

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

20 November 2019, 10 am  
Smithfield, Dublin

**Present:**

<b>Name</b>	<b>Details</b>	<b>Initials</b>
Pat O'Mahony	Chairperson	POM
Paula Kilbane	Board Member	PK
Caroline Spillane	Board Member	CS
Stephen O'Flaherty	Board Member	SOF
Lynsey Perdisatt	Board Member	LP
Michael Rigby	Board Member	MJR
Tony McNamara	Board Member	TMcN
Martin Sisk	Board Member	MS
Jim Kiely	Board Member	JK

**In Attendance:**

Phelim Quinn	CEO	PQ
Kathleen Lombard	Board Secretary and Chief Risk Officer	KL
Kieran Moynihan	Observer (part of external evaluation)	KM

**Apologies:**

Enda Connolly	Board Member	EC
Molly Buckley	Board Member	MB

**1. Welcome and Quorum**

The Chairperson welcomed the members to the meeting and informed the Board that Mr Kieran Moynihan from Board Excellence would be present in an observational capacity for the duration of the meeting as part of the Board's external evaluation process.

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

A Board only session took place before the commencement of the formal business in line with the Code of Practice for the Governance of State Bodies.

## **2. Conflict of Interest**

MJR advised the Board that he has been appointed to a National Screening Advisory Committee which will provide independent advice on population based screening programmes. It was noted that this circumstance does not give rise to a conflict on any items on the agenda before the Board today but MJR will alert the Board should a conflict arise in the future.

## **3. Board minutes of 18 September**

The minutes of the meeting of 18 September 2019 were reviewed by the Board and it was agreed that they were an accurate record of the meeting. PK proposed approval of the minutes and SOF seconded the proposal; **accordingly it was resolved that the minutes of 18 September 2019 be approved by the Board.**

In the context of the minutes generally, it was queried if individual contributors should be named in Board minutes. While there was a broad view that the Board acts as a collective and therefore individual contributions would be contrary to this approach, KL agreed to research best practice and revert.

### **3.1 Formal note of email approval**

The email approval of the membership of the Board committees was formally noted for the minutes.

## **4. Review of Actions**

KL provided an update on all the actions arising from the meeting of 18 September. In the context of the action to seek the views of vulnerable children when standards for children being developed PQ advised that there will be discussions with a range of organisations, the outcome of which will be reported to the Board.

## **5. Matters arising**

It was agreed at the Board only session at the start of the meeting that HIQA's HR operating model would come to the Board for discussion at a future date.

## **6. Health and safety matters**

No incidences to report in relation to health and safety.

## **7. TAVI HTA (transcatheter aortic valve implantation) for approval**

Mairin Ryan (MR) Director of HTA and her team, Christopher Fawsitt (CF) HTA analyst, Kieran Walsh (KW) Health Services Researcher, Conor Teljeur (CJ) Chief Scientist and Patricia Harrington (PH) Head of Assessment joined the meeting at this point.

The draft HTA report was included with the Board papers, together with a statement of assurance that the process for undertaking the HTA that had been presented to the Board at the commencement of the project was followed.

CF presented on the HTA of transcatheter aortic valve implantation at low and immediate risk of surgical complications. In his presentation he outlined;

- the background to why the HTA was undertaken
- how aortic stenosis is currently treated
- the terms of reference and membership of the Expert Advisory Group
- the main findings arising from the HTA and
- a summary of the advice to be provided to the Minister.

In response to previous requests from the Board, an outline to assessing the impact of the HTA in the short, medium and long term was also provided which will be tracked as part of the HTA impact framework.

The Board raised a number of observations and questions including;

- organisational issues and the impact that introducing this procedure would have on existing activities
- the nature of complications that might arise
- the volume of procedures for maintaining competence
- the durability of the valve and other ethical issues.

In response to the Board, the Executive clarified that the HSE has a National TAVI plan with four sites and criteria for maintaining competence. It was explained that the procedure is less invasive, the throughput of patients is likely to be greater and the hospital stay will be shorter with the result that there will be efficiency gains for the HSE. In addition it was clarified that there is nothing additional or unique in respect of ethical issues relating to this procedure.

The Board commended the HTA team on the quality of work on this significant HTA.

MS proposed approval of the TAVI HTA (transcatheter aortic valve implantation) and JK seconded the proposal; **accordingly it was resolved that TAVI HTA be approved by the Board.**

## **8. HTA Strategy (to guide the development of HIQA's Evidence Synthesis functions) for approval**

MR reminded the Board that expansion to the scope of the HTA Directorate had been discussed at the Board's strategy day in October and it had been agreed that it was timely to develop a strategy in recognition of the expanded scope and the inclusion of evidence synthesis work to support National Clinical Guidelines and national health policies. MR had presented an outline of the objectives of the strategy at the October meeting and the final draft is before the Board for discussion and approval. The purpose of the strategy is;

- to build capacity and capability
- assure high quality outputs
- enhance the profile of HTA and
- guide further development in this area.

The Board made a number of observations including that social care should be included in the strategy and that consideration be given to future proofing the strategy.

In response, MR agreed that social care will be included in the Strategy and advised that there have been initial discussions with senior officials in the DoH on the use of HTA in social care. She also clarified that the European HTA network, of which HIQA is a member, focuses on what is coming down the track in terms of new therapies and techniques. In addition there was discussion on the accessing and use of primary care data in the UK and Ireland for the purposes of evidence synthesis.

The Board welcomed the strategy as a forward thinking and integrated initiative. It was noted that the implementation of the HTA will be tracked as part of the HTA impact framework.

JK proposed approval of the HTA strategy and TMcN seconded the proposal; **accordingly it was resolved that the HTA strategy be approved by the Board.**

#### **14. Evidence Review of Specialist Cardiac Services - CICER (for information)**

Item 14 on the agenda was taken at this point and KW presented on the Evidence review of specialist cardiac services. He explained to the Board that the DoH requested HIQA to undertake an evidence synthesis in 2018 to inform the work of a national review of specialist cardiac services. He outlined the key findings which looked at the following areas;

- models of specialist cardiac networks
- international best practice for the configuration of centres providing percutaneous coronary interventions (PCI)
- volume outcome relationship for PCI
- the safety and effectiveness of a pharmacoinvasive strategy compared with primary PCI

KW advised that the final report will be presented to the steering group and will be published early in the new-year. It was noted that the impact of this work will be tracked as part of the HTA impact framework.

The Board thanked KW for his presentation and acknowledged its significance for future cardiac services.

## **9. Corporate Performance Report**

Sean Angland (SA) Acting Head of Operations joined the meeting for this item. He advised the Board that 97 of the 107 objectives for 2019 will be met. Seven objectives are unlikely to be completed by the due date and three will not be completed due to external factors. It was noted that the report showed a very positive overview in terms of the 2019 objectives. It was also noted that a full, end of year report will be provided at the January Board meeting.

## **12. Finance report**

Item 12 was taken at this point in the meeting. SA provided an overview of HIQA's financial position as at the end of October and explained that there is an underspend against budget which is likely to increase nearer the year end. SA outlined the areas where underspends had emerged. The Board considered the report and while the underspend is not significant, they requested that there is greater focus and scrutiny of budgetary planning and expenditure during 2020.

SA advised that the finance team is small and while there has been very high compliance from the Comptroller and Auditor General's (C&AG) perspective, an additional resource is being sought for the team.

The Board complimented the finance team on the strong compliance shown in the recent C&AG report.

## **11. Risk report - Pilot**

KL advised that she had given a short presentation at the recent meeting of the ARGC on the main outcomes and actions from the Board risk workshop on 15 October. It had been proposed at the workshop that risks are filtered according to the forum at which they are being reviewed to facilitate the Board's focus on the most significant risks. In that context KL presented a proposed new risk report format which the ARGC recommended should come to the Board as a pilot.

The Board considered the report and agreed that it was much more succinct and provided a more direct focus on the highest rated risks than previous risk reports. It was suggested that changes in risk ratings are indicated on the one page summary in the report. It also noted that there will be a further session with the Board on risk management.

## **13. Chief Inspector's Report**

MD, Chief Inspector and Director of Regulation joined the meeting for this item. MD provided an overview of the issues relating to each of the areas within the Regulation Directorate:

- Older persons

MD reminded the Board that earlier in the year, a briefing was provided in respect of regulatory non-compliance of a number of designated centres for older people. She outlined the background where a statutory instrument and a capital plan were put in place to allow the centres adequate time to achieve compliance with the regulations. MD advised that the capital works envisaged under the capital plan will not be advanced sufficiently in some centres to meet the specific regulations relating to the premises, privacy and other areas but that significant improvements can be made to the quality of life of residents by reconfiguring the internal space and by reducing the number of residents. Therefore as Chief Inspector, MD has issued notices of proposal regarding the conditions of registration for these centres. She advised that if the HSE is not in agreement with a reduction in the number of beds in these centres it may appeal the Chief Inspector's position. It was noted that the Chief Inspector has a statutory duty to attach conditions to the registration of centres where centres are not in compliance with the regulations.

In response to the Board, MD clarified that the proposed approach would not involve displacing current residents.

The Board discussed the matter in detail and queried the current engagement on this issue with senior management in the HSE and the DoH. MD advised that there has been a high level of engagement with the DoH and PQ advised that there will be ongoing engagement with the HSE. The Board expressed their support for the Chief Inspector's actions and also emphasised the need to keep the DoH fully briefed.

- Disability

In relation to designated centres for disability, it is expected that the target for registration renewals will be met in 2019. In addition, another 126 new centres have been registered. Special measures have been put in place for two centres and HIQA are working with the HSE to advance these.

- Healthcare

All maternity services have been inspected during 2019 and a national overview report will be published. Individual inspection reports will also be published for each of the hospitals. MD advised the Board of the key findings arising from the inspections and their relevance to the maternity strategy.

In response to issues raised by the Board, MD advised that the individual maternity services have effective systems and processes in place to manage obstetric emergencies but that the smaller maternity units are evolving at different rates and not in an overall integrated way and it is difficult to see how services can be sustained without advancement at a national level.

In terms of concluding the review, PQ and MD will meet with the CEO of the HSE in the second week in December and have asked for an update on the maternity strategy implementation plan. This will be important in finalising the national report.

- Children's services

Work is progressing well in relation to the inspection of various children's services including statutory foster care, Oberstown detention school and special care units.

The Board thanked MD for her report and she left the meeting.

#### **14. CEO's Report**

PQ highlighted a number of matters from his CEO report including;

- a meeting with the CEO of Tusla where bilateral meetings were agreed to discuss risks in children's services
- attendance with the Director of Regulation at a European Regulatory Bodies Network, hosted by the Netherlands, which has opened opportunities for collaboration in research and other relevant areas
- a series of visits to maternity units to promote the national maternity experience survey
- securing a grant for a research project on using statutory notifications to improve quality and safety in social care settings
- the completion of the staff survey which will be presented to staff and
- a report on the stakeholders engaged with since the last Board meeting.

The Board noted the report. It was suggested that the Executive consider presenting the stakeholder engagement details differently by using a stakeholder heat map which would identify priorities in terms of engagement.

#### **15. Evidence Review of Specialist Cardiac Services - CICER**

Item 15 was taken with items 7 and 8 on the agenda.

#### **16. Guidance on Rights Based Care**

This item was deferred until January Board meeting.

#### **17. Review of Information Management Practices in National Health Data Collections**

This item was deferred until January Board meeting.

#### **18. Chairperson's report**

The Chairperson informed the Board that he had met with the Chair of Tusla and had a good discussion on several issues. He also advised that the Minister had agreed to launch the National Inpatient Experience Survey results and the National Adult Safeguarding standards.

The Board noted the Chair's report.

## **19. Board Committee Report**

### **The Chairs of the Committees reported the following**

- ARGC 12 November (Caroline Spillane, Chair)
  - The Internal Audit plan for 2020 was agreed.
  - A representative from the C&AG's office joined the meeting to discuss the findings from the audit of the 2018 annual accounts. The committee had a private session with the C&AG without members of the Executive and it was confirmed that there is a good relationship between HIQA and the C&AG and there were no issues of concern
  - Discussion on financial reporting and the budgeting process.

In addition, there was discussion on the appointment of an external member to the ARGC committee. In that context, it was noted at the board only session at the start of the meeting, CS advised the Board that earlier in the year, a process had been undertaken to identify and select an external member of the ARGC. Two individuals were deemed appointable and the first of these was appointed to the Committee. Since then, the appointed individual has been nominated by the Minister to take up a position on the HIQA Board from February 2020, leaving a vacancy from that date on the ARGC. The Board discussed whether a new process should be initiated or whether the second appointable individual identified through the initial process could be appointed. The Board agreed that the second appointable individual should be approached and appointed, if still interested, to the Committee.

Potential overlap of the terms of reference of the ARGC and the ROC had also been discussed at the ARGC meeting and raised at the Board only session. The Board agreed that the two committees should have a joint meeting to discuss this in detail and that the terms of reference are then revised to reflect any outcomes from the discussion, if required.

- Regulation Committee 14 October (Paula Kilbane, Chair)

PK advised the Board that there had been a comprehensive update on the implementation of the 2019 Business plan objectives and associated risks. The Committee had also been provided with an assurance report from the Chief Inspector and the Director of Regulation which outlined the controls that are in place for managing the functions within the Regulation Directorate.

- Resource Oversight Committee 26 September (Stephen O'Flaherty, Chair)

SOF reported that the Committee had discussed HIQA's budgeting approach and resource management, a status report on projects managed by the Project Management Office and the resource related risks.

The Board noted the Board Committee report.



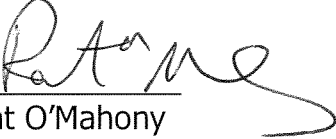
**20. Correspondence**

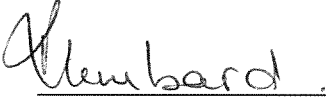
The Board noted the correspondence from the DoH regarding the 2020 Business plan.

**21. Any other business**

There being no further business, the meeting concluded.

**Signed**

  
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Pat O'Mahony  
Chairperson

  
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Kathleen Lombard  
Board Secretary

### Actions arising from the Board meeting on 20 November 2019

No	Action	Person Responsible	Timeframe
1	research best practice on recording individual contributors in Board minutes	KL	Jan 2020
2	report to the Board on the outcome of discussions with organisations on seeking the views of vulnerable children when standards for children being developed	PQ	when appropriate
3	HIQA's HR operating model to come to the Board	PQ/SA	When appropriate
4	social care to be included in HTA Strategy	MR	Jan 2020
5	greater focus and scrutiny of budgetary planning and expenditure during 2020	PQ/SA	ongoing
6	session with the Board on risk to be arranged	KL	March or May
7	stakeholder engagement report to be presented differently e.g. stakeholder heat map	PQ/COB	When appropriate
8	Appoint second appointable individual to the ARGC if still interested.	KL/CS	When appropriate
9	agreed that the two committees should have a joint meeting to discuss this in detail and that the terms of reference are then revised to reflect any outcomes from the discussion, if required.	KL + chairs	Jan 2020

### Carried forward Actions

No	Action	Person Responsible	Time-frame
	HIS directorate to liaise with CES to explore areas that may be beneficial		Meeting arranged between Director of HIS, CEO Tusla and CES. Meeting to be arranged with Slaintecare project office
	<ul style="list-style-type: none"> <li>- legal advice regarding the provision for having regard to HSE resources to be shared with DoH</li> <li>- the Chairperson and CEO to raise the matter with the Minister and his officials at their meeting in mid-February 2018 <i>(completed Feb 2018)</i></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 under consideration by DoH advisors. No further update as of 6 March 2019