

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

01 July 2025, 10am – 2pm  
HIQA Dublin and MS Teams

**Present:**

<b>Name</b>	<b>Details</b>	<b>Initials</b>
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
Daniel McConnell	Board Member	DMC
Lynsey Perdisatt*	Board Member	LP

**In Attendance:**

<b>Name</b>	<b>Details</b>	<b>Initials</b>
Angela Fitzgerald	Chief Executive Officer	AF
Sean Egan*	Director of Healthcare Regulation	SE
Sean Angland*	Acting Chief Operations Officer	SA
Finbarr Colfer*	Chief Inspector Designate	FC
Karen Egan	Board Secretary	KE
Sean Lynch	Corporate Reporting Officer (Minute Taker)	SL

\*Joined for part of the meeting

## **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 – 16 April 2025 and 21 May 2025**

The minutes of the meeting of 16 April 2025 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 MOH seconded the proposal; **accordingly, it was resolved that the minutes of 16 April 2025 be approved by the Board.**

The minutes of the meeting of 21 May 2025 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 MM seconded the proposal; **accordingly, it was resolved that the minutes of 21 May 2025 be approved by the Board.**

### **4.0 Matters Arising**

KE advised that there was a matter arising from the minutes of the March Board meeting. It was confirmed that during the course of the meeting PK had asked about monitoring of trends over time in the Regulatory Risk Register and Susan Cliffe (SC), Deputy Chief Inspector Social Services responded that it would be examined further.

### **5.0 Review of Actions**

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

In relation to action no. 7, the Board noted that the Department of Health had confirmed that HIQA board members are covered under the State Claims Agency General Indemnity Scheme. In relation to action no. 8, the Board asked that a new organisational risk for cyber-attack be raised on the corporate risk register to address all cyber risks; it was noted that such risks are captured in a number of areas. The amplification of cyber security within the risk categories is to be considered to ensure that there is appropriate continued focus on this area

### **6.0 Emerging Issues and Risks**

AF noted the ongoing media interest in public sector IT projects. The Board noted the need to keep the Minister for Health apprised in relation to progress with the DER project.

### **7.0 Health and Safety Matters**

AF advised that an update on office facilities was included in the CEO report.

## **8.0 DER Status Report**

[Redacted]

## **9.0 Board Committee Report**

### **Audit, Risk and Governance Committee (ARGC) – 24 June 2025**

BC, Chair of the Audit, Risk and Governance Committee reported that the following items were reviewed in detail at the ARGC meeting on 24 June 2025:

- 
- An update on the 2025 IA Plan was provided by Forvis Mazars. BC advised that there was one addition to the 2025 Plan which related to a review of the Regulatory Process. This would take place in Q3 2025 with a review report to the ARGC expected in Q4 2025.
- The Strategic Implementation Review and Workforce Planning review were presented to the Committee, with findings of substantial assurance and reasonable assurance respectively.
- The updated IA Charter and KPIs to measure performance were recommended to the Board for approval.
- A presentation on Finances to April 2025 was provided. MH noted that the papers had been reviewed in detail at the meeting.
- Annual Accounts post C&AG were presented to the Committee for recommendation to the Board for approval.
- A report on the use of Centralised Procurement Arrangements was presented.
- An update on DER Finances was presented.
- An update on DER risks (twice-yearly update to ARGC) was presented.
- A report on the effectiveness of anti-fraud and anti-corruption policies was presented.
- An update on the Lobbying Act was presented.
- An update on Statutory Compliance (twice yearly report) was presented.
- An update on Corporate Risks was provided. A new Corporate risk from Healthcare Regulation Directorate relating to IPAS was brought to the attention of the Committee.

In relation to the addition to the 2025 Plan relating to a review of the Regulatory Process, the Board noted the following:

- The Terms of Reference for the review would be presented to the ARGC and the Board at their September meetings and would also be presented to the Minister of State at the Department of Health with special responsibility for Older People.
- The final report would be presented to the ARGC in Q4 2025.
- There may be a need for specific external expertise to be invited to sit on the audit team.
- The review would all allow for areas for improvement in how inspections are carried out to be identified.

- There had been a review of Inspection of Designated Centres undertaken in Q3 2024.
- The Chief Inspector of Social Services role is an independent statutory role within the HIQA governance structure, and is separate from the CEO role.
- There may be merit in looking at different regulatory models in place in other bodies.

In response to comments and queries from the Board, AF clarified the following:

- Inspectors review all statutory notifications and indirect information as part of their preparation for inspections. In many instances, the inspector is already aware of issues such as staffing, poor supervision and management. Such information is important in terms of informing the nature of regulatory response required.
- Detail was provided on the data analysis done on notifications by the Office of the Chief Inspector.
- The role of the PRISM system in tracking the regulatory process.
- The new Digital Data Strategy and Corporate Plan will see HIQA move towards being a data centric organisation.

POM thanked BC for her stewardship of the ARGC.

BC left the meeting temporarily.

### **Standards, Information, Research and Technology Committee (SIRT) – 17 June 2025**

JK, Chair of the SIRT Committee, advised that the main items reviewed at the last SIRT meeting were as follows:

- An update on the Mid West Review was provided. The Committee noted that the final external input would not be published until September and this would have implications for the finalisation and submission of the HIQA review. While contingency measures have been agreed within HIQA it would be important that all external communications provide appropriate clarity on this matter.
- Updates on CICER and Public Health Function were reviewed.
- The HTA Impact Report was reviewed.
- An update on Corporate Performance in HTA and HIS Directorates.
- An update on Risks in HTA and HIS Directorates.

### **Regulation Committee – 19 June 2025**

MOH, Chair of the Regulation Committee, advised that the main items discussed at the meeting were also substantive items on the Board agenda. He advised that the Committee had reviewed the following items in detail at the 19 June 2025 meeting:

- A report from the Chief Inspector was presented (Interim report on Regulatory Oversight by the Chief Inspector of Named Designated Centres for Older People).
- A Report from the Director of Healthcare Regulation, including an update on the CHI review, NIS-2 Directive Update, monitoring of healthcare services, and the IIEA review.
- An update on IPAS was provided (including on the new IPAS Corporate risk).
- An update on Corporate Performance in Regulation Healthcare and Social Services was provided.
- An update on Risks in Regulation Healthcare and Social Services was provided to the Committee. The Committee had agreed that DER risks would no longer be reported in the risk report to the Regulation Committee, noting that DER governance arrangements provide that DER risks are presented to the ROC and ARGC.

### **Resource Oversight Committee (ROC) – 26 June 2025**

In the absence of LP, Chair of the Resource Oversight Committee, POM advised that the Committee had reviewed a range of topics at its recent meeting, including the following items:

- An update on the DER project.
- An update on Workforce Plan.
- Updates on Corporate Performance and Risk Management in the HR, ID, and Communications Directorates.
- The update on Sustainability was deferred to the September ROC meeting.

AF advised that the Corporate Plan was currently with the Minister for Health for consideration.

### **10.0 CEO's Report**

Finbarr Colfer (FC), Chief Inspector Designate, joined the meeting and Sean Egan (SE), Director of Healthcare, re-joined the meeting at this point.

POM expressed appreciation and support from the Board for all the intensive work happening at the present time. AF acknowledged the work of FC and SC and the wider Executive Management Teams as a support during recent events.

AF highlighted the following from her report:

#### **Corporate Governance**

- Interim support had been procured from EY for a period of 12 weeks to provide appropriate continuity in the management and oversight on strategic risk management during the period of absence of the Head of Quality, Risk and Compliance, including on programmes agreed with the Board.

#### **Strategic HR Issues**

- Preparation for the launch of the People and Culture Strategy was now finalised, with roadshows planned for early July across HIQA's three offices. Work on the prioritised initiatives for 2025 is underway.

#### Health and Safety

- There are no health and safety issues to report.
- HIQA recently met with the OPW to discuss optimising its use of office accommodation in Dublin. With agreement from the OPW, HIQA has engaged a firm of architects to consider how the Dublin office might be reconfigured to better suit remote working with a particular focus on optimising cross-team and collaborative ways of working.

#### Networks and Integration Security Directive (NIS-2)

- HIQA continues to progress engagement with the Department of Health, the Department of the Environment, Climate and Communications (DECC) and the National Cybersecurity Centre to address the remaining issues to the satisfaction of HIQA's Board.

#### Critical Entities Resilience Directive

- Progress has been made by HIQA in recruiting and filling key leadership positions to enable the taking on of Competent Authority functions under the CER Directive.
- The Head of Healthcare Surveillance and Risk Assessment started in June 2025 and will lead on enhancing HIQA's approach to the use of data and analytics to assist in the monitoring of performance and risk and on the CER function.

LP joined the meeting at this point.

#### Nursing Homes

- A briefing of the Board took place on 24 June on the issues relating to nursing homes.
- A comprehensive overview was provided on immediate and ongoing actions to ensure the safety of residents, escalatory actions, engagement with families and residents, legal advices, and actions on mis-information posted on social media.
- HIQA's appearance at the Oireachtas Joint Committee on Health was also considered.
- The key considerations for the IA review of HIQA's regulatory processes and opportunities for improving our regulatory approach were discussed.
- The establishment of the Clinical Advisory Forum was welcomed particularly in the context of the development of monitoring surveillance functions.

#### Mid-West Review

- The review of urgent and emergency care in the HSE Mid-West region will provide advice to the Minister to inform decision-making around the design and delivery of urgent and emergency healthcare in the Mid-West.

The CEO wrote to the Minister for Health on 28 May 2025 to advise that all of the HIQA-led work streams to inform the advice to the Minister had completed. HIQA further advised that the regional demand and capacity projections being undertaken by the ESRI, which are considered as essential input to the advice, will likely not complete until Q3.

Following HIQA's review of the ESRI projections, the advice will be finalised and reviewed by the Expert Advisory Group. On the basis that the final ESRI projections are received in September it is expected that the final draft Review and statement of assurance will be submitted to the Board and Minister thereafter.

#### National Care Experience Programme (NCEP) funding model

- The NCEP has established a new governance group with responsibility for providing governance and assurance for a consolidated funding model. It comprises membership of HIQA, the Department of Health, and the HSE.
- It was agreed that HIQA would prepare a business case for the annual estimate process 2026 to allow HIQA to plan and work to an agreed annual budget for NCEP.

#### AI project

- A scoping consultation to inform the development of national guidance for the safe use of AI in health and social care closed in May 2025.
- AF also noted that AI experience was indicated as a key requirement for candidates in the competition for the upcoming Board vacancy.

#### Information Division Update

The breadth and depth of IT projects underway was noted.

#### Complaints

An update on complaints management was provided.

#### Prism Sustain project

- Funds has been secured from the Department of Health to support the system going forward.
- EY has been procured to provide technical support.
- The final Programme Governance Board governance arrangements will include the appointment of an independent Chair.
- The programme sponsors are FC and the Chief Information Officer, Bala Krishnan (BK).

LP advised that the Prism Sustain project had been discussed at the recent ROC meeting and welcomed the assurance that the system would be supported for the coming years. The Board noted that the Prism Sustain project would allow a steady migration to the new DER system which had a much broader remit than Prism.

#### Monitoring of International Protection Accommodation Services (IPAS)

SE provided an update on IPAS and highlighted the following:

- HIQA continues to fulfil statutory responsibilities in the monitoring of IPAS centres designated by the Minister as eligible for monitoring.
- Responsibility for IPAS services recently officially transferred over to the Department of Justice, Home Affairs and Migration from DCEDIY.
- There had been a discussion on IPAS monitoring at the recent Regulation Committee meeting.
- The Department of Health has engaged with the Department of Justice, Home Affairs and Migration on the future arrangements for regulation of this sector

### Patient Safety Act

The Board noted recent media coverage in relation to the Patient Safety Act. In relation to a query from the Board, SE clarified the following:

- The draft legislation to amend licencing provisions was awaited. Further detail on the content of the Heads of Bill was needed before the regulatory impact could be assessed.
- Private Hospitals may only receive insurance money if they are accredited by the Joint Commission International (JCI).

BC re-joined the meeting.

## **11.0 Chief Inspector's Report**

The Committee noted the Report on Regulatory Oversight by the Chief Inspector of Named Designated Centres for Older People (June 2025) previously circulated and that it had been sent to the Minister of State at the Department of Health with special responsibility for Older People. The Board also noted that the standard Chief Inspector report would be presented as usual at the next Board meeting.

### **11.1 Older Persons Services – Policy discussion**

AF introduced the policy discussion Older Persons Services and advised the following:

- There had been extensive engagement with the Minister for Health and the Minister of State at the Department of Health with special responsibility for Older People on the matter.
- The need for regulatory change was clear. There were also several other areas that needed to be reviewed including HIQA's inspection processes, the funding model and costs for the nursing home sector, the use of fines as a regulatory lever, the issue of financial stability of providers and financial assessment powers for HIQA.
- HIQA's outsourced Internal Audit provider, Forvis Mazars, will undertake a review of inspection processes.
- An overview of the engagement with RTE regarding accessing the footage from the RTÉ Investigates programme.

Finbarr Colfer (FC), Chief Inspector Designate outlined the background and response to the RTÉ Investigates programme broadcast on 4 June 2025 which featured the care of residents in two nursing homes within the Emeis Ireland group of nursing



homes — The Residence Portlaoise and Firstcare Beneavin Manor. He highlighted the following:

- The communication from RTE outlined concerns about the nursing homes in terms of staffing, supervision and care. The nursing home had been subject to regulatory action for a period of 18 months. HIQA had no advance knowledge of the full detail of what was found in the footage or what would be broadcast. Once notified that the programme was to be broadcast, the Deputy Chief Inspector with responsibility for nursing homes engaged immediately with the registered provider of both nursing homes seeking assurances that residents were safe.
- A series of unannounced inspections had been carried out in the centres at key times both in and out of hours to assess care, supervision and management arrangements.
- The CEO had visited both centres and met with residents and families.
- HIQA had no regulatory powers in relation to the parent company but the company had engaged and cooperated fully with the Older Persons team.
- There had also been frequent engagement with the Minister for Health and the Minister of State at the Department of Health with special responsibility for Older People and with TDs from the area.
- Recent events had confirmed that there was a need for regulatory reform and policy change.

SE noted and that primary responsibility for safeguarding must remain with providers. AF noted that the development by the CNO of the Safe Staffing Framework was critical in terms of addressing specific concerns amplified in the programme and it would strengthen our regulatory remit in terms of assessing safe staffing. It also placed the primary responsibility on the provider to satisfy itself that the staffing arrangements were appropriate to the needs of the residents.

The Board acknowledged the comprehensive and appropriate response by HIQA to the recent events and noted the following:

- The Report on Regulatory Oversight was comprehensive.
- There is a reputational issue for HIQA arising from the recent events and clarity needs to be provided for the general public on HIQA's role and ability to act. A communications-led approach would now be required to re-build HIQA's reputation.
- Consideration needs to be given to a 7-day week inspection regime.
- The Chief Inspector had previously flagged concerns regarding a trend towards congregation in the older persons sector arising from the consolidation of nursing homes and the potential impact of this on the experience for residents living in nursing homes.
- Accountability of the directors of provider companies must form part of the key considerations for reform of the regulatory framework.
- Data management, data analysis and tracking of indicators are important regulatory tools that need to be further developed, to enable effective ongoing monitoring surveillance between inspections. This would support early identification of changes in management or resident profile or status.

- The ongoing engagement with RTE regarding release of the footage from the programme and the various approaches taken by journalists when editing media stories.
- That there is a need to consider its communication strategy with the public and key stakeholders about what it does as a regulator and how it does its work.
- The role of primary care in nursing homes needs to be further developed. The inputs from other key clinical disciplines to residents of nursing homes also need to be coordinated by nursing home providers to support optimal care and support for residents.
- There needs to be ongoing engagement with providers, especially large providers, regarding effective education and training of all staff.
- HIQA needs to consider key areas for improvement in its own processes. The IA review will support such consideration.

JK advised that a paper on the need for regulatory reform had previously been prepared by the Chief Inspector's office in which the absence of overarching social care legislation for the needs of the elderly and vulnerable had been highlighted. He undertook to circulate the paper to the Board.

In response to comments and queries from the Board the following was clarified:

- Despite the displacement effect of recent events, routine inspection work continues with some amendments to the schedule of inspections.
- Reporting of fire issues within the Chief Inspector report will be examined to better communicate nature of the issues identified.
- Some inspections take place at weekends but this is not standard practice – the introduction of 7/7 working arrangements within health settings provides an opportunity to explore this issue with the Department. It may require additional staffing so that there is not a displacement effect on other inspections.
- A strengthened focus on culture and behaviour within the regulatory process is vital to protect vulnerable residents, some of whom may not be able to speak up for themselves. Additional measures will be looked at regarding independent assessment of organisation culture by HIQA including additional opportunities for staff engagement
- HIQA does not have the legal powers or expertise to examine the financial stability of providers. Inspectors can only look at financial fitness on a day-to-day basis. This has been the subject of discussion with the Department; further discussion is required on this matter from a policy and regulatory perspective
- There is now a need to rebuild HIQA's reputation and to rebuild public trust in HIQA.

AF advised that the Executive would undertake the following actions:

- To arrange for the recent review on the HSE Fair Deal Scheme be circulated to the Board.
- To ask legal services unit to examine HIQA's role in relation to legal duties of directors in provider companies and parent companies.

POM noted the extensive discussion on the matter and the feedback provided by the Board. The Board thanked FC for his update and asked that the support of the Board be passed back to the regulatory team.

FC and SE left the meeting.

## **12.0 Finance Report**

The Board noted the paper previously circulated.

## **13.0 Structured Approach for Consideration of Proposed Additional Functions**

This item was deferred to the September Board meeting.

## **14.0 Board Training – Discussion**

This item was deferred to the September Board meeting.

## **15.0 Board Policies**

### **15.1 Internal Audit (IA) Charter**

The Board noted the papers previously circulated. BC advised that the Internal Audit Charter had been reviewed at the recent ARGC meeting and recommended for Board approval.

BC proposed the approval of the IA Charter and POM seconded the proposal; **accordingly, it was unanimously resolved that the IA Charter be approved by the Board.**

### **15.2 Use of the HIQA Seal – Standard Operating Procedure**

The Board noted the papers previously circulated.

POM proposed the approval of the Use of the HIQA Seal – Standard Operating Procedure and PK seconded the proposal; **accordingly, it was resolved that the Use of the HIQA Seal – Standard Operating Procedure be approved by the Board.**

### **15.3 Preparation of Papers for Board meetings – Standard Operating Procedure**

The Board noted the papers previously circulated.

POM proposed the approval of the Preparation of Papers for Board meetings – Standard Operating Procedure, subject to a further amendment being inserted in

relation to use of tracked changes, and MH seconded the proposal; **accordingly, it was resolved that the Preparation of Papers for Board meetings – Standard Operating Procedure be approved by the Board subject to one further amendment as indicated.**

#### **16.0 Committee Membership**

The Board noted the papers previously circulated.

POM advised that it was proposed to extend the existing Committee memberships for one year and that the matter would be tabled for further Board discussion at the Strategy session in September.

MH proposed the Committee term extensions and CFN seconded the proposal; **accordingly, it was resolved that the Committee term extensions be approved by the Board.**

#### **17.0 Chairperson's Report**

The Board noted the paper previously circulated.

#### **18.0 HTA Impact Report**

The Board noted the papers previously circulated.

#### **19.0 Updates on CICER and Public Health Function**

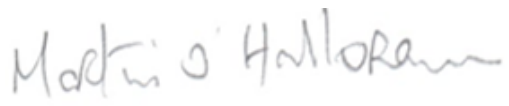
The Board noted the papers previously circulated.

#### **20.0 Any other business**

POM provided an update on the Board appointment process currently underway.

There being no further business, the meeting concluded at 2pm.

**Signed**

A handwritten signature in blue ink that reads "Martin O'Halloran". The signature is written in a cursive style with a long, sweeping underline.

---

**Martin O'Halloran**  
Board Member

A handwritten signature in blue ink that reads "Karen Egan". The signature is written in a cursive style with a long, sweeping underline.

---

**Karen Egan**  
Board Secretary

### Actions arising from Board meeting – 01 July 2025

No	Action	Person Responsible	Timeframe
1	Monitoring of trends over time in the Regulatory Risk Register to be examined.	FC	At appropriate time.
2	A new organisational risk for cyber attack to be raised on the corporate risk register.	BK / Chief Risk Officer	September Board meeting
3	Reporting of fire issues in the Chief Inspector report to be examined to better communicate whether the issues identified are minor or mitigated issues.	FC	When available.
4	Review on the HSE Fair Deal Scheme be circulated to the Board.	SA	September Board meeting
5	To ask legal services unit to examine HIQA's role in relation to legal duties of directors in provider companies and parent companies.	AMC	September Board meeting
6	The following to be deferred to a later Board meeting agenda: <ul style="list-style-type: none"> <li>Structured Approach for Consideration of Proposed Additional Functions</li> <li>Board Training – Discussion</li> <li>Committee memberships</li> </ul>	KE	September /November Board meeting
<b>Actions carried forward from previous meetings</b>		<b>Person Responsible</b>	<b>Timeframe</b>
7	An assurance report on the Mid-West Review, with a summary of the findings, to be brought back to the Board later in the year.	MR	At appropriate time
8	NIS-2 - clarification to be sought on the legal position when enforcement powers move from one agency to another.	SE	Update to be brought when matter has been clarified
9	Review of services for assisted human reproduction - clarification be sought on the scope of the review of services for assisted human reproduction, including on if surrogacy is included.	MR	Update to be brought when matter has been clarified
10	Proposal regarding independent assurance on service user experience to be presented to Board at appropriate time, incorporating the processes for receiving unfiltered feedback.	AF/MW	When appropriate
11	A briefing on Protected Disclosures to be brought to the Board providing assurance on management of Protected Disclosures.	SA	On work plan for September Board meeting

12	Additional clarity to be sought on the payment of fees to external members of Committees.	SA/KE	Following meeting
13	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/SA	Ongoing
14	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
15	Show percentage of training/education days against the overall number of working days.	SM	Ongoing
16	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
17	Palliative care regulation to be brought back to the Board for further discussion at the appropriate time.	SE	At the appropriate time
18	Consideration to be given to governance arrangements for occasions when staff members are appointed to external bodies.	SM/KE	Ongoing