	Board Member	CS
Mary Fennessy	Board Member	MF

In Attendance:

Phelim Quinn	CEO	PQ
Kathleen Lombard	Board Secretary and 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

Apologies:

Judith Foley	Board Member	JF
Paula Kilbane	Board Member	PK

1. Quorum

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

2. Conflict of Interest

No conflicts of interest were declared.

3. Board Minutes

3.1 Board minutes 24 January 2018

The minutes of the meeting of 24 January 2018 were reviewed by the Board. MB proposed approval of the minutes and MS seconded the proposal; **accordingly it was resolved that the minutes of 24 January 2018 be approved by the Board.**

3.2 Board minutes 13 February 2018

The minutes of the meeting of 13 February 2018 were reviewed by the Board. SOF proposed approval of the minutes and MS seconded the proposal; **accordingly it was resolved that the minutes of 13 February 2018 be approved by the Board.**

3.3 Board minutes 26 February 2018

The minutes of the meeting of 26 February 2018 were reviewed by the Board. SOF proposed approval of the minutes and MF seconded the proposal; **accordingly it was resolved that the minutes of 26 February 2018 be approved by the Board.**

3.4 Board minutes 5 March 2018

The minutes of the meeting of 5 March 2018 were reviewed by the Board. BON proposed approval of the minutes and MB seconded the proposal; **accordingly it was resolved that the minutes of 5 March 2018 be approved by the Board.**

3.5 Formal note of email approval of draft financial statements 2017

The email approval by the Board of the draft financial statements for 2017 was formally noted for the minutes.

4. Review of Actions

KL updated the Board on the actions arising from the meetings of 24 January, 13 February, 26 February and actions carried forward or recurring. The following updates were also provided by the Executive:

- The letter of allocation from the Department of Health (DoH) has included allocation of funds for the appointment of relevant staff to carry out the functions of the competent Authority
- Following a letter sent from the Chairperson to the Minister relating to senior counsel advice in respect of the provision in the Health Act for HIQA to have regard to the resources of the HSE, the DOH has indicated that they are considering the advice.
- The position papers on regulation, forwarded to the Department and published last year will form part of the strategic planning discussions

- An annual lecture is currently being planned for 9 May, the theme of which will be adult safeguarding. Board members will be invited to the event.

5. Matters arising

5.1 Delegation for Statutory Investigation for signing

Further to the meeting of 5 March when the Board approved a new delegation to the CEO from the Board of the function for undertaking a Section 9 investigation into the NMH as requested by the Minister, the Chairperson duly signed the new delegation.

5.2 Update on Investigation Matters

Aoife McCann (AMcC) Senior Legal Advisor with HIQA, joined the meeting to update the Board on the current status of legal proceedings in respect of the Minister's request to undertake an 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.

AMcC advised the Board that an application was made to halt the statutory investigation in the High Court on 9 March 2018 by the NMH. The application was issued against the Minister for Health and HIQA. An application was also made to join HIQA as a respondent to the substantive judicial review proceedings. The Minister as respondent did not oppose the application and as a consequence HIQA agreed to take no further steps in relation to the investigation. As a result HIQA remains a notice party and a schedule for the exchange of documentation was agreed between the Minister and the NMH. The High Court directed that the judicial review be listed for hearing for 2 days on 24 July 2018. The case was adjourned for mention only, to 8th May 2018. The court reserved the question of costs.

It was agreed that HIQA will keep a watching brief on these developments. The Board thanked AMcC and the Executive for the quality of the briefings in respect of this matter. AMcC left the meeting at this point.

6. Policy for selection of Deputy Chairperson

KL explained that the Board had decided at their meeting of 6 December 2017 that a policy for the selection of a Deputy Chairperson should be developed. A draft policy was presented at the January Board meeting and a number of amendments were suggested and are incorporated in the version before the Board. The Board queried if the draft policy was necessary or appropriate given that there is explicit provision in the Health Act for instances of the Chairperson's absence. KL agreed to get further advice on this matter.

7. 2018 Business Plan

PQ presented the draft Business plan for 2018 and reminded Board members that a previous version had been discussed at the January Board meeting. He advised that the plan has included actions for addressing corporate risks. The letter of allocation for 2018 had been sent by the DoH earlier in March and since then the Executive had

worked to finalise the version currently before the Board, for Board approval. The allocation for 2018 provides for identified resource shortfalls in the delivery of existing functions as well as advancement of a range of new responsibilities which are outlined in the DoH letter of allocation.

The Board considered the draft 2018 Business Plan and a number of observations were made;

- the allocation allows for the recruitment of new staff to address current vacancies and to resource new functions; this exercise will create a considerable workload for the HR department. Relevant challenges were acknowledged such as the current employment market where the skills and qualities of HIQA staff are recognised and sought after, and retention issues
- a detailed recruitment plan based on the current workforce plan should come to the next Resource Oversight Committee
- the role of business intelligence should be strengthened in the plan
- the establishment of a new project management function should be prioritised
- the continued collaboration with the DoH on specific areas of work such as development of licensing legislation, as outlined in the letter of allocation
- the necessity for the HR function to be as effective as possible in enabling HIQA to deliver the workforce plan.

Following the discussion by the Board, MF proposed approval of the 2018 Business Plan and SOF seconded the proposal; **accordingly it was resolved that the 2018 Business Plan be approved by the Board.**

7.1 Letter of Allocation

The DoH letter of 7th March communicating HIQA's non capital expenditure for 2018 was included in the Board papers.

8. Process Outline for Developing National Adult Safeguarding Standards

RF outlined the process for developing the National Adult Safeguarding Standards to the Board which are being developed in conjunction with the Mental Health Commission. The process as outlined in HIQA's Quality Assurance Framework includes arrangements for joint working, a project plan including a plan for stakeholder engagement, review of evidence, establishment of an advisory group, focus group consultation, public consultation and approval of the final standards by the Board. RF outlined the next steps and timelines in the project and drew the Board's attention to a seminar on safeguarding which will be held on May 9th. The Board will receive an invitation to attend.

The Board raised the issue of ensuring that the HSE are provided with the opportunity for considering the resource implications of standards developed by HIQA given the legal advice provided to HIQA on the provision in the Health Act that HIQA "must have regard to the Executive's resources". It was agreed that the Quality Assurance Framework should be updated to explicitly include this step in the process.

It was also agreed that a representative from TUSLA be invited to the seminar and is included in the focus group consultation.

9. Service Charter

KL presented a draft service charter to the Board for consideration and approval. She advised that the development of a Customer Charter and Action Plan is a requirement of the Code of Practice for the Governance of State Bodies and that the aim of the Charter is to prompt organisations to engage with their stakeholders so that they are more flexible and responsive to their needs. While the concept of a customer charter is more identifiable with more "service" type organisations, HIQA has attempted to adapt the requirement to align with its functions and activities. In that context, the draft charter sets out commitments which reflect HIQA's functions and the customer service principles in the Code of Practice for the Governance of State Bodies. In addition, the Charter will be aligned with HIQA's corporate plan.

KL advised the Board that this is the first step of a larger process; an action plan will be developed, consultation with our stakeholders will be undertaken and in the future the charter and action plan will be evaluated and reported on in the annual report.

The Board considered the draft Charter and made a number of observations relating to the wording in the document. KL will reflect accordingly. It was also clarified that specific targets will be included in the action plan.

Subject to the suggested changes, JK proposed approval of the Service Charter and BON seconded the proposal; **accordingly it was resolved that the Service Charter be approved by the Board.**

10. Committee Membership

KL advised that she and the Chairperson are currently reviewing committee membership to take account of recent Board appointments and to align as best as possible the skills of the current Board to the Committees. The new Committee membership will come to the Board for approval.

11. Corporate Planning Process

SA advised the Board that currently HIQA is in its last year of the current corporate plan and therefore it is time to commence the process for developing a new Corporate plan. A short outline of the process was presented including timelines and targets. PQ also presented on the resourcing elements and key considerations for a new corporate plan.

The Board discussed the process and it was suggested that given that HIQA is over 10 years in existence, it would be worth considering a review of organisational performance and an assessment of HIQA's work. It was agreed that the Executive will consider and revert on;

- how an assessment might be undertaken within the timescale and scope available

- the input by the Board into the strategic process
- how engagement with key stakeholders could be facilitated to optimise input to the development of the strategy.

12. Annual Report and Annual Financial Statements 2017

SA presented the annual report and annual financial statements and explained to the Board that the document is for review and comment rather than approval at this point. He advised the Board that while HIQA has always complied with the timelines set out in the Health Act for the submission of these reports, that this is the first time that HIQA has combined the annual financial statements with the annual report. SA explained that following approval by the Board of the draft financial statements on 16 February 2018, the accounts have been audited by the Comptroller and Auditor General (C&AG).

The Board noted that there were minor differences between the draft financial accounts that were approved in February 2018 and the ones presented the Board. SA clarified that the text had changed when being converted to "house style" but he confirmed that the wording will revert to the original text as approved by the Board. SA also confirmed that when the C&AG's certificate has been received, the final accounts and annual report will be brought to the Board for approval.

13. Healthcare Business Intelligence – Assessment and Escalation

Sean Egan (SE) Head of Healthcare, joined the Board meeting for this item. He presented on the process for the escalation of regulatory risks in healthcare services using the Authority's Monitoring Approach (AMA). He explained that

- information received regarding healthcare services is assessed and risk rated
- the healthcare team has no enforcement powers but when risks are identified, they are brought to the attention of the service provider to address and through the inspection process, HIQA checks that issues raised have been addressed
- public perception and expectation can be at variance with HIQA's ability to respond to individual complaints; occasionally HIQA receives requests to investigate instances of individual care when the threshold for a Section 9 investigation is not met. However, such complaints are reviewed to ascertain if it indicates wider systemic issues and acted on accordingly.

SE outlined the process for assessing and escalating risk within the Regulation Directorate and provided examples to the Board when risk issues have been escalated externally.

The Board made a number of observations in respect of the escalation process to external organisations and the expectation gap described during the presentation. It was clarified that HIQA engages with relevant organisations during and after escalation of issues so that assurance is provided on matters raised. It was also agreed that consideration will be given to addressing the gap in the public's perception of HIQA's powers to investigate.

14. HR Procedures

SA introduced a number of HR procedures for the Board's review and approval – the disciplinary procedure, grievance procedure, protected disclosure procedures and dignity and respect in the workplace. He explained that HIQA had sought an external legal review of the procedures to ensure that they are sufficiently robust to address internal issues and that they fully reflect developments in the external environment. It was also noted that the policies would be disseminated to all staff via direct briefings and through email, asking all staff that they have read and understood the policies.

In response to the Board's queries, SA clarified that pending Board approval, the procedures will be disseminated by HR. It was also clarified that there are mechanisms to manage instances involving members of the executive management and the CEO. SOF proposed approval of the four revised procedures and CS seconded the proposal; accordingly it was resolved that the disciplinary procedure, grievance procedure, protected disclosure procedures and dignity and respect in the workplace be approved by the Board.

15. Presentation on Children First Act

This item was deferred until the May Board meeting.

16. CEO's report

PQ advised that much of the contents of his report had been referenced during the meeting but he invited comments from the Board in respect of any other items. He also advised the Board that for future Board meetings, there will be a separate report from the Chief Inspector. This is intended to reinforce the distinct remit and areas of responsibility that are within the Office of the Chief Inspector. He explained that there have been instances where confusion has arisen and therefore the presentation of a separate report from the Chief Inspector should help delineate discrete functions.

17. Corporate Performance and Risk Report

For the benefit of new Board members, PQ advised that the corporate performance and risk report provides an account at each Board meeting of;

- progress on the objectives set out in the corporate plan
- the performance of HIQA against projected spend, including income and expenditure, cash flow and balance sheet.
- a HR report and
- the corporate risks.

It was clarified that the budget for 2018 is currently being finalised, following confirmation of the budget for 2018 in the DoH letter of allocation. The next report will present a more complete report on actual expenditure versus forecasted spend.

It was also agreed that the full corporate risk register will be included with the next report.

18. Health and Safety Report

SA presented an annual report on Health and Safety for 2017 to the Board which outlined the governance framework, training, risk assessments and other activities relevant to the management of health and safety in HIQA. The Board thanked SA and noted the report.

19. Chairperson's report

The Chairpersons report was noted.

20. Board Committee Report

The Committee report was noted.

21. Any Other Business

The Chairperson, in line with the provision in the Code of Practice for the Governance of State Bodies, held a short Board only session. He suggested to the Board that for future Board meetings, and in order to ensure efficient use of senior staff resources, only the members of the Executive Management Team and the Board Secretary should be in attendance for the duration of the Board meeting; other staff will be invited as required for specific items. The Board expressed agreement with this proposal.

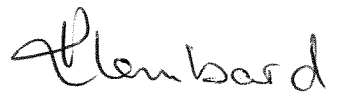
The Chairperson also asked that the policy for Board only sessions should be reviewed to make clearer the attendance of the Board Secretary at the sessions and the exemptions that might apply in exceptional circumstances.

There being no further business, the meeting was concluded.

Signed



Brian McEnery
Chairperson



Kathleen Lombard
Board Secretary

Actions arising from the Board meeting on 21 March 2018

No	Action	Person Responsible	Timeframe
1	monitor status of legal proceedings in respect of the Minister's request to undertake an Investigation of the National Maternity Hospital	PQ/AMcC	As arises
2	advice re draft policy on selection of Deputy Chairperson given explicit provision in the Health Act for instances of the Chairperson's absence	KL	May 2018
3	a detailed recruitment plan based on the current workforce plan to come to the next Resource Oversight Committee	KL/SA	June 2018
4	the Quality Assurance Framework to be updated to explicitly reflect consultation with HSE on resources	RF	May 2018
5	representation from TUSLA be invited to the safeguarding seminar and included in the focus group consultation	RF	May 2018
6	Amend wording on service charter	KL	April 2018
7	Committee membership to go to Board for approval	KL	April 2018
8	Consideration to be given to an assessment of organisational performance, the Board's input and engagement with key stakeholders in developing the corporate plan	PQ	April 2018
9	final accounts and annual report to come to the Board for approval	PQ/SA	April 2018
10	consideration to be given to addressing the gap in the public's perception of HIQA's powers to investigate	PQ/MW/MD	May 2018
11	the full corporate risk register to be included with the next corporate performance report	KL	May 2018
12	Staff, other than Executive Management, to be invited as required for specific items only	PQ/KL	May 2018
13	policy for Board only sessions should be reviewed to clarify the Board secretary's attendance	KL	May 2018

Carried forward Actions

No	Action	Person Responsible	Timeframe
1	Amend ToR for Resource Oversight Committee when Performance Delivery Arrangement (PDA) is finalised with the DoH	KL	PDA not yet finalised
2	<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 	PQ	Letter has issued. Advice being considered by DoH advisors

	- 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.		
3	Training to be arranged on new Board system	KL	KL review to ensure all comfortable with new system

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