

An tUdarás Um Fhaisnéi agus Cáilíocht Sláinte

# Draft MINUTES OF THE BOARD MEETING OF HEALTH INFORMATION AND QUALITY AUTHORITY

# 23 May 2018, Smithfield 12 – 3pm

#### **Present:**

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Name	Details	Initials	
Martin Sisk	Board Member	MS	
Stephen O'Flaherty	Board Member	SOF	
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	
Paula Kilbane	Board Member	PK	

#### In Attendance:

Phelim Quinn	CEO	PQ
Kathleen Lombard	Board Secretary and Chief Risk Officer	KL
Mary Dunnion	Director of Regulation	MD
Rachel Flynn	Director of Health Information and Standards	RF
Sean Angland	Acting Chief Operating Officer	SA

**Apologies:** 

Barbara O'Neill	Board Member	BON
Judith Foley	Board Member	JF
Mairin Ryan	Director of HTA and Deputy CEO	MR

### Selection of Chairperson for the Board meeting of 23rd May 2018

The Board Secretary advised that as the tenure of Mr Brian McEnery as Chairperson of HIQA had expired from  $15^{th}$  May, the board members present must, in accordance with Section 18-(3) (b) of the Health Act, choose one of those present to chair the Board meeting.

MB proposed MS to chair the Board meeting and this was unanimously agreed by the remaining Board members.

It was also agreed by Board members that the Committee chairs should be those first considered should a further occasion arise when a Chairperson must be selected.

#### 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 21 March 2018

The minutes of the meeting of 21 March 2018 were reviewed by the Board. DM proposed approval of the minutes and CS seconded the proposal; accordingly it was resolved that the minutes of 21 March 2018 be approved by the Board.

#### 3.2 Board minutes 17 April 2018

The minutes of the meeting of 17 April 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 17 April 2018 be approved by the Board.

#### 3.3 Board minutes 24 April 2018

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

#### 3.4 Board minutes 9 May 2018

The minutes of the meeting of 9 May 2018 were reviewed by the Board. JK proposed approval of the minutes and CS seconded the proposal; accordingly it was resolved that the minutes of 9 May 2018 be approved by the Board.

#### 4. Review of Actions

KL updated the Board on the actions arising from the meetings of 21 March, 17 April, 24 April, 9 May and actions carried forward or recurring. Aoife McCann (AMcC) senior legal advisor joined the meeting at this point and additional briefing was provided on the following actions:

 Update on developments relating to 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 (NMH); AMcC advised that HIQA, as notice party, has been copied with an affidavit made on behalf of the Minister which defends the position for the Minister's request for HIQA to undertake an investigation. The advice to HIQA is not to respond as HIQA is a notice party rather than the respondent to the proceedings. HIQA was also copied in on correspondence which indicates that there has been engagement between the NMH and the Department of Health (DoH) on a proposal for a non statutory review by an external party with a view to completing this work by end of September 2018.

It was noted that no direct correspondence was received from the Minister on this matter and it was agreed that HIQA would await developments.

MD advised the Board that in the interim, HIQA is undertaking a national monitoring exercise of maternity services.

- Consideration of assessment of organisational performance as part of stakeholder engagement on the corporate plan; it was noted that this will be integrated with the process of engagement with key stakeholders.
- Addressing the gap in public's perception of HIQA's powers to investigate; it
  was noted that a meeting has been sought with the DoH and Department of
  Children and Youth Affairs (DCYA) on issues relating to regulatory reform
  when this item may also be discussed.

# 5. Matters arising

AMcC and PQ briefed the Board on other matters arising from previous meetings of the Board:

- Fees payable to the Board; AMcC advised that advice had been provided to HIQA which confirmed that the Health Act and the Code of Practice for the Governance of State Bodies provides for the Minister, with the consent of the Minister for Public Expenditure and Reform to determine the remuneration payable to Board members. The Board noted the advice.
- No further correspondence has been received in relation to the request from the Minister for a Section 9 investigation on the cervical cancer screening services.
- A judicial review has been initiated by a provider of a designated centre against the Chief Inspector. A brief summary of the nature of the challenge and developments to date was described to the Board. HIQA has taken advice on this matter and considers that there are strong grounds for defending the case. It is expected that this case will be listed for mention at court proceedings in June.
- HIQA has received a copy of the General Scheme of the Draft Human Tissue Bill. It is envisaged that HIQA will become the regulators of the services covered in the legislation. While it is considered that this is a significant role, the view of key Government departments is that there should not be another regulatory body established to carry out the functions of this Act. It was

noted that if the final decision is that HIQA does becomes the regulatory body for these functions that clarity is needed on what HIQA's position should be in respect of assuming the role of regulator under the proposed legislation. It was agreed that once a response document had been prepared it would form the basis of a wider board discussion and agreement on HIQA's perspective on this matter.

- As part of the corporate plan development project a session on future regulatory reform and standards development is to be organised with relevant officers in the DoH and the DCYA. This facilitated session will incorporate HIQA's international reviews on regulation of health and social care services and standards development.

# 6. Draft National Standards for Infection Prevention and Control in Community services

Linda Weir (LW) Standards Manager, Judy Gannon (JG) and Catriona Keane (CK) of the Standards Development team joined the meeting for this item.

LW and JG presented on the process and rationale for developing this set of standards. The Standards had been developed in recognition that Healthcare Associated Infections are increasingly prevalent in community care settings. The standards are developed using the Directorate's established process for developing standards documented in the Directorate's Quality Assurance Framework. This includes a review of evidence from national and international sources and stakeholder process which includes engaging with service users, policy makers, practitioners and academics. Feedback from a public consultation on the standards is analysed and where appropriate reflected in the final standards.

RF clarified that on this occasion, there was communication with the HSE and the DoH to seek their views on the resource implications of the standards, given that the Health Act's provision that HIQA has regard to the resources of the HSE.

It was observed by the Board that the accessibility of the standards needs to be considered given the busy environments in which practitioners operate. This factor was acknowledged by the Executive and that there is a need for a more simplified tool for intended audiences which will be considered in the development of future standards. The Board thanked LW and JG for their presentation.

MB proposed approval of the draft National Standards for Infection Prevention and Control in community services and JK seconded the proposal; accordingly it was resolved that draft national Standards for Infection Prevention and Control in community services be approved by the Board.

LW, JG and CK left the meeting.

#### 7. Process Outlines for development of:

- Recommendations for community based electronic prescriptions
- An e-prescribing messaging standard to support implementation of community based electronic prescribing

- Development of a standard for a national patient summary dataset.

RF introduced this item explaining that there is a process outline documented for each set of standards or recommendations which is considered by the Board, and if is satisfied, the Board approves the outline. In response to queries from the Board, RF explained that the Health Act provides for HIQA to evaluate available information respecting the services; to provide advice and make recommendations to the Minister and the HSE about deficiencies and to set appropriate standards for the HSE and service providers respecting data and information in their possession in relation to services and the health and welfare of the population. She added that the national health information agenda on issues such as e-prescribing has not advanced as promptly as projected in the e-health strategy and the HSE's Knowledge and Information Plan; therefore HIQA endeavours to provide leadership in the area and she gave examples where HIQA's work on health information initiatives has been adopted by practitioners.

# 7.1 Recommendations for community based electronic prescriptions

RF explained that the purpose of this project is to provide the Minister with advice on the governance structure and models for rolling out community based e-prescribing nationally. The Board considered the process outline for the development of the recommendations for community based electronic prescriptions and had a subsequent discussion on the membership of the Expert Advisory Group. It was suggested the group should be expanded to include private practitioners and hospital pharmacists. In that context, representative bodies such as the RCSI and the Post Graduate Training Bodies Forum should be contacted to include representation from other relevant sectors. Subject to this inclusion, CS proposed approval of the process outline for the development of recommendations for community based electronic prescriptions and SOF seconded the proposal; accordingly it was resolved that the process outline for the development of recommendations for community based electronic prescriptions be approved by the Board.

7.2 An e-prescribing messaging standard to support implementation of community based electronic prescribing

RF explained that the purpose of this standard is to further progress e-prescribing in Ireland by delivering a technical specification that can be used by GP and pharmacy system vendors and which is aligned with international and national messaging standards. It was also highlighted that this is a technical standard and the membership of the Expert Standards Advisory Group reflects this. MB proposed approval of the process outline for the development of an e-prescribing messaging standard and CS seconded the proposal; accordingly it was resolved that the process outline for the development of an e-prescribing messaging standard to support implementation of community based electronic prescribing be approved by the Board.

7.3 Development of a standard for a national patient summary dataset

RF explained that the purpose of developing this standard is to support the implementation of sharing patient summary information in the health and social care

sector. The Board observed that there was no representation from users of the services and that this should be considered. It was clarified that this standard is technical in nature and as such it is very difficult to get a patient representative to engage in the process. The Board recommended that efforts are made in this regard as it is important that the user's perspective is included in the overall project. SOF proposed approval of the process outline for the development of a standard for a national patient summary dataset and PK seconded the proposal; accordingly it was resolved that the process outline for the development of a standard for a national patient summary dataset be approved by the Board.

#### 8. CEO's report

PQ provided a summary of the main items in the CEO's report to the Board. This included:

- No update has been received in respect of the DoH review of the location of the HI/HTA functions.
- Although the DoH's letter of allocation allows for recruitment of posts as outlined in the business case submitted to the DoH for recruiting to a range of posts, sanction has been received for only seven additional staff for the disability services regulation pillar to date. In that context, PQ referred the Board to the letter from the DoH regarding the recommendations arising out of HIQA's meeting with the public accounts committee on the use of agency staff and PQ's response. PQ explained that currently HIQA is balancing the risk of delivering its existing and new functions and responsibilities effectively with the risk of reliance on agency staff. He added that the Executive have identified this as a risk and are currently analysing this matter further and will be bringing a management plan to the next Board meeting for further consideration. The Board expressed its support for the CEO's approach regarding using agency to support delivery of the programme of work set out in the 2018 Business Plan.
- The due process and consultation on the draft investigation report into Tulsa's management of child sex abuse referrals has been completed and the report of that investigation is expected to be finalised for consideration by the Board at a meeting provisionally scheduled for 14<sup>th</sup> June 2018.
- HIQA had been invited to present evidence to the Oireachtas Health Committee on 23<sup>rd</sup> May on the Healthcare licensing and Patient Safety Bill as part of pre-legislative scrutiny. However, the meeting has been deferred and an alternative date is awaited.
- The CEO and the Director of Health Information and Standards have been visiting hospitals to promote the National Patient Experience Survey.

The Board noted the report and queried the process of preparation of HIQA's views prior to appearing before Oireachtas committees. It was clarified that in this matter (healthcare licensing) there had been a detailed discussion on HIQA's position with the Board at a previous meeting and that position would have been presented at the Oireachtas Committee. However, it was agreed that time would be set aside at a future meeting to consider the process for communicating with the Board prior to such appearances and for ensuring the Board's views are included in the position articulated. It was also agreed that the presentation for the next appearance before

the Oireachtas Committee will be shared with the Board in advance of the appearance and that the Board's views would be sought.

#### 9. Chief Inspector's report

MD presented the report explaining that this was the first Chief Inspector's report brought to the Board and that she welcomed any feedback from the Board.

#### The report included:

- An overview of the submissions process which is designed to allow registered providers to make reasonable submissions on regulatory judgements during and/or after inspections. An overview of the submissions received during 2017 was also provided.
- A summary of the risks currently being managed within the Regulation Directorate including inadequate staffing levels within the disability pillar and the risk relating to preparation for the regulation of ionising radiation exposure.
- A summary report from the Regulatory Risk Register Committee which reviews designated centres with a high risk profile.
- An update on the Authority's Monitoring Approach project (AMA) which is a significant internal project aimed at improving regulatory processes

MD advised that an overview report on regulatory activity will be published in the coming weeks and that it will be presented to the Oireachtas Committee on Health. In addition, she advised the Board that a report on a centre in Ennis will be published on the day following the Board meeting.

#### 10. Corporate performance and risk report

SA presented the corporate performance report which outlines progress on the objectives set out in HIQA's business plan, provides an update on finance and HR and includes a summary of the corporate risks. The Board were asked if they had any questions arising from the report.

The Board queried if the deadline of 31 October 2018 in respect of the registration of all designated centres for disability services can be achieved. MD confirmed that the deadline would be met but that there have been significant efforts required from the centres and in terms of the regulatory staff efforts to reach this deadline. MD also confirmed that there has been a lot of work recently been carried out in relation to safeguarding issues and that she will reflect this.

It was also suggested that the wording of the risks be reviewed to better articulate what the result of the uncertainty is. The Executive will examine and revert.

In relation to the objective on demonstrating effective communication of HIQA's aims and objectives with key influencers and commentators on health and social care, it was agreed that a discussion relating to this objective will be scheduled for a future Board meeting.

### 11. Chairperson's Report

The Chairperson's report was noted.

#### 12. Board Committee report

The Committee's report was noted.

#### 13. Correspondence

The correspondence was noted. It was agreed that any future correspondence to the Chairperson or the CEO where the Board is required to make a decision will be circulated to the Board.

#### 14. Future Agenda Items

A number of future agenda items had been agreed during the meeting.

## 15. Any other business

KL advised that she had omitted to update the Board during the review of actions item that she had reviewed the draft policy on the selection of the deputy chairperson. The advice on this matter is that there is no legal provision for HIQA to make such an arrangement. There being no further business the meeting was closed.

Signed

Martin Sisk

Acting Chairperson for Board

Raisbreonbell

Meeting 23 May 2018

Kathleen Lombard Board Secretary

# Actions arising from the Board meeting on 23 May 2018

No	Action	Person Responsible	Timeframe
1	a more simplified tool for intended audiences will be considered in the development of future standards.	RF	2018 standards development
2	membership of Expert Advisory Group to be expanded to include private practitioners and hospital pharmacists and representative bodies such as the RCSI and the Post Graduate Training Bodies Forum should be contacted to include representation from other relevant sectors	RF	immediate
3	Representation from users of the services to be sought for all standards; including technical standards.	RF	immediate
4	time will be allocated at a future meeting to consider the process for communicating with the Board prior to Oireachtas committee appearances and for ensuring the Board's views are included in the position articulated.	KL	July Board meeting
5	the presentation for the next appearance before the Oireachtas Committee will be shared with the Board and feedback sought	PQ	immediate
6	wording of risks to be reviewed to better articulate what the result of the uncertainty is	Executive	immediate
7	A discussion on demonstrating effective communication of HIQA's aims and objectives with key influencers and commentators on health and social care, will be scheduled for a future Board meeting	PQ/KL	July Board meeting (related to action 4)
8	correspondence to the Chairperson or the CEO where the Board is required to make a decision will be circulated to the Board	PQ	immediate

# **Carried forward Actions**

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	a detailed recruitment plan based on the current workforce plan to come to the next Resource Oversight Committee	KL/SA	June 2018
3	Consideration to be given to an assessment of organisational performance, the Board's input and	PQ	Ongoing

	engagement with key stakeholders in developing the corporate plan		
4	consideration to be given to addressing the gap in the public's perception of HIQA's powers to investigate	PQ/MW/MD	May/June 2018
5	policy for Board only sessions should be reviewed to clarify the Board secretary's attendance	KL	Complete – update
6	Amend ToR for Resource Oversight Committee when Performance Delivery Arrangement (PDA) is finalised with the DoH	KL	PDA not yet finalised
7	<ul> <li>the legal advice regarding the provision for having regard to the resources of the HSE to be shared with the DoH</li> <li>the Chairperson and CEO to raise the matter with the Minister and his officials at their meeting in mid February</li> <li>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.</li> </ul>	PQ	Letter has issued. Advice being considered by DoH advisors

**Recurring actions** 

No	Action	Person	Timeframe
		Responsible e	
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