

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

13 July 2022, 10am – 2pm
Board Room, Citygate, Cork

Present:

Name	Details	Initials
Pat O'Mahony	Chairperson	POM
Paula Kilbane	Board Member	PK
Marion Meany	Board Member	MM
Martin O'Halloran	Board Member	MOH
Danny McConnell	Board Member (virtual)	DMcC
Martin Higgins	Board Member	MH
Tony McNamara	Board Member	TMcN
Michael Rigby	Board Member	MJR
Jim Kiely	Board Member	JK
Bernadette Costello	Board Member	BC
Lynsey Perdisatt	Board Member (virtual)	LP

In Attendance:

Angela Fitzgerald	CEO	AF
Kathleen Lombard	Board Secretary and Chief Risk Officer	KL

Apologies:

Caroline Spillane	Board Member	CS
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1. Welcome and Quorum

The Chairperson welcomed Board members to the meeting and to LP and DMcC who joined via Zoom. A quorum was confirmed and the Board meeting was duly convened.

2. Conflict of Interest

Tony McNamara advised the Board of a potential conflict of interest regarding some work he is doing with a private company on a Proton Therapy service. He advised that if the service were to commence, it would be covered under the Ionising Radiation provisions and would then come under the remit of HIQA. The Board noted his

position and the Chairperson requested an update should circumstances change so that an actual conflict does not occur.

3. Minutes of Board meeting 18 May 2022

The minutes of the meeting of 18 May 2022 were reviewed by the Board and it was agreed that they were an accurate record of the meeting. MH proposed approval of the minutes and DMcC seconded the proposal; **accordingly it was resolved that the minutes of 18 May 2022 be approved by the Board.**

4. Review of Actions

KL advised that the majority of actions have been completed. A number of actions were marked for verbal update and AF updated the Board on these as follows:

- The issue of unaccompanied minors entering the country from Ukraine has been raised with the CEO of Tusla. Tusla is dealing with this matter.
- The Nursing Home Sectoral Analysis Report has been completed and relevant actions relating to findings have been included.

5. Matters arising

There were no matters arising.

6. Health and safety matters

There were no notifiable health and safety matters since the last Board meeting.

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

Carol Grogan (CG) Chief Inspector and Sean Egan (SE) Director of Healthcare joined the meeting for this item as some items on the CEO's report are relevant to regulatory and monitoring activities.

AF presented her CEO report and highlighted the following items:

- Blended Working
HIQA's interim Blended Working Model commenced on 13 June and feedback on the transition to date has been positive. The new arrangements will be kept under review to ensure it continues to meet HIQA's business needs.
- Prism Replacement Project
The Prism Replacement solution has been approved by DOH and the implementation phase of the project can now commence. The Internal Peer Review Forum will remain in place for the duration of the project. Revised governance arrangements have been put in place to ensure direct business ownership throughout implementation.

- Organisational restructure project

While this project had slowed somewhat, the pace has increased with the appointments of the new CEO and Head of HR. The project has renewed momentum and the following developments are underway:

 - o The as-is review will include the HTA and HIS Directorates to ensure that there is equivalent focus on these areas as part of the organisation-wide review
 - o A workshop with the Executive Management took place recently and a further workshop on HIQA's future capabilities is also planned
 - o A road map with recommendations for implementation will be prepared (Quarter 4) and
 - o It was agreed that an equivalent reporting arrangement to PRISM will be provided to the ROC.

- Healthcare Regulation
 - o The Patient Safety (Notifiable Patient Safety Incidents) Bill is progressing with a view to the legislation being enacted before year end. This legislation will see HIQA's remit extend to private services
 - o HIQA is working on an accreditation approach in respect of the Patient Safety (Licensing) Bill as part of the journey towards licensing. There will be engagement with key stakeholders and the Department of Health
 - o More clarity is expected on HIQA's role over the coming weeks as the drafting of the Heads of the Human Tissue Bill progresses
 - o The monitoring of International Protection Accommodation Services (IPAS - Direct Provision) is anticipated to commence in September 2022. It is envisaged that HIQA's role will be to monitor permanent IPAS services only, rather than short term emergency accommodation
 - o The new monitoring approach against the National Standards for Safer Better Healthcare was deployed in a risk based unannounced inspection of the Emergency Department at University Hospital Limerick. This has generated media and political attention. The HSE has advised that they will address the findings. HIQA will monitor progress on the implementation of these plans in line with its normal inspection processes.

- Regulation of Homecare

The DoH is currently conducting a public consultation on the draft Regulations for Home Care support. HIQA will respond and reiterate its position on the scope of the regulation.

- Regulatory Changes

Several amendments are being proposed by DoH to the Chief Inspector's role. These suggested changes are outlined in greater detail in the Chief Inspector's report.

- COVID 19 Advisory Group

A new Advisory Group has been appointed by the Minister for Health to advise on how best to maximise the medium to long term preparedness for COVID 19. The Director of HTA is a member of this group.

- Public Health Reform
The Minister for Health has established the Public Health Reform Advisory Group (PHREAG) to make recommendations on an operating model to optimise delivery of public health. The HTA team provided evidence synthesis support to inform the scope of the PHREAG. The HTA report examined structures and planned reforms internationally in relation to public health organisation and delivery.
- The HTA Directorate
 - o Work on the HTA of adding severe combined immunodeficiency to the national bloodspot screening programme has commenced. This work should be completed by November, at which point it will come to the SIRT committee and the Board
 - o The proposed model for the commencement of the generic justification of ionising radiation practices was presented to SIRT at its recent meeting and is on the Board agenda for approval.

The Board emphasised the need for a strong and independent chair of the Expert Advisory Group referred to in the model.
- Health Information and Standards Directorate (HIS)
 - o The Position paper on Health Information published in October 2021 was informed by evidence gathered from other countries. HIQA is now developing recommendations on a preferred model for the development of Health Information Standards in Ireland. The completion of this work will be timely in terms of policy and legislation developments
 - o The Director of Health Information and Standards is working with Tusla on a number of strategic issues including the Draft National Standards for Children’s Social Services
 - o A number of factors has impacted the National Nursing Home Experience Survey including a large number of outbreaks in nursing homes and changes in personnel
 - o Dr Barbara Foley has been nominated by the Department of Health to formally join the European Health Data Space, Work Package 6 on Excellence in Data Quality.

In response to the Board’s queries and observations on the CEO’s report, AF clarified that:

- The EMT is currently examining, with the Head of Legal, HIQA’s memoranda of Understanding with other organisations. This item will come to the Resource Oversight Committee (ROC) for further discussion.
- Official confirmation approving the Prism project and funding has been received, the preferred provider can be appointed and implementation can commence and
- Because of the need to ensure strong oversight, reporting on the Prism project will be via the ROC and the Audit Risk and Governance Committee (ARGC) for governance arrangements and financial aspects respectively.

In this context, BC proposed that the ROC and the ARGC have a joint meeting twice annually to ensure that all aspects of the project are considered as a whole. This was supported by the Chair of the ROC and the Chairperson. The Board were unanimous in their agreement with this proposal; **accordingly it was resolved by the Board that the ROC and the ARGC meet twice annually to ensure comprehensive oversight for the entirety of the Prism replacement project.**

The Chairperson also highlighted that any other member of the Board may also attend this joint meeting of the two committees.

The Board thanked AF for the comprehensive and informative report.

7.1 Implications arising from Ukraine crisis for HIQA

AF advised that, as requested at the Board meeting of 18 May, a further update on the implications for HIQA arising from the Ukraine crisis is included with the Board papers. The paper reflects on HIQA's various functions and what issues might arise. It was noted that there has been no indication that HIQA's role will be extended to monitoring the accommodation provided to those arriving from Ukraine.

AF also advised that risks relating to cyber-attacks are carefully monitored. HIQA has completed a tender for a 24 x 7 cyber security monitoring service, the approval for which is on the Board's agenda. As previously advised, AF has met with the Chief Executive of Tusla, on the matter of unaccompanied minors arriving from Ukraine.

8. Chief Inspector (CI) report

CG introduced her report and highlighted the following:

- In Designated Centres for Older Persons (DCOP)
 - o the numbers of inspections undertaken
 - o increased levels of COVID-19 infections
 - o regulations where highest rates of noncompliance are recorded and
 - o trends across the sector in terms of closures, applications to vary conditions and new registrations.

Arising from the CI report, the Board discussed the following items:

- o factors relating to the trend of smaller nursing homes closing
- o the increase in the number of step down facilities provided by private providers
- o the fourth booster programme is underway.

It was clarified that current government policy is that residents aged under 65 are not eligible for the vaccine. It was noted that booster vaccines for those over 60 will be recommended in the near future.

- o A baseline analysis of the number of younger residents in nursing homes will be explored this year. The Board suggested that if possible, the different age

groups should be stratified and some analysis of the financial costs should be included.

CG advised that a review of the Fair Deal scheme was undertaken in 2021.

Designated centres for people with a disability (DCD)

CG provided updates on

- the numbers of inspections undertaken
- levels of COVID-19 infections
- regulations where the highest rates of noncompliance is recorded and
- trends across the sector in terms of increased numbers of centres, increased number of applications to vary conditions of registration, interest from private providers and the development of respite services.

CG also highlighted the slow pace of transition from congregated settings.

Arising from the report, the Board queried the progress in relation to findings from the HIQA report on services provided in CHO area 1 and on the HSE response. CG advised that a number of inspections have been carried out in recent months to ensure that improvements continue and are sustained.

- Children's Services

- CG provided updates on

- the numbers of inspections undertaken
- overall positive level of compliance with the National Standards and Regulations was reported but some improvement areas were also identified
- An overview report on the inspection and regulation of children's services for 2021 has just being completed. For the first time, a child friendly version of the report has been produced.

CG also referred the Board to a number of other initiatives outlined in her report including:

- the levels of Information received to date in 2022 by the Information Handling Centre, the work of the Regulatory Business support and Regulatory Practice Development teams in delivering induction and training of inspectors
- as part of the Directorate's quality improvement programme, focussing on regulatory report writing
- a Reflective Practice event was held which was themed "Providing Value for Service Users".
- A brief overview of the proposed legislative changes to the Health Act and a new provision in the Patient Safety Bill were outlined to the Board.

The Board acknowledged the focus on training and quality improvement in the Directorate, notwithstanding the level of operational work and preparatory work that is underway.

The Board thanked CG for her report and CG and SE left the meeting at this point.

9. Report from Board Committees

Audit Risk and Governance Committee (ARGC)

BC, Chair of the ARGC, reported that at the meeting on:

- 28 June 2022 the Committee dealt with a large range of issues as outlined in the report to the Board. A number of these are on the Board's agenda for discussion or approval.

Resource Oversight Committee (ROC) 23 June 2022

LP, Chair of the ROC reported that a number of important matters had been discussed by the committee including Prism project governance arrangements, the organisational review and the terms of reference for the Committee. LP advised that updates on these were provided earlier in the meeting. In addition, LP advised that Susan Montgomery has been appointed as Head of HR.

Regulation Committee – 3 May 2022

JK, Chair of the Regulation Committee, advised that an update on the items discussed at the Regulation Committee have been provided via the CEO's and Chief Inspector's reports earlier in the meeting.

SIRT Committee - 22 February 2022

MJR, Chair of the SIRT committee reported that the Committee reviewed a number of items which are on the agenda for Board approval.

The Chairperson thanked the Chairs of the Committees for their reports and highlighted the effectiveness of the Committees in scrutinising the papers that are before the Board for approval.

10. Contracts for Board approval

SA joined the meeting for this item and advised that there are a number of contracts set out under section 5 of the paper included in the Board pack. These relate to procurements for:

- The fit out and development of HIQA's office in Galway
- ICT Research and Advisory services and
- Cyber Security Monitoring and supporting services.

SA referred the Board to Appendix 1 of the paper which sets out the values and duration of the contracts. He also referred the Board to Appendix 2 which lists contracts that are being extended. In response to a query from the Board, SA confirmed that provisions for these extensions are included in the contracts.

The Chairperson proposed approval of all three contracts with MH seconding approval for the fit out and development of HIQA's office in Galway, MOH seconding approval for ICT Research and Advisory services and MM seconding approval for Cyber security Monitoring and supporting services; **accordingly it was resolved the following contracts be approved by the Board**

- **The fit out and development of HIQA's office in Galway**
- **ICT Research and Advisory services and**
- **Cyber security Monitoring and supporting services.**

The Chairperson thanked SA and his team for the work involved in procuring the services.

11. Bank Mandate

SA advised the Board that Ulster Bank, which HIQA has used since its establishment is now leaving the Irish banking market. As a result HIQA is planning to move to Danske Bank as the winning banking provider on the Office of Government Procurement framework.

SA highlighted that this paper had been discussed by the ARGC at its recent meeting where a number of queries and suggestions were made. SA has reflected these in the paper before the Board.

The Board considered the Bank mandate and associated changes to transition and approval processes. It was agreed that further detail will be discussed at the next ARGC meeting.

SA left the meeting at this point.

12. Key considerations to inform policy for the collection use and sharing of Health and Social Care Information in Ireland

Barbara Foley (BF) Health Information manager - Quality joined the meeting and presented the report "Key Considerations to Inform Policy for the Collection Use and Sharing of Information in Ireland".

BF advised that this report was presented to the SIRT committee and a number of minor edits were made to the documents subsequently. BF explained that the report is the culmination of several pieces of work and is timely in order to inform the development of new health information specific legislation.

MJR, Chair of the SIRT committee highlighted the quality and significance of this report and its potential to influence the health information landscape.

MJR advised the Board that it is extremely important to ensure that this reaches the widest possible audience and had suggested to the Executive at the SIRT Committee that a concerted communications campaign be implemented to gain maximum understanding by public and professionals on the issues outlined in the document. As

part of this it would be useful to describe where Ireland is positioned internationally and the journey that Ireland needs to take to put appropriate arrangements in place. The Board endorsed this view.

BF confirmed that a communications plan is being considered by the HIS team in conjunction with the Communications team. She added that the HIS Directorate are currently planning a workshop with the Health Informatics Society of Ireland (HISI) and a plain English version with infographics is also being produced. The HIS team members have also been invited to a meeting with the DoH in early August on the Health Information Bill and this report will be highlighted at this forum also.

MJR proposed approval of the Key Considerations to Inform Policy for the Collection Use and Sharing of Health and Social Care Information and MOH seconded the proposal; **accordingly it was resolved that the Key Considerations to Inform Policy for the Collection Use and Sharing of Health and Social Care Information be approved by the Board.**

The Board thanked BF and congratulated the team on an excellent piece of work. BF left the meeting.

13. Report on HTA of Metabolic Surgery for the Treatment of Comorbid Type 2 diabetes and Obesity

Mairin Ryan (MR) Director of HTA, together with the following members of her team joined the meeting; Karen Jordan (KJ) Health Services Researcher in HTA, Patricia Harrington (PH) Deputy Director of HTA, Lydia O'Sullivan (LOS) Senior HTA Analyst, Kieran Walsh (KW) Senior HTA Analyst.

MR introduced KJ who led on this project. KJ outlined the process, the key findings of the report and the advices that will be provided to the Minister.

MJR, Chair of the SIRT Committee advised that at a recent meeting, the Committee considered the report in detail and were of the view that it is worth highlighting the benefits arising from its implementation and what needs to be in place so implementation is successful.

In addition, the Board recommended that the final submission has appropriate regard for current national policy on the delivery of secondary and tertiary services. MR confirmed that the Board's suggestions will be addressed.

MJR proposed approval of the Report on HTA of Metabolic Surgery for the Treatment of Comorbid Type 2 Diabetes and Obesity and MM seconded the proposal; **accordingly it was resolved that the HTA of Metabolic Surgery for the Treatment of Comorbid Type 2 Diabetes and Obesity be approved by the Board.**

The Board thanked KJ who was the project lead on this work and also the wider HTA team.

14. Revised HTA Topic Identification and prioritisation process policy

MR introduced KW who presented the revised HTA Topic Identification and prioritisation process policy.

KW explained that the HTA prioritisation policy was last reviewed in 2014 and following feedback from key stakeholders, reflections from the HTA team and an awareness of international developments in this area, the HTA team had revised the policy.

Key changes to the policy includes separating the policy from the Standing Operating Procedure, aligning terminology with international practice and clarification of request sources.

MJR, Chair of the SIRT committee advised that this policy had been reviewed by the committee and the committee were satisfied to recommend it to the Board for approval. MJR also highlighted that the Committee had raised the issue of stakeholders whose proposals for HTAs will not be accepted and the importance of ensuring that proposals of merit are accommodated where possible.

MR confirmed that the Directorate is aware of this and has introduced new criteria to manage the demand. In addition, the Directorate works with the topic proposers to help better define the scope.

MJR proposed approval of the HTA Topic Identification and prioritisation process policy and JK seconded the proposal; **accordingly it was resolved that the HTA Topic Identification and prioritisation process policy be approved by the Board.**

The Board thanked KW for his presentation. KW left the meeting.

15. Approach to new function of generic justification of ionising radiation practices (update) and Revised Scheme of approval of HTA Outputs

MR introduced Lydia O'Sullivan (LOS) Senior HTA Analyst to present on the planned approach to the new function of generic justification of ionising radiation practices.

LOS presented to the Board on the background, legislative basis and the planned approach for delivering this new function by the HTA Directorate.

MR advised that the planned approach will return to the Board for approval in Quarter 4. In addition, the Scheme of approval of HTA Directorate outputs has been updated to include the planned output from the Ionising Radiation function which is included as a separate paper for Board approval.

MJR, Chair of the SIRT committee advised that this item had been reviewed by the committee and the committee was satisfied to recommend it to the Board for approval.

The importance of the role and independence of the Chair of the Expert Advisory Group (EAG) was emphasised. MR confirmed the following checks and balances are established:

- The Expression of Interest for candidates to Chair the EAG was circulated widely and the recruitment process is underway
- Specific requirements include conflict of interest and confidentiality declarations
- Approval of generic justification reports will be made by the Director of HTA
- The members of the EAG are highly specialised with a strong background in radiology
- HIQA's legal team has provided advice on the process.

The Chair welcomed the board discussion on the matter and the importance of HIQA having measures in place to address potential conflicts of interest and to protect the integrity of HIQA's work.

MR acknowledged the importance and complexities of the new function and advised that the final approach will return to the Board in Quarter 4 for consideration and approval.

MH proposed approval of the revised scheme of outputs and MOH seconded the proposal; **accordingly it was resolved that the HTA scheme of outputs be approved by the Board.**

16. Internal Audit Charter

KL introduced the Internal Audit Charter and explained that this Charter requires review on a three yearly basis and Board approval. The Charter has been updated to align with the Audit and Risk terms of reference.

BC, Chair of the ARGC advised the Board that the Committee had reviewed the Internal Audit Charter and she was happy to propose its approval and MH seconded the proposal; **accordingly it was resolved that the Internal Audit Charter be approved by the Board.**

17. ARGC terms of reference (TOR)

KL presented the revised ToR for the ARGC and outlined the main changes. In this context she advised that in revising the ToR for this committee and the ROC, both Committee chairs had worked together to ensure that their respective roles were complementary in terms of oversight of key functions and that overlap was avoided.

BC, Chair of the ARGC advised the Board that the Committee had reviewed the revised ToR and she was happy to propose approval, MOH seconded the proposal; **accordingly it was resolved that the TOR for the ARGC be approved by the Board.**

18. ROC terms of reference

KL presented the revised ToR for the ROC and outlined the main changes. LP, Chair of the ROC confirmed that the Committee had reviewed the revised ToR and she was happy to propose approval and MH seconded the proposal; accordingly **it was resolved that the TOR for the ROC be approved by the Board.**

19. Procedure for Use of the Seal

KL advised that the Procedure for use of the Seal of the Authority has been updated in conjunction with HIQA's legal team. The Board reviewed the procedure and indicated their approval. MOH proposed approval of the Procedure for Use of the Seal of the Authority and TMcN seconded the proposal; accordingly **it was resolved that the Procedure for Use of the Seal be approved by the Board.**

20. Corporate Performance report

KL advised the Board that of HIQA's 110 objectives, 2 have not been achieved in line with the target date and 4 are unlikely at this point to be achieved by the target date. The rationale for these variances are included in the report. A plan to address the factors contributing to the delay has also been agreed. The remaining objectives are on target.

The Board noted the report.

18. Finance report

SA presented the finance report and advised that the report was considered in detail by the ARGC on 28 June. SA outlined the key points to note including a small underspend at the end of May. SA also advised that based on current review of expenditure year to date and the projections to year end, it is expected that we will deliver within budget by year end.

The Board considered the finance report and noted it.

SA left the meeting.

19. Corporate Risk review

KL advised that the changes to the corporate risks are set out in the cover page to the risk register and there have been no new significant risks arising. The Board noted the report.

20. Chairperson's report

The Chairpersons report was noted.

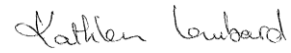
21. Any other Business

The Chairperson thanked everyone for their contributions during the meeting. There being no further business, the meeting was closed.

Signed



Pat O'Mahony
Chairperson



Kathleen Lombard
Board Secretary

Actions arising from Board meeting on 13 July 2022

No	Action	Person Responsible	Time-frame
1	Review of MOU arrangements will come to the ROC for further discussion.	AF/Head of Legal	Sept
2	ROC and the ARGC to meet twice annually to ensure that all aspects of the project are considered as a whole.	KL	To be scheduled
3	Consideration to be given to stratifying different age groups as part of the analysis of the number of younger residents in nursing homes. Consider also including some analysis of the financial costs	CG	In line with project timing
4	Bank mandate to be discussed at the next ARGC meeting	SA/KL/BC	Sept
5	Executive to consider a concerted communications campaign on the key considerations document to gain maximum understanding by public and professionals on the issues outlined	RF/MW	In line with publication timeline
Actions carried forward from previous meetings			
1	Executive to consider appropriate mechanisms to create awareness and discussion on nursing home policy	AF	June 2022
2	Liaise with the National Protection Surveillance Centre on guidance for Nursing homes on visiting and intake of new residents	CG	July Board
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	Implications of Ukraine crisis to remain as a standing agenda item with a short paper updating on developments provided at each Board meeting.	POM	Ongoing

On hold actions

1	CEO and Chairperson to meet with the HRB to explore what is being done in the area of technology research	POM/PQ	deferred
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