

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

**19th September 2018, Smithfield Office
10am – 3pm**

Present:

Name	Details	Initials
Paula Kilbane (Chair)	Board Member	PK
Martin Sisk	Board Member	MS
Molly Buckley	Board Member	MB
Enda Connolly	Board Member	EC
Jim Kiely	Board Member	JK
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
Rachel Flynn	Director of Health Information and Standards	RF
Mairin Ryan	Director of HTA and Deputy CEO	MR
Sean Angland	Acting Chief Operating Officer	SA

Apologies:

Stephen O'Flaherty	Board Member	SOF
Judith Foley	Board Member	JF
Deirdre Madden	Board Member	DM

Selection of Chairperson for the Board meeting of 19 September 2018

The Board Secretary advised that the Board Members present must, in accordance with Section 18 – (3) (b) of the Health Act, choose one of those board members present to chair the Board meeting.

MF proposed PK to chair the Board meeting and this was unanimously agreed by the remaining Board members.

1. Quorum

It was noted that a quorum was present and the Board meeting was duly convened. PK advised the Board that she had been made aware that Bairbre O'Neill had tendered her resignation to the Minister. The Board reflected on the high calibre of her contribution during her tenure and requested the Board Secretary to write on the Board's behalf conveying their appreciation of her input and their regret at her resignation.

2. Conflict of Interest

No conflicts of interest were declared.

3. Board minutes 3 July 2018

The minutes of the meeting of 3 July 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 3 July 2018 be approved by the Board.**

4. Review of Actions

KL updated the Board on the actions arising from the meeting of 3 July and actions carried forward or recurring. It was noted that the majority of the actions were either complete or on the agenda. KL advised that the Performance Delivery Agreement is currently being finalised with the DoH and the terms of reference for the Resource Oversight Committee will then be reviewed.

5. Matters arising

In the context of the review of actions at the July Board meeting, a further amendment was suggested to the Policy for Board only sessions. It was agreed that the policy should reflect that the Chairperson, having consulted with the Board, will determine who, outside of the board members, remains in the meeting.

6. Recommendations for a National Community based e-Prescribing Programme

Kevin O'Carroll (KOC) and Deirdre Laffan (DL) joined the meeting for this item. A statement of assurance to the Board in respect of adherence with HIQA's process for developing recommendations accompanied the e-Prescribing recommendations. DL presented on the scope, process and consultation for the project and also set out next steps. In response to the Board's queries, the following was clarified:

- The recommendations will be submitted to the Minister and are for the HSE to implement

- The HSE participated as members of the Expert Advisory Group in the development of the recommendations
- There is no duplication of similar work carried out by the HSE
- An appropriate governance structure for the implementation of the recommendations will be required in the HSE
- The resource requirements have not been described for taking the recommendations forward.

The Board acknowledged the quality of the work and felt that the analysis of similar programmes in other jurisdictions was particularly valuable in helping to ensure that Ireland does not repeat mistakes made in this field.

MS proposed approval of the draft recommendations for a national community-based ePrescribing programme and MF seconded the proposal; **accordingly it was resolved that the recommendations for a national community-based ePrescribing programme be approved by the Board.**

7. Regulation Committee Terms of Reference

KL advised the Board that as part of the process for Board committees review of their respective terms of reference (TOR) the Regulation committee reviewed its TOR. The TOR had been agreed by the Committee at their meeting on 11 September and are for approval by the Board. MS proposed approval of the minutes and CS seconded the proposal; **accordingly it was resolved that the Regulation committee's TOR be approved by the Board.**

8. Process Outline for a HTA on a Pre-exposure Prophylaxis (PrEP) programme for populations at substantial risk of sexually acquired HIV

MR presented the process outline for this HTA and explained that the purpose of this project is to establish the clinical and cost effectiveness of introducing a Pre-exposure Prophylaxis (PrEP) programme to prevent HIV infection in Ireland and it is intended to inform decision making by the Minister and the HSE.

The Expert Advisory Group is currently being formed and as recommended by the Board will include service user representation.

This project is included in the HTA prioritised plan which came before the Board in July. It is intended that the HTA project will be completed in early 2019 and it will come to the Board for approval at its March meeting. In response to the Board's comments it was confirmed that the prison service will be included in the targeted consultation phase of the project.

EC proposed approval of the process outline for the HTA of a PrEP programme for populations at substantial risk of sexually acquired HIV and MB seconded the proposal; **accordingly it was resolved that the process outline for the HTA**

of a PrEP programme for populations at substantial risk of sexually acquired HIV be approved by the Board.

9. Process Outline for a HTA on Point of Care Testing (POCT)

MR presented the process outline for this HTA and explained that the purpose of this project is to inform anti-biotic prescribing for patients presenting with respiratory tract infections in primary care which will then inform the Minister's and HSE's decision making. The HTA will benefit those prescribing antibiotics by determining whether a respiratory infection is bacterial or viral and therefore identifying those patients most likely to benefit from prescribing an antibiotic. The driver for undertaking the HTA is the growing threat of antimicrobial resistance to public health and this initiative is part of the EUnetHTA work programme for which HIQA will take the lead.

The Board highlighted the need for appropriate consultation with general practice and greater awareness of the public around appropriate antibiotic use.

EC proposed approval of the process outline for the HTA on POCT to inform antibiotic testing for patients presenting with respiratory tract infections and MB seconded the proposal; **accordingly it was resolved that the process outline for the HTA on POCT be approved by the Board.**

10. CEO's Report

PQ provided a summary of the main items arising since his last report to the Board including;

- Following communication with Departmental officials, it is understood that a chairperson will be appointed to HIQA Board imminently
- Media coverage over the summer months in relation to HIQA's receipt of information and subsequent correspondence with the Office of the Ombudsman; PQ explained that there is a misunderstanding in the wider sector that all information received by HIQA are complaints. It was clarified that HIQA receives a huge volume of unsubstantiated information on an ongoing basis and these are assessed and transferred to the case holder for the relevant service area or service provider. In response to the Board's queries it was clarified that HIQA, as part of its procedures, acknowledges and logs all information received and includes the contact details for the Ombudsman in responses. Information is also provided in respect of healthcomplaints.ie and the National Safeguarding Office in the HSE.

PQ also advised that a detailed report on the receipt of information by the Regulation Directorate was provided to the Regulation Committee at their meeting on the previous week to the Board meeting where this matter was reviewed in detail. It included a full account of the recent media reporting on HIQA's management of information and all the procedures within the Directorate for managing the information. A more concise report has been included in the Board pack.

The Board highlighted the need for increased communication on this matter so that there is better understanding of key stakeholders of HIQA's role and approach. PQ acknowledged that the media reports and the emergent misunderstanding around information received by HIQA have confirmed the necessity for more communication. He also clarified that a project had commenced in June to review memoranda of understanding to ensure they are fit for purpose, operable and take account of other relevant legislation.

- MR advised the Board that HIQA has been asked to undertake evidence synthesis to inform national health policy including the review of cardiology services and the national plan to address antimicrobial resistance. Funding of €250,000 has been provided to support this work over an 18 month period. Recruitment of additional staff is underway.
- Thirty one of the 47 positions identified in the business case submitted to the DoH have now been sanctioned and this will have a positive impact on HIQA's dependence on agency staff. Active engagement on the outstanding positions continues. PQ also reported that a submission on budgetary estimates for 2019 had been made to the DOH.
- A series of stakeholder engagements has occurred over the summer months in relation to the development of HIQA's corporate plan. It was noted that an invitation had been issued to DOH in this regard but no consultation had occurred as yet. PQ noted that they would be meeting with the DOH in early October as part of its ongoing business meetings when the DOH perspective on HIQA strategy could be discussed which is scheduled to take place in the near future.

It was suggested by the Board that the governance and reporting relationship with the DoH should be included on matters for the attention of the new Chairperson.

11. Chief Inspector's Report

MD, Chief Inspector and Director of Regulation provided a report to the Board on the activities being carried out in the Directorate. It was noted that there was a detailed review by the Regulation committee the previous week of the Directorate's objectives, risks and related activities. The Board noted the report.

12. Corporate Performance and Risk Report

SA, Acting Chief Operating Officer, provided an overview on the delivery of the 2018 business plan objectives, highlighting a small number of objectives that are outside of planned delivery. Updates on the actions relating to the outlier objectives were also provided. In addition the following reports were included:

- Financial – the Board were advised that it likely that there will be a significant under spend by the year end. This results primarily from the continued delay in sanctioning new and replacement posts by DOH.
- Additional detail on HR activities and metrics were provided within the report.
- Risk management – detail in respect of changes to the corporate risk register was provided.

13. Corporate Plan Update

PQ presented on the development process for the corporate plan and emergent thoughts to date from the Board, staff and key stakeholders. He explained the concept of the strategy map and the key components where HIQA sets out what it aims to achieve, the core activities for achieving its aims and the enabling objectives to successfully deliver its plan. The Board reviewed the draft and suggested that more emphasis be put on measuring and evaluating the impact of our work. It was agreed that measures of success will be included where appropriate in the final draft. It was also suggested that the Board's function of leadership and governance should be reflected.

PQ advised that although there has been engagement with key stakeholders over the summer months, consultation with the DOH has yet to take place. A meeting is scheduled with the DoH on 3 October and it is hoped that this important element of the consultation process will be concluded. PQ clarified the process for finalising the corporate plan for the benefit of new Board members and explained that there is a statutory deadline of 31 December 2018 that HIQA must meet. When the final draft of the corporate plan has been approved by the Board following public consultation, it will then be submitted to the Minister for approval.

14. Lessons Learned – i8 (Investigation into the management of allegations of child sexual abuse against adults of concern by Tusla)

Gillian Hastings (GH), who has responsibility for the co-ordination of statutory investigations, joined the meeting for this item. MD advised the Board that as part of the approach following each statutory investigation, that a review is undertaken to identify opportunities where the overall investigation process could be improved. This includes ascertaining the Board's views in terms of their engagement with the investigation process and the findings and recommendations as they were presented.

GH presented an overview of the investigation process and outlined that each phase of the investigation was considered including pre-initiation of the investigation, initiation, the approach, evidence gathering and triangulation, report development, due process and publication. For each of the phases, recommendations for improvement have been identified which were summarised for the Board.

A draft report of the review was included with the Board papers for the Board's observations. A discussion ensued and the following points arose:

- The length of time for conducting statutory investigation - it was clarified that the due process and validation exercises can be lengthy but are essential to ensuring that the final report can withstand scrutiny and challenge.
- Draft recommendations could be provided earlier to the Board
- Overall the Board felt that the investigation process was robust and that no significant changes should be made.

In addition, the Executive outlined that for future investigations, engagement with the service provider will be enhanced through the provision of a guidance document so that there is greater understanding on behalf of the provider of the investigation process and methodologies.

The Board thanked MD and GH for their presentation and observed that the review undertaken demonstrated the nature of HIQA's learning culture.

15. Strategic Items for Discussion

15.1 Office of the Chief Inspector – Legal Remit

Aoife McCann (AMcC) senior legal advisor joined the meeting for this item. She advised the Board that the judgement made by Justice Charles Meehan on the judicial review taken by the National Maternity Hospital of the Minister's decision to require HIQA to undertake an investigation into the death of Mrs Malek Thawley. The judgement was delivered on 6th September and a copy of the unapproved judgement had been circulated to the Board. AMcC summarised the judgement which essentially quashed the Minister's decision to require an investigation.

The Board discussed the judgement and queried if, as a Board, anything could have been done differently. The Executive acknowledged that there needs to be greater engagement with the DoH in advance of a request for an investigation being made. In that context, HIQA will develop a document setting out the justification for instigating an investigation which will be shared with the Minister and his department. AMcC left the meeting at this point.

15.2 Communications Strategy

Marty Whelan (MW) Head of Communications and Stakeholder Engagement and Clare O'Byrne (COB) Consultation and Engagement Coordinator joined the meeting for this item and presented on the development of a communications and stakeholder engagement strategy for 2019-2021 which will support the communications element of HIQA's new corporate plan, currently under development. They outlined the achievements of the communications division for the term of the previous corporate plan and their proposed objectives for the coming three years. The Board were invited to provide their views for the new Communications Strategy and the following points were made:

- The practical arrangements and procedures, including sign off of corporate communications should be clearly identified for managing HIQA's responses to its range of stakeholders

- The tone of HIQA's responses must always be in line with its values and the approach for ensuring this.

MW advised the Board that the final draft strategy and related publication/media engagement SOP will be brought back to the Board for approval later this year. COB and MW left the meeting at this point.

15.3 Hospital Consultants not on Specialist Register

Sean Egan (SE) Head of Healthcare joined the meeting for this item. SE provided the Board with an update since the July Board meeting on the issue of doctors who are employed as consultants by the HSE, although they are not specialist registered with the Medical Council. Following this issue being brought to the HIQA Board, it was escalated to the Director General of the HSE who responded with a commitment to a range of actions. Further detail regarding timelines for the actions was provided by the Director of National Doctors Training and Planning Office in the HSE. There was a detailed discussion which included wider ranging factors such as the protection of the term consultant under legislation, revalidation of competence and continued ability to meet professional standards.

Following discussion, it was agreed that the Executive should write to the DoH to bring the matter to their attention. The Executive will also write to the HSE acknowledging their plan to address the issue and outlining HIQA's plans to monitor compliance with their plans as part of ongoing inspection and review activity.

15.4 Information/Concerns Management

This item was discussed under the CEO's report (item 10 on the agenda). A report by MD, Chief Inspector and Director of Regulation, on the management of information was included with the Board papers which outlines the types of information received by HIQA and the processes for managing this information. In addition, MD advised that there are areas which need enhancement which includes establishing an appropriate IT system, data sharing agreements with relevant organisations and developing IT functionality to facilitate the extraction of business intelligence. As this work progresses, further updates will be provided to the Board.

16. Maternity Early Warning Score Guidelines

It was agreed that the presentation on these guidelines be deferred until the next meeting of the Board.

17. Chairperson's Report

(no report)

18. Board Committees report

The report from the Board Committees was noted.

19. Any other Business

KL advised the Board that Board and Committee evaluations will commence during October 2018.

MS wished to raise the impact of Brexit on HIQA and its operations. MR advised that the area of HTA is likely to be the area most impacted within HIQA and explained that the UK is a prominent participant in EU HTA work. In that context a Memorandum of Understanding will need to be developed for working with England, Scotland and Wales to replace the current EUNetHTA arrangements. Other areas that are relevant in the wider health sector pertain to mutual arrangements for recognising healthcare qualifications and the provision of healthcare services to Irish patients in UK jurisdictions where the HSE reimburses the patient for the costs incurred. The Executive will update the Board if any further implications arise from discussions with the DoH and other policy makers.

There being no further business the meeting was closed.

Signed


Chair

Paula Kilbane
Acting Chairperson for Board
Meeting 19 September 2018



Kathleen Lombard
Board Secretary

Actions arising from the Board meeting on 19th September 2018

No	Action	Person Responsible	Timeframe
1	Letter of appreciation to issue to BON	KL	immediate
2	Amend Policy for Board only sessions to reflect that the Chairperson, having consulted with the Board, will determine who remains in the meeting.	KL	immediate
3	the governance and reporting relationship with the DoH should be included on matters for the attention of the new Chairperson.	KL/PQ	When appointment is made
4	a) Emphasis on measuring and evaluating the impact of our work to be included in the corporate plan. Include measures of success where appropriate in the final draft. b) The Board's function of leadership and governance to be reflected.	PQ	September/ October draft
5	a) Write to DoH, as the governing body for the HSE, to bring their attention to the matter of consultants not being registered with the Medical Council. b) write to the HSE acknowledging their plan to address the issue.	PQ/MD	Immediate
6	Include in the communications strategy a) practical arrangements and procedures, including sign off of corporate communications for managing HIQA's responses to its range of stakeholders b) HIQA's approach for ensuring that its responses are aligned with its values	PQ/MW	November Board meeting
7	presentation to the Board on the CICER project	MR/MON	November
8	Updates will be provided to the Board on enhancements to the development of better intelligence systems, including establishment of appropriate IT functionality and system and data sharing agreements with relevant organisations	MD	As arises

Carried forward Actions

No	Action	Person Responsible	Time-frame
1	Amend ToR for Resource Oversight Committee when Performance Delivery Arrangement (PDA) is finalised with the DoH	KL	PDA not yet finalised
2	- legal advice regarding the provision for having regard to HSE resources to be shared with DoH - the Chairperson and CEO to raise the matter with	PQ	Letter has issued. Advice

	<p>the Minister and his officials at their meeting in mid February 2018</p> <ul style="list-style-type: none">- 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.		<p>being considered by DoH advisors</p>
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Rata Mahay
04/12/18

