

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

24 September 2025, 10.30am – 2.30pm  
HIQA Cork and MS Teams

**Present:**

<b>Name</b>	<b>Details</b>	<b>Initials</b>
Martin O'Halloran	Board Member	MOH
Bernadette Costello	Board Member	BC
Caroline Spillane*	Board Member	CS
Leonie Clarke	Board Member	LC
Marion Meany	Board Member	MM
Martin Higgins	Board Member	MH
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 Angland*	Acting Chief Operations Officer	SA
Sean Egan*	Director of Healthcare Regulation	SE
Susan Montgomery*	Head of Human Resources and Organisational Development	SM
Bala Krishnan*	Chief Information Officer	BK
Louise Larkin*	Programme Manager, Health Technology Assessment	LL
Pat Millar*	Clarion Consulting	PM
Finbarr Colfer*	Chief Inspector Designate	FC
Máirín Ryan*	Director of Health Technology Assessment	MR
Marty Whelan*	Head of Communications and Stakeholder Engagement	MW
[Redacted]		
[Redacted]		
[Redacted]		
[Redacted]		
Karen Egan	Board Secretary	KE
Mary O'Connor*	Governance Officer	MOC

\*Joined for part of the meeting

## Apologies:

Name	Position	Initials
James Kiely	Board Member	JK
Clíodhna Foley-Nolan	Board Member	CFN

### 1.0 Quorum

A quorum was present and the meeting was duly convened.

### 2.0 Confirmation of Chairperson for the meeting

The Board noted that section 18 of the Health Act 2007 provides that if and so long as the Chairperson of the Board is not present, or if that office is vacant, the members of the Board who are present shall choose one of their number to be Chairperson of the meeting.

LC proposed that Martin O'Halloran be chosen to be Chairperson of the meeting and DMC seconded the proposal; **accordingly, it was resolved that Martin O'Halloran was chosen to be Chairperson of the HIQA Board meeting on 24 September 2025.**

MOH formally noted with deep sadness the recent passing of former HIQA Chairperson, Pat O'Mahony. The Board expressed their appreciation for Pat's exemplary leadership and guidance during his tenure as Chairperson.

AF acknowledged Pat's extraordinary leadership as Chair including his capacity for enabling consensus, his deep understanding of the wider context within which HIQA operates, his strong commitment to collaborative working and his consistent emphasis on keeping people at the centre of HIQA's work.

AF also noted that it was Board member Paula Kilbane's last meeting. AF acknowledged her significant contribution to the work of HIQA over her ten year tenure. She highlighted her intellect, her wisdom and extensive experience and her dedication to advancing the organisation's mission.

The Board thanked PK for her positive impact on the growth and development of HIQA and wished her every success in future endeavours.

MOC left the meeting at this point.

### 3.0 Board only session

[Redacted]

AF provided the Board with an update on an employment matter.

[Redacted]

#### **4.0 Conflict of Interest**

No conflicts of interest were declared.

#### **5.0 Minutes of the last meeting – (i) 24 June 2025 and (ii) 01 July 2025**

The minutes of the meeting of 24 June 2025 were reviewed by the Board and it was agreed that the minutes were an accurate representation of the meeting. MM proposed approval of the minutes and DMC seconded the proposal; **accordingly it was resolved that the minutes of 24 June 2025 be approved by the Board.**

The minutes of the meeting of 01 July 2025 were reviewed by the Board and it was agreed that the minutes were an accurate representation of the meeting. PK proposed approval of the minutes and MM seconded the proposal; **accordingly it was resolved that the minutes of 01 July 2025 be approved by the Board**

#### **6.0 Matters Arising**

There were no matters arising.

#### **7.0 Review of Actions**

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

KE drew the Board's attention to action no. 2 in relation to the newly raised Corporate risk on cyber security which had been added to the risk register in September.

#### **8.0 Emerging Issues and Risks**

AF provided the Board with an update on an ongoing judicial review and advised that the hearing date is likely to be in early 2026.

MOC re-joined the meeting.

#### **9.0 Health and Safety Matters**

AF advised that an update on accommodation proposals to support blended working arrangements would be provided as a paper to the November Board meeting.

## **10.0 Board Committee Report**

The Board noted the paper previously circulated.

### **Standards, Information, Research and Technology Committee (SIRT) – 09 September 2025**

PK advised that the main items reviewed at this meeting were as follows:

- Update on the Mid West Review
- HTA of alternative telephone pathway for acute non-urgent medical care needs in the pre-hospital setting was reviewed and recommended for approval by the Board
- HTA of screening for abdominal aortic aneurysm was reviewed and recommended for approval by the Board
- Guidelines for the justification of medical radiological procedures on asymptomatic individuals were reviewed and recommended for approval by the Board
- An update on Corporate Performance in HTA and HIS Directorates was provided
- An update on Risks in HTA and HIS Directorates was provided to the Committee.

### **Regulation Committee – 12 September 2025**

MOH, Chair of the Regulation Committee, advised that the Committee had reviewed the following items in detail the 12 September 2025 meeting:

- A Report from the Chief Inspector
- A Report from the Director of Healthcare Regulation, including an update on the Networks and Integration Security Directive (NIS-2) and IPAS
- 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.

### **Audit, Risk and Governance Committee (ARGC) – 16 September 2025**

BC, Chair of the Audit, Risk and Governance Committee reported that the following items were reviewed in detail at the ARGC meeting on 16 September 2025:

An update on the Internal Audit Plan was provided by Forvis Mazars.

- The IT User Access Review was presented to the Committee with a finding of reasonable assurance
- The Terms of Reference for the Review of Regulatory Process was reviewed by the Committee.
- Terms of Reference for the IT Governance Review, Cyber Security Review and Follow-up Audits Review 2025 were approved by the Committee

- Audit Planning for 2026 was discussed by the Committee
- An update on Corporate Risks was provided
- A presentation on Finances to July 2025 was provided. The Committee noted that a budget surplus was projected at year end. This is linked to the timing of approval and filling of posts approved under the Strategic Workforce Plan. It was confirmed that SE was working closely with colleagues in DOH regarding projected outturn. BC advised that the Finance report was circulated with the papers for the Board meeting.
- A training session on Artificial Intelligence (AI) was provided by Forvis Mazars.
- Updates on Internal Audit Recommendations, DER Finances, and Cyber Security were reviewed by the Committee.
- The expiry of term of the External ARGC member was discussed.

In relation to the Terms of Reference for the Review of Regulatory Process, the Board noted that the Minister of State for Older Persons would also provide feedback on the Terms of Reference.

### **Resource Oversight Committee (ROC) – 18 September 2025**

LP, Chair of the Resource Oversight Committee, advised that the Committee had reviewed a range of topics at its recent meeting on 18 September 2025, including the following items:

- Transactions for approval relating to Contract Awards were reviewed and recommended for approval by the Board
- An update on DER and Call Off CO.03
- Updates on Prism
- Human Capital Report including updates on (i) Organisational Structure (ii) Succession Planning Process
- Update on Stakeholder Engagement
- Updates on Corporate Performance and Risk Management in the HR, ID, and Communications Directorates
- The following items were deferred to the November meeting:
  - Accommodation Report
  - Update on Sustainability
  - Standing Report on PMO Projects
  - Communications strategy to align with Corporate Plan

## **11.0 Transactions for Approval**

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

The Board noted the paper previously circulated.

Sean Angland (SA) Acting Chief Operations Officer provided an overview of the contracts for listed goods and services.

LP proposed the approval of the award of the seven contracts for goods and services as listed in the paper, and DMC seconded the proposal; **accordingly, it was unanimously resolved that award of the seven contracts be approved by the Board.**

## **12.0 Health Technology Assessment (HTA) of alternative telephone pathway for acute non-urgent medical care needs in the pre-hospital setting**

Board noted the papers previously circulated.

MM proposed the approval of the HTA of alternative telephone pathway for acute non-urgent medical care needs in the pre-hospital setting and LC seconded the proposal, **accordingly, it was resolved that the HTA of alternative telephone pathway for acute non-urgent medical care needs in the pre-hospital setting be approved by the Board.**

## **13.0 HTA of screening for abdominal aortic aneurysm**

The Board noted the papers previously circulated.

MH proposed the approval of the HTA of screening for abdominal aortic aneurysm and PK seconded the proposal; **accordingly, it was resolved that the HTA of screening for abdominal aortic aneurysm be approved by the Board.**

## **14.0 Guidelines for the justification of medical radiological procedures on asymptomatic individuals**

The Board noted the papers previously circulated.

MH proposed the approval of the Guidelines for the justification of medical radiological procedures on asymptomatic individuals and MM seconded the proposal; **accordingly, it was resolved that the Guidelines for the justification of medical radiological procedures on asymptomatic individuals be approved by the Board.**

## **15.0 Business Expenses Policy**

The Board noted the papers previously circulated.

BC proposed the approval of the updated Business Expenses Policy and LP seconded the proposal; **accordingly, it was unanimously resolved that the update Business Expenses Policy be approved by the Board.**

## **16.0 Committee membership**

The Board noted the papers previously circulated and advised the following:

### Standards, Information, Research and Technologies (SIRT) Committee

- The appointment of LC to the Standards, Information, Research and Technologies (SIRT) Committee to cease on 24 September 2025.
- CFN to be appointed to the Standards, Information, Research and Technologies (SIRT) Committee from 24 September 2025 for a three year term.

### Regulation Committee

- CS to be re-appointed to the Regulation Committee for a one year term.
- LC to be appointed to the Regulation Committee from 24 September 2025 for a three year term.

### Audit, Risk and Governance Committee

- The appointment of CFN to the ARGC to cease on 24 September 2025.
- BC to be re-appointed to the ARGC from 01 December 2025 for a three year term.
- LC to be re-appointed to the ARGC from 02 October 2025 for a three year term.

LP proposed the updated Committee membership and LC seconded the proposal; **accordingly, it was resolved that the updated Committee membership be approved by the Board.**

It was agreed that the Board would review Committee membership again at the next meeting when the new appointment is made to the Board. It was agreed that subject to the skills of the new Board member, they may be appointed to the ARGC and SIRT Committees.

## **17.0 DER Status Report**

[Redacted]

## **18.0 Mid-West Review**

Máirín Ryan, Director of Health Technology Assessment (HTA), Marty Whelan (MW) Head of Communications and Stakeholder Engagement and Louise Larkin (LL), Programme Manager HTA, joined the meeting at this point.

AF introduced the Mid-West Review and provided a brief overview outlining the request from the Minister for Health in mid-2024 to conduct a review of urgent and emergency care in the HSE Mid West health region with the primary objective of ensuring safe, quality, acute care in the region. AF outlined the engagement with the Minister for Health regarding the arrangements for submission of the report to the Minister for her consideration, She advised that, subject to Board approval of the Statement of Assurance, the Mid West Review would be submitted to the Minister for Health and published on the HIQA website by end September in accordance with our commitments to the Minister on this matter.

Máirín Ryan (MR), Director of Health Technology Assessment highlighted the following:

- An overview of the process outline and the Statement of Assurance for the Review of urgent and emergency healthcare services in the Health Service Executive (HSE) Mid West health region.
- In conducting the review, HIQA was asked, inter alia, to consider the recommendations of a HSE-commissioned review by former Chief Justice Frank Clarke into the circumstances surrounding the death of Aoife Johnston from sepsis at UHL in December 2022. This was included as one of the published terms of reference for the review.

SE advised the following:

- HIQA had adopted a programmatic approach spanning a number of areas to inform the overall advice to the Minister for Health. Seven work streams were agreed and published including a number of evidence synthesis reviews, a stakeholder engagement exercise and public consultation to seek the views of a various interested parties regionally and nationally.
- A capacity planning model was undertaken by the ESRI to consider the future bed requirements for the region having regard to demographic and non demographic factors.
- The review identified that there was insufficient bed capacity in UL relative to number of patients presenting to the ED that required admission and by comparison with other Model 4 hospitals. The recent investment and planned additional beds will go some way towards addressing these deficits but further investment is required in the short term given the projected continued upward trend in numbers presenting that will require admission.
- HIQA has identified three potential options for Ministerial consideration on how best to address current and future inpatient bed capacity deficits in the Mid West, and takes account of the as the ESRI projections to 2040.
- Each option presents benefits and potential implementation challenges. The three options identified are:
  - Option A – Expand capacity at UHL on the Dooradoyle site.
  - Option B – Extend the UHL hospital campus to comprise the existing Dooradoyle site and another site, in close proximity to UHL, to support the



delivery of healthcare services under a single governance and shared resourcing model.

- Option C – Develop a Model 3 hospital in the HSE Mid West, providing a second ED for the region.
- The advice outlines the potential benefits and possible implementation challenges associated with each option. It highlights the imperative for immediate action so that the safety and welfare considerations for patients associated with continued overcrowding and insufficient beds can be addressed in the earliest time. This is consistent with the core recommendations in the Frank Clarke report. A detailed planning exercise will be required by HSE to consider the site options having regard to planning, capital and staffing considerations.

The Board commended the team for their excellent work on the review and noted the following:

- The definition of model 2/3/4 hospitals should be provided in the report to assist external audiences with their understanding of the specific roles and associated resource requirements of such hospitals.
- The quality and comprehensiveness of work undertaken across all the work streams, including the public consultation exercise, the evidence syntheses and the regulatory insights.
- The clear presentation within the advices of the opportunities and challenges of the three options identified, including capital costs, staffing and timeframe, and their ability to meet future requirements.
- The challenges associated with the wide range of future bed requirements included within the various ESRI options. While this is unavoidable due to uncertainties in relation to specific demographic and non-demographic factors, it underlines the importance of further review and evaluation of the impact of initial investment decisions on capacity and overall access.
- The latest Department of Social Protection's population projection figures may also need to be considered by DOH and Government in determining the preferred options.
- The success of the region relative to other areas in terms of securing staffing and the importance of having appropriate regard for this issue over the medium term in considering the individual options.

LP and CS left the meeting.

AF acknowledged the excellent work and commitment of MR, SE and the collaborative work of their teams. She emphasised the importance and the benefits of collaborative work in complex and major programmes of work of this nature. She highlighted the displacement effect on the work in their respective area and confirmed that appropriate contingency arrangements were agreed with DOH to enable to enable prioritisation of this work given the patient safety and welfare concerns involved.

AF also noted that the report highlights the need for immediate action and investment that is required to address risks to patient safety in the shortest

timeframe and the importance of incorporating the ESRI projected capacity requirements in the final assessment of the preferred options.

MW and AD provided an update on the communications strategy for the review. AF advised that subject to Board approval, the intention was to submit the report to the Minister following the meeting and to provide appropriate briefing the Minister and her officials at the earliest opportunity thereafter. MW confirmed that following Board approval of the Statement of Assurance and in accordance with our standard process, HIQA will publish the report as soon as the possible following submission to the Minister.

The Executive agreed to update the Executive Summary to reflect suggestions from the Board.

PK proposed the approval of the Statement of Assurance for the Mid-West Review and LC seconded the proposal; **accordingly, it was unanimously resolved that the Statement of Assurance for the Mid-West Review be approved by the Board.**

DMC, MR, SE, MW and LL left the meeting.

## **19.0 CEO's Report**

Finbarr Colfer (FC), Chief Inspector Designate joined the meeting.

AF highlighted the following from her report which was previously circulated:

### Quality, Risk and Compliance (QRC)

- The QRC team is reviewing the potential for ongoing external support to provide an additional level of expertise in relation to risk management.
- Preparations for the forthcoming ISO Surveillance Audit are underway.

### Risk Management

- EY undertook an in-depth examination of the HIQA risk register July and August 2025. The six monthly report to the Board at the November meeting will reflect the refresh of the risk register update.
- Work is now underway on a refresh of the corporate risk register.

### Strategic HR Issues

- Work has commenced on the development of a new Strategic Workforce Plan to align with the HIQA Corporate Plan 2025 – 2027.
- The People and Culture Strategy was launched on 17 September 2025 along with the HIQA Corporate Plan.
- People and Culture Strategy Roadshows are planned for Dublin, Cork and Galway offices in October. These are designed to foster opportunities for engagement, connection and shared ownership across the organisation.

### Healthcare Regulation – Strategic Development

- The Healthcare Regulation Directorate commenced monitoring inspections in private hospitals against the *National Standards for Safer Better Healthcare* with the first series of reports due to be published shortly.
- HIQA is engaging with the Department of Health on future arrangements for the proposed mandatory licensing of public and private hospitals and specified entities of, under the General Scheme of the Patient Safety (Licensing) Bill, approved by the Government on 12 December 2017.

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

- HIQA continues to engage with the Department of Health, Department of Justice, Home Affairs and Migration and the National Cybersecurity Centre to discuss remaining key considerations to the satisfaction of HIQA's Board.
- DOH has engaged formally with the Department of Justice, Home Affairs and Migration on the outstanding issues. Pending the outcome of such discussions, no decisions have been made on the designation of HIQA as Competent Authority.

### Monitoring of International Protection Accommodation (IPAS)

- HIQA continues to monitor IPAS centres. The number of centres have reduced from 51 to 34 over the past 12 months.
- Discussions are ongoing between the Department of Health and the Department of Justice, Home Affairs and Migration with regard to the future arrangements of this sector.

### Critical Entities Resilience (CER) Directive

- HIQA continues to engage with the Department of Defence to support the rollout of this new function.
- Key leadership positions have been filled to enable HIQA commence the Competent Authority functions.

### National Immunisation Advisory Committee (NIAC)

- AF provided an overview of the ongoing work since the previous Board meeting including updating the Immunisation Guidelines for Ireland.

### Health Information Standards

- There is ongoing engagement with the Department of Health on a consolidated funding model for National Care Experience Programme (NCEP).
- HIQA is undertaking a review of the Health Information functions under the Health Act and how they relation to the Health Information Bill and European Health Data Space in relation to HIQA's responsibilities in the areas of CER, NIS-2 and the AI Act.
- There is substantial progress on the National Standards for Health and Social Care. HIQA continues to progress engagement with the Department of Health regarding the Health (amendment) (Home Support providers) Bill 2025.
- The analysis of the National Maternity Experience Survey is underway and a full report is expected to be available in December 2025.

## **20.0 Corporate Plan – Strategic Corporate Communications**

This item was deferred to the November meeting due to the exceptional circumstances arising from the passing of the Chair. A facilitated session will be held at the November Board meeting to discuss the Strategy and associated Communications Strategy.

## **21.0 Chief Inspector's Report**

Finbarr Colfer (FC), Chief Inspector Designate, joined the meeting.

FC advised that there has been a detailed discussion on the Chief Inspector's Report at the recent Regulation Committee. He provided an update on the Chief Inspector's activities and highlighted the following from his report:

### Older Persons Services:

- Between 01 January and 31 July 2025, the older person's team completed 473 inspections of designated centres for older people (809 inspection days) and published 440 inspection reports. It is anticipated that each designated centre for older people will be inspected at least once in 2025.
- Significant work is ongoing to address the concerns raised by the RTE Investigates programme broadcast on 4 June 2025.
  - o Inspectors have completed a program of inspections of all 25 designated centres within the Emeis Ireland group. Follow up inspections have also taken place at a number of centres.
  - o Regulatory escalation has been applied as required and continue to be closely monitored.
  - o A report of inspections of all registered providers under the Emeis umbrella group was prepared for the Minister for Older People and published by the Department of Health on 01 July 2025. Regular updates are provided to the Minister for Health, with the next report due on 17 October 2025.
- Planning of second inspections will be impacted by the requirement to deploy staff to a program of inspection of the Emeis centres and continue to deploy resources to other centres of risk.

### Disability Team

- As of the 31 July 2025, there were 1697 registered designated centres with the capacity to support 9,364 individuals with a disability. This represents a net increase of 45 designated centres and 144 residential placements since the beginning of the year and reflects a continued growth within the sector.

- There is continued growth in this sector with a net increase of 45 designated centres and 144 residential placements.
- There are four providers in escalated regulatory programmes.
- There is ongoing engagement with the Department of Children, Disability and Equality (DCDE) regarding legislation which would allow providers operate an unregistered centre in exceptional situations in order to protect the safety and welfare of residents.
- A Notice of Decision to cancel the registration of one centre was issued in July 2025. The HSE took over operation of the centre on 14 August 2025, under S64 of the Health Act 2007.
- Significant levels of non-compliance of another provider has been identified during a series of unannounced risk based inspections of 12 of their centres. Concerns have been escalated to the HSE and the Department of Children, Disability and Equality (DCDE).

#### Children's Team

- Overall, special care and children's residential care are well managed and the majority of centres illustrate good levels of compliance.
- Inspections of child protection and welfare services continue to show that Tusla are endeavouring to prioritise children at highest risk for the allocation to a social worker, however, significant waiting lists remain in the majority of service areas.
- Collaborative working is ongoing between HIQA, Tusla and DCDE in regard to the development of a national foster care guidance document which is planned to be completed by year end.
- Up to and including 31 July 2025, 27 inspections have been carried out. These included 14 inspections of children's residential centres, 8 child protection and welfare inspections, 3 statutory foster care and 2 designated centres for special care.
- The inspections of Tusla's newly established children's residential services were largely positive, and the accommodation provided were of a high standards.
- Two child protection and welfare services have been escalated to Tusla's Chief Executive Officer. HIQA continues to monitor the services closely.

FC advised that HIQA had recently hosted a delegation from the Icelandic Regulator and outlined the useful information exchanged between the two parties.

The Board thanked FC for his update.

BC advised that the Terms of Reference for the Review of the Regulatory Process had been reviewed by Audit Risk and Governance Committee at its recent meeting.

FC left the meeting.

## **22.0 Finance Report**

The Board noted the papers previously circulated.

### **23.0 Human Capital Report**

The Board noted the papers previously circulated.

### **24.0 Board and Committee meeting dates for 2026**

The Board noted the papers previously circulated and agreed that the paper would be further discussed at the next Board meeting in November.

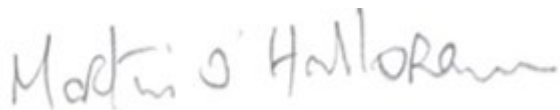
### **25.0 Updated Board Risk Report (May 2025)**

The Board noted the papers previously circulated.

### **26.0 Any other business**

MOH thanked everyone for their contribution during the meeting. There being no further business, the meeting concluded at 2:40pm.

#### **Signed**



---

**Martin O'Halloran**  
Board Member



---

**Karen Egan**  
Board Secretary

## Actions arising from Board meeting – 24 September 2025

No	Action	Person Responsible	Timeframe
1	[Redacted]		
2	Committee membership to be reviewed at the next Board meeting	KE	Nov Board meeting
3	[Redacted]		
4	Executive Summary for MWR to be updated reflect suggestions from the Board.	MR/SE	Immediately after meeting
5	Board meeting dates to be further discussed at the next Board meeting in November	KE	Nov Board meeting
6	[Redacted]		
Actions carried forward from previous meeting		Person Responsible	Timeframe
7	Legal services unit to examine HIQA's role in relation to legal duties of directors in provider companies and parent companies.	AMC	When available
8	The following to be deferred to a later Board meeting: <ul style="list-style-type: none"> <li>Structured Approach for Consideration of Proposed Additional Functions</li> <li>Board Training – Discussion</li> </ul> Committee memberships	KE	Nov Board meeting
9	Proposal regarding independent assurance on service user experience to be presented to the Board at appropriate time, incorporating the processes for receiving unfiltered feedback.	AF/MW	When appropriate
10	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
11	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
12	A briefing on Protected Disclosures to be brought to the Board providing assurance on management of Protected Disclosures.	SA	On Board work plan 2025 Board meeting
13	Additional clarity to be sought on the payment of fees to external members of Committees.	SA/KE	Following Meeting. Finance

			Team are engaging with DoH on this action.
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	Palliative care regulation to be brought back to the Board for further discussion at the appropriate time.	SE	At the appropriate time
16	Show percentage of training/education days against the overall number of working days.	SM	Ongoing
17	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
18	Consideration to be given to governance arrangements for occasions when staff members are appointed to external bodies.	SM/KE	Ongoing