

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

19 March 2025, 10am – 2pm
HIQA Cork and MS Teams

Present:

Name	Details	Initials
Pat O'Mahony	Chairperson	POM
Bernadette Costello	Board Member	BC
Caroline Spillane	Board Member	CS
Clíodhna Foley-Nolan	Board Member	CFN
James Kiely*	Board Member	JK
Leonie Clarke*	Board Member	LC
Marion Meany	Board Member	MM
Martin Higgins	Board Member	MH
Martin O'Halloran	Board Member	MOH
Paula Kilbane	Board Member	PK

In Attendance:

Name	Details	Initials
Angela Fitzgerald	Chief Executive Officer	AF
Sean Egan*	Director of Healthcare Regulation	SE
Sean Angland*	Acting Chief Operations Officer	SA
Bala Krishnan*	Chief Information Officer	BK
Susan Montgomery*	Head of Human Resources and Organisation Development	SM
Susan Cliffe*	Deputy Chief Inspector Social Services	SC
Pat Millar*	Clarion Consulting	PM
Ronan Foley*	Clarion Consulting	RF
Máirín Ryan*	Director of Health Technology Assessment	MR
Karen Egan	Board Secretary	KE
Sean Lynch	Corporate Reporting Officer	SL

*Joined for part of the meeting

Apologies:

Name	Details	Initials
Daniel McConnell	Board Member	DMC
Lynsey Perdisatt	Board Member	LP

1.0 Quorum

The Chairperson welcomed Board members to the meeting. A quorum was present and the meeting was duly convened.

2.0 Conflict of Interest

No conflicts of interest were declared.

3.0 Board Minutes – 29 January 2025 and 13 February 2025

The minutes of the meeting of 29 January 2025 were reviewed by the Board and it was agreed that they were an accurate record of the meeting. POM proposed approval of the minutes and BC seconded the proposal; **accordingly, it was resolved that the minutes of 29 January 2025 be approved by the Board.**

The minutes of the meeting of 13 February 2025 were reviewed by the Board and it was agreed that they were an accurate record of the meeting. MOH proposed approval of the minutes and MM seconded the proposal; **accordingly, it was resolved that the minutes of 13 February 2025 be approved by the Board.**

4.0 Matters Arising

There were no matters arising.

5.0 Review of Actions

KE referred the Board to the paper on actions arising from the previous meeting and advised that a number of actions are in progress as indicated.

6.0 Emerging Issues and Risks

No emerging issues or risks were brought to the Board for discussion.

7.0 Health and Safety Matters

Sean Angland (SA), Acting Chief Operations Officer, joined the meeting at this point.

SA advised the Board that two reportable Health and Safety incidents had occurred and both of these were included in the Health and Safety report which would be presented later in the meeting. Both incidents had been reported to the Health and Safety Authority (HSA).

8.0 DER project update

[Redacted]

9.0 Board Committee Report

Standards, Information, Research and Technology Committee (SIRT) – 4 March 25

Mairin Ryan (MR), Director of Health Technology Assessment, joined the meeting at this point.

PK, on behalf of JK, advised that the main items reviewed at the last SIRT meeting were as follows:

- NIAC Governance Assurance arrangements were reviewed and recommended for approval by the Board.
- The updated HTA QAF was reviewed and recommended for approval by the Board.
- Economic Evaluation and Budget Impact Analysis Guidelines were reviewed and recommended for approval by the Board.
- The NCEP QAF was reviewed and recommended for approval by the Board.
- An update on the Mid West Review was provided.
- An update on the IR Function was reviewed and recommended for circulation to the Board for information.
- An update on Corporate Performance and Risks in HTA and HIS Directorates was provided to the Committee.
- The SIRT 2025 Work Plan was reviewed by the Committee.

PK commended the Executive for the exemplary way in which the transfer of NIAC had been managed.

MR left the meeting at this point.

Regulation Committee – 6 March 2025

MOH, Chair of the Regulation Committee, advised that the Committee had reviewed the following items in detail the 6 March 2025 meeting:

- A Report from the Chief Inspector.
- A Report from the Director of Healthcare Regulation, including an update on the Mid-West Review, the Networks and Integration Security Directive (NIS-2), the CHI review and IPAS.
- An update on Corporate Performance and Risks in Regulation Healthcare and Social Services was provided to the Committee.
- The Regulation Committee 2025 work plan was reviewed by the Committee.

Audit, Risk and Governance Committee (ARGC) – 11 March 2025

BC, Chair of the Audit, Risk and Governance Committee reported that the following items were reviewed in detail at the ARGC meeting on 11 March 2025:

- The ARGC Annual Assurance report to the Board was reviewed by the Committee and recommended for approval by the Board.
- The 2024 Statement of Internal Control Review report was reviewed by the Committee and recommended for approval by the Board, and the finding of substantial assurance was noted.
- Terms of Reference for the Strategic Implementation review and the IT User Access review were reviewed by the Committee and approved.
- The Internal Auditors provided an update on the Global Internal Audit Standards and the HIQA IA charter.
- The Committee reviewed the Annual IA Function Report 2024 from Forvis Mazars.
- An update on the IA Function Procurement was provided.
- A verbal update on Finances was provided as the budget had only been approved. The significant uplift in funding (almost 20%) was noted
- An update on DER Finances was noted by the Committee.
- The Corporate Procurement Plan was reviewed by the Committee and recommended for approval by the Board.
- The Anti-Fraud and Anti-Corruption Policy and SOP were reviewed by the Committee and recommended for approval by the Board.
- An update on risk was provided by the Head of Quality, Risk and Compliance.
- An update on Risk Management and Internal Audit Recommendations in the Healthcare & Legal Directorates were presented by the Director of Healthcare Regulation and the Head of Legal Services.

Resource Oversight Committee (ROC) – 13 March 2025

POM, on behalf of LP, advised that the Committee had reviewed a range of topics at its recent meeting, including the following items:

- An update on DER, including finances and risks was provided.
- An update on Human Capital, Talent Management, and the People and Culture Strategy were presented.
- The Communications and Stakeholder Engagement Strategy 2025-2027 was reviewed and recommended to the Board for approval.
- The Digital and Data Strategy was reviewed and recommended to the Board for approval.
- Annual confirmation of SIPO declarations by Board members and Staff members was provided to the Committee.
- The ROC 2025 Work Plan was reviewed by the Committee.
- Updates on Corporate Performance and Risk Management in the HR, ID, and Communications Directorates were presented.

POM thanked Board members and the Executive for their extensive work at the Committees.

10.0 CEO's Report

Mairin Ryan (MR), Director of Health Technology Assessment, Susan Cliffe (SC), Deputy Chief Inspector and Sean Egan (SE), Director of Healthcare joined the meeting at this point.

AF highlighted the following from her report:

Quality, Risk and Compliance

- Preparations for 2025 ISO Quality Assurance Surveillance Audit are underway and the Quality Risk Compliance (QRC) team has started work on the QRC Strategy for 2026-2028. The team is also developing a new three-year Charter and Action Plan for 2025-2027.

Strategic HR Issues

- Significant progress has been made in implementing the Strategic Workforce Plan. Sixty-three roles were identified and included in the submission to the Department of Health in 2024. Recruitment and selection activity continues at pace in anticipation of final sanction confirmation. Panels of suitable candidates are being created and maintained where relevant.
- CEO, HR and Finance remain actively engaged with Department of Health officials to ensure resourcing requirements are being met in a timely manner and in line with HIQA's 2025 funding allocation.

Healthcare Regulation — Strategic Developments

- The Patient Safety (Open Disclosure and Notifiable Incidents) Act commenced on 26 September 2024. The system for the receipt of notifications pertaining to the Notifiable Incidents is in place, with 58 notifications received to date. Three pilot inspections of private hospitals have been carried out to support overall preparedness and engagement by the sector to the new regulatory framework.

The Networks and Integration Security Directive (NIS-2)

- HIQA continues to engage with the Department of Health, the Department of Environment, Climate Action and Communication and the National Cybersecurity Centre to address remaining issues to the satisfaction of HIQA's Board. Engagement with Board will continue as these matters are progressed.

Monitoring of International Protection Accommodation Services

- In 2024, all eligible IPAS centres were inspected at least once by HIQA. In 2025, each centre will be inspected to monitor progress since their last inspection.
- Findings from HIQA's first year of inspection were highlighted through publication of an overview report on 5 March 2025.
- The findings indicate that there have been improvements in terms of stronger internal systems and structures relating to governance and risk management.

Critical Entities Resilience Directive

- HIQA became a Competent Authority under the CER Directive in late 2024.

- Engagement with the Department of Defence has occurred since the last Board meeting to determine specific requirements and priorities for this role over the coming months.
- Allocation of required human resources for this function has yet to receive sanction.

Health Technology Assessment

- CICER was awarded a HRB Knowledge Translation Grant to support its communication and training activities.

Health Information and Standards

- The NCEP Strategy (2025–2027) was signed off by the NCEP Steering Committee in February 2025. Work is ongoing on the NCEP Funding Model and additional governance structures to provide oversight.
- Each region has organised a site visit and presentation to showcase the improvements as a result of the National Inpatient Experience Survey 2024 (NIES). These site visits are taking place during February and March and HIQA CEO and NCEP team will be in attendance.
- The National Maternity Experience Survey 2025 (NMES) is currently live, with promotional material in place in maternity units and hospitals to regarding the national survey.
- A follow-up meeting with the DoH and HSE took place in February 2025 to agree the project outline for the development of the national framework for the responsible and safe use of AI in health and social care.

Information Division Update

- The development of the Digital and Data Strategy for 2025-2027 is well advanced and the Strategy will be soon be brought to the Board for its review and approval.

In response to a query from the Board in relation to the Government's Evaluation of the Response to the Covid-19 Pandemic, AF advised that a request for submission had been received and a response had been provided to the relevant Departments using the standard template provided.

The Board thanked AF for her comprehensive report and asked that an update on the Covid-19 Evaluation be provided in future CEO reports.

10.1 Mid-West Review

JK joined the meeting at this point.

MR provided an update on the Mid-West Review and highlighted the following:

- The Mid-West Review is working with the agreed timelines, with the aim of publishing the report in May 2025. External dependencies include the completion by the ESRI of the regional demand and capacity review to enable timely consideration by HIQA in framing its advices.

- An interim briefing was provided to the Minister in February 2025 in accordance with the terms of reference of the review.
- Staff from other areas of the Health Technology Assessment team have been reassigned to support the Mid-West Review and there has been a notable displacement effect resulting from the taking on additional unplanned work during the year.

MR and SE left the meeting at this point. LC re-joined the meeting.

11.0 Chief Inspector's Report

Susan Cliffe (SC), Deputy Chief Inspector, provided an update on the Chief Inspector's activities and highlighted the following from the report:

Older Persons team

- As of 18 February 2025, there were 548 designated centres for older people, providing 32,365 registered places.
- Between 01 January and 18 February 2025, the older person's team completed 111 inspections of designated centres for older people (184 inspection days) and published 97 inspection reports.
- On 31 March 2025, a number of amendments to the Health Act 2007 (Care and Welfare of Residents in Designated Centres for Older People) Regulations will be commenced. Webinars are being held with registered providers and staff to inform them of the changes.
- The Chief Inspector Designate and the Deputy Chief Inspector met with the Minister of State Kieran O'Donnell on 27 February 2025.

Disability Team

- Since 1 January 2025, six additional centres have been registered and five centres have been closed. There are currently 1,656 designated centres with 9,231 residential places.
- The Department of Health has sanctioned the appointment of additional staff to the Disability Team. The resourcing issue will continue to impact on the capacity of the Disability Team while the new staff are going through induction and training, but this should improve by the second half of the year.
- In relation to escalation, SC advised that there had been engagement with one provider resulting in a governance improvement plan being developed for that provider and there would be a monthly update meeting to monitor implementation.

Children's Team

- Up to and including 20 February the Children's team have carried out 7 inspections. This included five inspections of children's residential centres, one child protection and welfare inspection relating to the separated children seeking international protection service, and one foster care service.
- The Children's Team has developed a focussed safeguarding programme for children's residential services.

Court Proceedings

SC provided an overview of legal actions currently underway, including criminal prosecutions and appeals.

The Board thanked SC for her comprehensive report. SC left the meeting at this point.

12.0 CHI Update

SE provided an update on the Children's Health Ireland (CHI) review and advised the following:

- In line with the statutory requirements for such reviews, the final draft report had been issued to the service provider and the HSE for their final review and feedback before the finalisation of the report for publication.
- Assurance regarding how the QAF was complied with on the CHI review will be presented to the Board once due process for the review has concluded.

The Board noted that it may be necessary to call an additional Board meeting at short notice for the purpose of receiving the Executive's formal assurance report that the review was conducted fully in accordance with HIQA's how the QAF for such reviews.

13.0 Finance Report

SA re-joined the meeting at this point.

SA provided a verbal update on finances and advised the following:

- HIQA had recently received notification of its 2025 financial allocation from the Department of Health. The allocation shows approximately a 20% increase in the grant funding available to HIQA which will support the range of new activities being undertaken by the organisation.
- The 2025 Budget can now be finalised and presented at the next ARGC and Board meetings for approval.

The Board welcomed the increased grant allocation for 2025.

14.0 Health and Safety Annual Report 2024

The Board noted the paper previously circulated and the detail provided.

SA advised that the report provided assurance to the Board regarding HIQA's Health and Safety performance in 2024.

15.0 Business Plan 2025

SA introduced the Business Plan 2025 and advised the following:

- The 2025 Plan aligns with the new Corporate Plan for 2025-2027 and the specific requirements set down by DOH.
- Extensive detail is provided on HIQA's Business Plan Objectives which will be reported on through performance reports to each Committee meeting and twice-yearly to the Board.

The Board congratulated the Executive on the preparation of the Business Plan which was clear and accessible.

AF acknowledged the work of SA and SL in developing in the Business Plan.

POM proposed the approval of the Business Plan 2025 and MH seconded the proposal; **accordingly, it was unanimously resolved that the Business Plan 2025 be approved by the Board.**

SA left the meeting at this point.

16.0 Corporate Procurement Plan 2025

The Board noted the Corporate Procurement Plan 2025 previously circulated. BC advised that the Plan had been reviewed at the recent ARGC meeting.

POM proposed the approval of the Corporate Procurement Plan 2025 and MM seconded the proposal; **accordingly, it was resolved that the Corporate Procurement Plan 2025 be approved by the Board.**

17.0 ARGC Annual Assurance Report to the Board and System of Internal Control (SIC) Report 2024

The Board noted the papers previously circulated. BC advised that the ARGC Annual Assurance Report to the Board and System of Internal Control Report had been reviewed and at the recent ARGC meeting and recommended for Board approval.

BC proposed the approval of the ARGC Annual Assurance Report to the Board and System of Internal Control Report 2024 and MH seconded the proposal; **accordingly, it was unanimously resolved that the ARGC Annual Assurance Report to the Board and System of Internal Control Report 2024 be approved by the Board.**

18.0 Anti-Fraud and Anti-Corruption Policy, SOP and Incident Report Form

The Board noted the papers previously circulated. BC advised that the Anti-Fraud and Anti-Corruption Policy, SOP and Incident Report Form had been reviewed at the recent ARGC meeting and recommended for Board approval.

PK proposed the approval of the updated Anti-Fraud and Anti-Corruption Policy, SOP and Incident Report Form and CFN seconded the proposal; **accordingly, it was unanimously resolved that the updated Anti-Fraud and Anti-Corruption Policy, SOP and Incident Report Form be approved by the Board.**

19.0 NIAC – Governance and Quality Assurance arrangements

The Board noted the papers previously circulated. PK advised that the NIAC Governance and Quality Assurance arrangements for the National Immunisation Technical Advisory Group as a HIQA function had been reviewed at the recent SIRT meeting and recommended for Board approval.

PK proposed the approval of the Governance and Quality Assurance arrangements for the National Immunisation Technical Advisory Group as a HIQA function and MM seconded the proposal; **accordingly, it was unanimously resolved that the Governance and Quality Assurance arrangements for the National Immunisation Technical Advisory Group as a HIQA function be approved by the Board.**

20.0 HTA QAF update

The Board noted the papers previously circulated. PK advised that the HTA QAF update had been reviewed and at the recent SIRT meeting and recommended for Board approval.

PK proposed the approval of the updates to the HTA Quality Assurance Framework and POM seconded the proposal; **accordingly, it was unanimously resolved that the updates to the HTA Quality Assurance Framework be approved by the Board.**

21.0 Economic Evaluation and Budget Impact Analysis Guidelines

The Board noted the papers previously circulated. PK advised that the updated national guidelines for conducting economic evaluation and budget impact analysis in health technology assessments had been reviewed and at the recent SIRT meeting and recommended for Board approval.

MM proposed the approval of the updated national guidelines for conducting economic evaluation and budget impact analysis in health technology assessments and MOH seconded the proposal; **accordingly, it was unanimously resolved that the updated national guidelines for conducting economic evaluation and budget impact analysis in health technology assessments be approved by the Board.**

22.0 NCEP QAF

The Board noted the papers previously circulated. PK advised that the National Care Experience Programme Quality Assurance Framework had been reviewed and at the recent SIRT meeting and recommended for Board approval.

MOH proposed the approval of the updated Quality Assurance Framework for the National Care Experience Programme and MM seconded the proposal; **accordingly, it was unanimously resolved that the updated Quality Assurance Framework for the National Care Experience Programme be approved by the Board.**

23.0 Human Capital Report

The Board noted the paper previously circulated.

24.0 Lobbying Register update

KE advised that HIQA became a prescribed body under the Regulation of Lobbying Act 2015 on 1 January 2025. She provided an update on the measures being taken to support compliance with the statutory requirements under the Act.

The Board requested that a paper be brought to the next ARGC meeting for further discussion.

25.0 Annual confirmation of SIPO 2024 declarations

The Board noted the confirmation of SIPO 2024 declarations by Board members and staff reviewed and that these had been reviewed by the Chair and CEO respectively.

26.0 IR Function update 2024

The Board noted the papers previously circulated.

27.0 Chairperson's Report

The Board noted the Report previously circulated.

28.0 Any other business

There being no further business, the meeting concluded at 12.30.

Signed

A handwritten signature in blue ink, appearing to read "Pat O'Mahony".

Pat O'Mahony
Chairperson

A handwritten signature in blue ink, appearing to read "Karen Egan".

Karen Egan
Board Secretary

Actions arising from Board meeting – 19 March 2025

No	Action	Person Responsible	Timeframe
1	[Redacted]		
2	Update on the Covid-19 Evaluation to be provided in future CEO reports.	AF	May 2025 Board meeting onwards
3	Additional Board meeting on CHI review to be arranged at short notice if required.	POM/KE	As required
4	A paper on the requirements of the Lobbying Register to brought to the next ARGC meeting.	KE	May 2025 ARGC meeting
Actions carried forward from previous meetings		Person Responsible	Timeframe
5	An assurance paper providing an overview of how the QAF was complied with on the CHI review should be brought to the Board early in 2025.	SE	Board meeting in Q1 2025
6	Executive to engage with the Department of Health to seek clarity on the statutory fee model and its application to HIQA. Fee paper to be updated accordingly. Fee income to be kept under review. Review and outcome to be documented.	AF/KE	Ongoing
7	The next six-monthly review of risk management to include a review of risk appetite and risk profiles against other regulators.	ED	May 2025 Board meeting
8	The lead-in time for recruitment be reflected in the timelines for the 2025 Business Plan Objectives.	SM/SA	Q1 2025
9	A paper providing clarification on the NIS-2 proposal, including setting out the impact on HIQA as an organisation of taking on the new functions under NIS-2, to be brought to the Board.	SE	At appropriate time
10	Show percentage of training/education days against the overall number of working days.	SM	Ongoing
11	Regulation committee to maintain oversight of developments on OPCAT. A report will come back to the Board at the appropriate time.	MoH/KE	When appropriate

12	Palliative care regulation to be brought back to the Board for further discussion at the appropriate time.	SE	At the appropriate time
13	Older Person's Services to be put on the agenda for the next Board meeting.	KE	May Board meeting