

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

7 July 2021, 10am – 1.15 pm
Zoom Conference

Present:

Name	Details	Initials
Pat O'Mahony	Chairperson	POM
Jim Kiely	Board Member	JK
Bernadette Costello	Board Member	BC
Caroline Spillane	Board Member	CS
Lynsey Perdisatt	Board Member	LP
Michael Rigby	Board Member	MJR
Paula Kilbane	Board Member	PK
Tony McNamara	Board Member	TMcN
Marion Meany	Board Member	MM
Martin O'Halloran	Board Member	MOH

In Attendance:

Phelim Quinn	CEO	PQ
Kathleen Lombard	Board Secretary and Chief Risk Officer	KL

Apologies:

Danny McConnell	Board Member	DMcC
Martin Higgins	Board Member	MH

1. Welcome and Quorum

The Chairperson welcomed two new members, MM and MOH to the Board meeting and advised that the other 2 new members had given their apologies as they had long standing commitments which clashed with the date of this Board meeting.

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

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

During the Board only session, LP, Chair of the Resource Oversight Committee (ROC) reported to the Board the results of the CEO's mid-year performance review which had been carried out by her and the Chairperson of the Board. LP reported that each of

the objectives set for the CEO for 2021 was considered and a summary note of the performance against each was included with the papers for the meeting.

In summary, significant progress on the objectives had been made and the performance of the CEO was considered excellent. It was also observed that his work ethic and commitment remains steadfast as he approaches his final months as HIQA's CEO.

The ROC had received a report on the performance review at their meeting on 6th July and the committee had fully supported the outcome of the review. The Board unanimously agreed with the conclusions of the reviewers and acknowledged the strong performance of the CEO.

PQ joined the meeting at this point.

2. Conflict of Interest

No conflicts were declared on any matters on the agenda.

POM advised the Board that he has been appointed to the Expert Advisory Group on Rapid Testing established by the Minister.

PK advised that she has been appointed to the Board of the Health Products Regulatory Authority (HPRA).

While neither appointment is anticipated to present a conflict of interest, it was noted that should a conflict arise, both members will comply with the conflict procedure at that time.

MJR also declared that he is a member of the National Screening Advisory Committee (NSAC) but does not consider that he has a conflict in the HTA before the Board for approval.

3. Board minutes

3.1 Minutes of Board meeting of 12 May 2021

The minutes of the meeting of 12 May 2021 were reviewed by the Board and it was agreed that they were an accurate record of the meeting. CS proposed approval of the minutes and TMcN seconded the proposal; **accordingly it was resolved that the minutes of 12 May be approved by the Board.**

3.2 Minutes of Board meeting of 1 June 2021

The minutes of the meeting of 1 June 2021 were reviewed by the Board and it was agreed that they were an accurate record of the meeting. JK proposed approval of the minutes and PK seconded the proposal; **accordingly it was resolved that the minutes of 1 June 2021 be approved by the Board.**

4. Review of Actions

An update on the actions arising from previous Board meetings was provided and the following was noted:

- The senior post necessary to the revised organisational structure has not been approved. Following further discussion between the Chairperson and the CEO, a revised business case is being developed and will be submitted to the Department of Health (DoH)
- There has been good engagement with the DoH on the Patient Safety Bill and the implications of the proposed function for HIQA in investigating incidents
- No meeting has yet been scheduled to engage with the Secretary General of the DoH on the development of large providers of nursing home services
- In the context of the corporate planning process, there has been engagement with the Secretary General on the range of activities planned for HIQA's expanding role
- The recurrent action on the update of the Digital and Data Transformation Strategy (DDTS) work streams can be removed given the ongoing oversight arrangements in place at the ROC.

5. Matters arising

KL advised that following the approval of the Committee membership at the Board meeting on 1 June, a further change is proposed to reflect that PK will not serve on the Audit Risk and Governance committee (ARGC). The proposed revised membership of the ARGC was included in the pack for the Board's convenience. POM proposed the change to the membership of the ARGC and JK seconded the proposal; **accordingly it was resolved that the revised ARGC membership be approved by the Board.**

In the context of the ARGC oversight plan, it was considered at the ROC meeting of 6 July, that there are a wide range of initiatives on staff engagement that relate to the culture of the organisation. Given these initiatives, it was proposed by the ROC that the internal audit on culture, scheduled for late in 2021 be deferred to Quarter 1 2022. It was agreed at the ROC that a paper outlining the range of initiatives and the rationale for deferring this audit be prepared for the ARGC meeting in September.

Given the level of activity underway on staff engagement currently, the Board agreed that this approach was appropriate.

There were no other matters arising.

6. Health and safety matters

There were no reportable Health and Safety matters since the last Board meeting.

7. CEO's Report – key strategic and operational matters

Mary Dunnion (MD) Chief Inspector (CI) joined the meeting for this item as some items on the CEO's report are relevant to regulatory activities. PQ highlighted the following items from his report:

- COVID-19 response – Business Continuity Plan

In line with Government's public health measures, all staff with the exception of those staff whose presence is essential, continue to work from home.

- Culture/future working

In the context of initiatives on culture, a project on the design of future working in HIQA is underway involving a staff survey and focus groups. A proposal on future working arising from this work will be brought to the Board for consideration.

- Regulation of Health and Social Care

Discussions on a number of new functions have been progressing since the last Board meeting including:

- o The Patient Safety Bill – there has been good engagement with DoH officials on proposed amendments to the Bill in terms of reviewing individual incidents in nursing homes
- o Direct provision – HIQA has met with officials from the Department of Children, Equality, Disability, Integration and Youth (DoCEDIY) to discuss HIQA's proposed role as the interim inspection body for Direct Provision centres. It is anticipated that sanction for the business case submitted by HIQA for operationalising the function will be received in the near future.

For the benefit of new members, PQ explained that HIQA had been requested to undertake the inspection of Direct Provision centres as it was recognised that HIQA had the necessary competency. The DoH has agreed that it will be on an interim basis until a long term solution is put in place.

- o Regulatory and legislative reform

Communication on regulatory and legislative reform is continuing through the bi-lateral group and HIQA has been requested by the DoH to undertake an international review of nursing home regulatory models.

- E-Health position paper

A further meeting took place with the DoH on the position paper on the reform of the health information system and E-health landscape in Ireland. A number of suggested considerations were made for inclusion and it is planned to bring the final position paper to the SIRT committee for review and then the Board in September, after which there will be wider communications with relevant stakeholders.

- Cyber security

In the aftermath of the HSE ransom ware attack, HIQA expedited a number of planned initiatives to maximise cybersecurity arrangements. Detailed updates on cyber security

and the delivery of the DDTs were provided to the recent ARGC and ROC meetings (the associated papers are included in the Board pack for information).

- Evidence Synthesis (COVID-19)

The majority of work in the HTA Directorate remains focussed on COVID-19 which has been the case since March 2020 and further detail is included in the report. All functions of the Directorate have resumed since Quarter 1, although not as yet at full capacity.

- National Incident Management system (NIMS) Review

This review was discussed at the recent SIRT committee meeting and a paper has been developed and is on the agenda for the Board's consideration.

- National Standards for Home care support

A brief update is included in the report on the development, by the DoH of a statutory scheme for home care services and the preparatory work by the Standards team in advance of the finalisation of the scheme.

- National Standards for Children's social services

Following the consultation process on the National Standards for Children's social services, there has been a significant response from the foster care sector advocating for the Foster Care Standards 2003 to be retained in parallel with the new standards. Engagement with the DoCEDIY is ongoing on this and other issues.

- National In-Patient Experience Survey (NIPES)

The NIPES was suspended when the ransomware attack on the HSE occurred due to the impact on the systems within the HSE that are necessary to the survey.

- National Maternity Bereavement Experience Survey

Similar to the NIPES, the Maternity Bereavement Survey has been disrupted because of the cyber-attack on the HSE.

- The following surveys are on schedule:

- o The Nursing Home Experience Survey and
- o The National End of Life survey.

- Corporate Governance

- o The Annual Report for 2020 was published on 9 June
- o Significant engagement is underway with a wide range of stakeholders on HIQA's new corporate plan. The draft plan should be near completion by the end November 2021.

- Senior Executive positions

The executive search and recruitment programme for three senior executive posts is underway and the closing date for applications has passed. Dates are planned for key stages in the process.

- Organisational restructure

A full update was provided to the ROC on the work programme for the organisational restructure. A project examining the configuration and location of some activities will commence in September.

- Finance Improvement project

Work is continuing on the finance modernisation project and it is expected the draft report will be finalised and presented to the ARGC in September.

- Digital and data transformation strategy (DDTS)

An update on the delivery of this strategy was provided to the ROC at its meeting on 6 July and the associated paper is included in the Board papers.

- Memoranda of Understanding (MOUs)

A report on the management of MOU's and Joint Working Arrangements (JWAs) was presented to the ROC on 6 July and a list of these are included in the CEO report.

The Board observed that additional activities and roles such as the inspection of Direct Provision centres and providing the mechanism for the OPCAT function carry the risk of overextending and overwhelming the organisation.

It was noted that this risk is being monitored and careful planning in terms of timing and resources will be applied to all new activities.

The Board thanked PQ for a comprehensive report.

8. Chief Inspector (CI) and Director of Regulation report

MD referred the Board to the Chief Inspector's and Director of Regulation report and highlighted the following:

- The latest picture of Covid-19 infections in Nursing homes as represented by the Covid-19 dashboard shows a continued reduction in the numbers of notifications of cases of Covid-19. The situation continues to be monitored closely, particularly in light of the Delta Variant
- The ongoing changes in the nursing home sector whereby large international providers of social care services are buying small standalone centres. It is unclear at this point what impact this change in the ownership profile will have but the situation is being monitored closely and has been communicated to the DoH.
- Following discussion with the Board, it was agreed that the regulatory environment in other jurisdictions will be examined from this perspective and this research will be included in the research into international regulatory models for nursing homes which has been requested by the DoH.
- A large provider of disability services has advised the Chief Inspector that they will cease operations in September. The Chief Inspector has written to the DoH on this matter and the HSE is currently in discussions with the provider to ensure

a smooth plan to maintain the wellbeing of residents. The registration process will reflect the emerging situation.

- A disability centre was notified of a decision to cancel its registration in June. The decision of the Chief Inspector has not been appealed and the HSE will take over operations of the centre from the date of cancellation.
- An RTE Primetime programme, focusing on the factors that contributed to the Covid-19 outbreaks in Nursing homes and on the impact on the families of residents, will be aired in the near future.
- Work is continuing to support the implementation of the Nursing Home Expert Panel recommendations; a significant number of which require legislative changes. There is good engagement with the bi-lateral group established by the DoH to work on required changes.
- Research is progressing on homecare regulation; feedback is awaited from Sláintecare and the HSE which will be informed by the risks identified by focus groups.
- Legal activity including –
 - o a reduction in the number of beds in one centre to facilitate greater privacy for residents and
 - o a notice to cancel the registration of a centre.

The Board made a number of observations on the Chief Inspector's report as follows:

- if there is a potential for the HSE's records on outbreaks in the nursing home sector during Covid-19, to have been compromised as a result of the cyber attack
- recognition of the improved situation in nursing homes
- ensuring the focus on the needs of residents when the provider of disability services ceases operations in September and
- recognition that regulatory operations are still functioning at a high level, including staff training and research, despite the pressures of additional activities and demands relating to Covid-19.

MD confirmed that the Regulation Directorate has maintained its records of its operations in the context of its engagement on Covid-19. The Board thanked MD for her report and the ongoing work of her team. MD left the meeting at this point.

9. Report from Board Committees

Audit Risk and Governance Committee (ARGC)

The Chair of the ARGC, Caroline Spillane (CS), reported that the Committee had, at its meeting on 22 June;

- Reviewed the internal audit report on arrangements for managing agency staff. The HR manager had been present and confirmed that recommendations will be implemented as outlined
- Received an update on the implementation of recommendations from a previous internal audit report on protected disclosures where the procedures for managing disclosures from external parties had been revised

- Received a comprehensive update from the Information Division on cyber security and recent measures that were fast-tracked in the immediate aftermath of the cyber-attack on the HSE, for 24/7 cyber security monitoring and staff training. The related presentation is included in the meeting papers for the Board's information
- Received the finance report to the end of April where two items were highlighted; an emerging underspend and the treatment of the funding for the implementation of the Nursing Homes Expert Panel recommendations. Further detail is included in the Board finance paper on these issues
- Agreed by majority to appoint Mazars as HIQA's new internal audit provider following the implementation of the OGP framework process. BC, was nominated as the Committee's nominee to participate on the evaluation panel.

SIRT Committee

The Chair of the SIRT Committee, Michael Rigby (MJR), advised that the Committee met on 22 June and had discussed the following items:

- Update on discussions with the DoH in relation to future funding for the CICER work stream when the existing funding source expires in April 2022
- The HTA of Birth Cohort testing for Hepatitis C, which is on the agenda for the Board's approval
- The range of activities and outputs being delivered by the HTA Directorate. In this context, it was noted that because the functions carried out by the Directorate has expanded and evolved, the scheme of delegation will be revised to ensure that all activities are appropriately recorded and delegated. The revised scheme will be presented for Board approval at its September meeting
- The review of information management practices of the National Incident Management Systems (NIMS) and the need for a wider discussion with the Board on the wider context and anticipated developments. The Committee requested a short paper to inform that discussion which is on the meeting agenda for discussion
- The performance to date in 2021 of both Directorates is strong and any exceptions to the business plan were explained to the committee and
- The terms of reference for the committee were reviewed and revisions agreed; the revised ToR are before the Board for approval.

Resource Oversight Committee (ROC)

The Chair of the ROC, Lynsey Perdisatt (LP), reported that the Committee met on 6 July where the following items were discussed:

- The performance of the CEO for the first half of 2021 (reported during the Board only session)
- Update on the recruitment of the three senior positions, CEO, Chief Inspector (CI) and Director of Healthcare
- Update on the organisational structure developments, succession planning and trends in relation to agency staff numbers
- A briefing paper on HIQA's pension arrangements and

- A comprehensive presentation on progression of the Digital and Data Transformation Strategy (DDTS) – this is included in the Board papers for information. An overview of the current delivery status was provided, together with key issues and developments.

9.1 CEO mid-year review

This item was covered earlier in the meeting.

9.2 SIRT Committee terms of reference (ToR)

The terms of reference for the SIRT committee were reviewed in detail and it revisions agreed by the Committee.

MJR proposed approval of the revised ToR and CS seconded the proposal; **accordingly it was resolved that the revised terms of reference for the SIRT committee be approved by the Board.**

9.3 NIMS review report (for information) and cover note for discussion

Barbara Foley (BF) Health Information Manager – Quality joined the meeting for this item and explained that the review of the National Incident Management System was published at the end of May 2021. The report includes key findings such as the complexity of governance arrangements, the changing functionality of the system in the absence of a long term strategy, the need for clarity of roles and responsibilities at a national level, effective stakeholder engagement with users of the system and gaps in the oversight of data quality. BF outlined the recommendations included in the report to address these areas. BF also highlighted that the system is to be used as the reporting mechanism for the Patient Safety Bill, when enacted.

The Board made a number of observations on the issues presented including:

- o The findings are of concern, particularly given the prospect of the system being cited in legislation as the system through which service providers must report notifiable incidents to HIQA and the Mental Health Commission and
- o The issues regarding governance and quality of information systems have been identified in previous reports and there is a need to take a composite and proactive approach to the overall challenges that have been identified.

The Board agreed that this matter should be highlighted as a matter of urgency in a way that expands the discussion so that patient safety and health and social care improvement informs the national direction and therefore policy and practice.

It was noted that the E-Health paper could be further developed to bring prominence to the issue, given progress on the Patient Safety legislation and will be brought to the next meeting of the Board for discussion. PQ and POM agreed to discuss this matter further before the next Board meeting.

It was also noted that while reports of this kind don't usually come to the Board in advance of publication, this will be examined where issues of a strategic or legislative nature may be involved. The Executive will consider this further and revert.

The Chairperson thanked the Committee Chairs for their reports and for all the oversight work taking place to support the Board effectively.

10. Risk Report

KL presented on the additional functionality which the Vision risk system provides and explained the different stages of risk management including:

- inherent risk, before management controls are put in place
- residual risk which is rated having taken the management controls into account and
- the target risk, which, when actions are identified and implemented, aims to bring the risk within the risk appetite approved by the Board.

In addition, KL outlined that the system:

- enables risks to be broken into cause, event and effect which facilitates a more consistent and accurate way of identifying and recording the core risk
- provides for the assignation of ownership of risks, controls or actions
- generates more awareness of responsibility by alerting owners to review controls and actions which have passed their implementation date
- provides for the risk impact rating to be derived from the unique risk appetite and associated tolerances aligned to HIQA's risk categories and
- generates tailored reports for the relevant governance level of reporting.

Additional features relating to the tracking of internal audit recommendations, compliance with statutory requirements and assurance reporting are also being developed and will be presented when finalised.

It was noted that the system is an excellent tool that provides an integrated and effective governance tool for risk and performance management and key compliance activities.

11. Corporate Performance and Human Capital Reports

SA joined the meeting at this point.

KL presented the new corporate performance report generated by the Vision corporate performance system and referred the Board to the explanatory document to support the Board's first engagement with the report. KL outlined the key features including:

- the summary dashboard which gives the status of each objective at a glance
- the linking of each annual objective to a strategic objective
- the overall delivery status of each objective
- a short summary note on each objective explaining where relevant, the reason for any deviations from plan and

- a summary of the related measures underpinning each objective.

KL explained that the measures feature provides for increased management capability and insight as measures can be allocated to individual team members and where they are not achieved as planned, a change of approach is prompted.

The Board noted the performance report and the associated guidance document.

SA presented the human capital report to the Board which provided an overview of the number of staff, absence rates, unfilled sanctioned roles and roles for which sanction is being sought. In addition, the annualised turnover rate was reported and spend on learning and development activities. The Board requested that a comparator to industry/public sector norms regarding turnover, sick leave and other appropriate data be included in future reports.

12. Finance Report

SA presented the financial report for the period ending 30 April and noted that because of the timing of the ARGC and Board meetings, more up to date information has become available in the meantime which is included in a supplementary report. SA explained that the timing of meetings was discussed at the last meeting of the ARGC and it was agreed to reschedule the committee meetings to align more closely with the Board meetings.

SA referred the Board to the supplementary report which reflects the end of May financial results and provides further detail on the treatment of the funding allocated by the DoH for the implementation of the Nursing Home Expert Panel recommendations. SA explained that HIOA's budget for 2021 was constructed on the basis of the total funding provided by the DoH. Discussions are ongoing with the DoH in relation to this matter and to ensure that funding is integrated with baseline funding in future years.

In the context of the financial information available at the end of May, it is clear that the under spend has increased from the end of April figure due to underspends in pay, professional fees and ICT costs. SA advised that a full financial forecast is underway which will provide an accurate up to date base for financial management in the second half of 2021.

The Board thanked SA for his report. SA left the meeting.

13. HTA of Birth Cohort Testing for Hepatitis C

Mairin Ryan (MR) Director of HTA, together with the following members of her team who were involved in this HTA project joined the meeting for this item; Paul Carty (PC) Health Services Researcher, Conor Teljeur (CT) Chief Scientist and Patricia Harrington (PH) Deputy Director of HTA.

MR advised the Board that this HTA was carried out following approval of the HTA prioritisation plan, previously approved by the Board. The full HTA report of Birth Cohort Testing for Hepatitis C was provided, together with:

- The Process outline approved by the Board at the beginning of the HTA process and the Statement of Assurance confirming that the HTA was carried out in accordance with that process
- The Statement of Outcomes report on the results of the public consultation on the HTA and
- Relevant appendices associated with the report.

MJR, Chair of the SIRT committee, advised that the report was examined at the committee when it was highlighted that, because of the potential for confusion of this report with the work underway examining the expansion of newborn screening programmes, the communication around the report will need to be very clear. The committee also highlighted that it needed to be made clear at the time of publication, that those outside the cohort addressed by the report are not excluded from testing. This was accepted by the Executive.

MJR proposed approval of the HTA of Birth Cohort testing for Hepatitis C and TNcM seconded the proposal; **accordingly it was resolved that the HTA of Birth Cohort Testing for Hepatitis C be approved by the Board.**

14. HTA prioritisation process 2021 and work plan

MR presented the process for prioritising the selection of HTA projects, including the criteria for scoring topics and the Prioritisation Advisory Group's role. She explained that the prioritisation process informs the HTA work plan, which is in turn presented to the Board for approval. Having agreed the work plan, the relevant HTAs are included in the next year's Business plan.

The Board considered the work plan and MR clarified the following in response to the Board's queries and observations:

- Conducting a HTA on critical care reorganisation was not considered the most effective method or approach for this topic. It was noted that the rationale for not selecting a topic should also be included in future presentations
- Measurement of the clinical impact of a topic is applied at a high level within the prioritisation process
- MR chairs the Prioritisation Advisory Group and her key purpose is to hear the views of the other members and
- The analysis carried out by CT, Chief Scientist in 2020 on excess deaths during the Covid-19 outbreak will be updated in 2021.

JK proposed approval of the HTA work plan for the coming year and MJR seconded the proposal; **accordingly it was resolved that the HTA work plan for the coming year be approved by the Board.**

15. Papers presented at ROC and ARGC

The following presentations were brought to the attention of the Board:

- Update on Cyber security programme of work and related capital budget (presented at the ARGC on 13 April 2021)
- Update on progress on the Digital and Data Transformation Strategy (presented to ROC on 15 April 2021)
- Update on strategic HR initiatives (presented to ROC on 15 April 2021).

16. Chairperson's report

The Chairperson's report was noted.

17. Any other Business

There being no further business, the meeting was closed.

Signed



Pat O'Mahony
Chairperson



Kathleen Lombard
Board Secretary

Actions arising from Board meeting on 7 July 2021

No	Action	Person Responsible	Time-frame
1	a paper outlining the range of initiatives and the rationale for deferring the culture audit be prepared for the ARGC meeting in September	PQ/SA	September
2	A proposal on future working to be brought to the Board for consideration	PQ	September
3	Paper on E-Health for the SIRT committee and Board meeting to expand the discussion so that patient safety and health and social care improvement informs the national direction and therefore policy and practice.	RF	September
4	A report regarding the finance modernisation project will be presented to the ARGC	SA	September
5	A revised scheme relating to the HTA function and activities will be presented for Board Approval	MR	September
6	the rationale for not selecting a topic should also be included in future presentations on the HTA prioritisation process	MR	2022
7	National reports/reviews to be examined where issues of a strategic or legislative nature may be involved, to consider if they should come to the Board before approval	PQ	September
8	Future HR reports to include a comparator to industry/public sector norms regarding turnover, sick leave and other appropriate information lines	SA	September

Carried forward actions from previous meetings

No	Action	Person Responsible	Time-frame
1	Implications of function of investigating incidents (Patient Safety Bill) on HIQA to be considered further as part of strategic discussions	Corporate planning	Verbal update at 7/7/2021 BM – positive engagement reported
2	Meet with the Secretary General and the Minister to raise the significance of acquisition of nursing homes by large companies	PQ/POM	When meeting can be arranged
3	Regulation committee to maintain oversight of developments on OPCAT. A report will come back to the Board at the appropriate time.	JK/KL	When appropriate
4	A coordinated understanding and approach to diverse activities to be raised with the Secretary General of the DoH by CEO and Chairperson	PQ/POM	Corporate planning process has addressed this in part

On hold actions

1	Further develop elements of the paper on emergency department overcrowding revisit at the appropriate time	MD	On hold
2	CEO and Chairperson to meet with the HRB to explore what is being done in the area of technology research	POM/PQ	deferred
3	Explore securing a temporary resource to work on the AON standards. (Chairperson and CEO to raise the matter with the Secretary General of the DoH at their upcoming meeting)	PQ/ RF	Following the prioritisation process this item emerged as third, so will not be progressed in the near future – RF has discussed with Children's Ombudsman – may be revisited