

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

12 February 2026, 4pm – 5.30pm
MS Teams

Present:

Name	Details	Initials
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
James Kiely	Board Member	JK
Lynsey Perdisatt*	Board Member	LP
Clíodhna Foley-Nolan	Board Member	CFN
Frank O'Donnell	Board Member	FOD

In Attendance:

Name	Details	Initials
Máirín Ryan	Director of Health Technology Assessment and Deputy CEO	MR
Sean Angland*	Acting Chief Operations Officer	SA
Marian Brady*	Financial Planning Analysis and Reporting	MB
Eleanor Noonan*	Finance Manager	EN
Susan Montgomery*	Head of Human Resources and Organisational Development	SM
Bala Krishnan*	Chief Information Officer	BK
Emma Deenihan*	Head of Quality, Risk and Compliance	ED
Mairead Murphy*	Audit and Risk Manager	MM
Karen Egan	Board Secretary	KE
Mary O'Connor	Governance Officer	MOC

*Joined for part of the meeting

Apologies:

Name	Position	Initials
Daniel McConnell	Board Member	DMC
Angela Fitzgerald	Chief Executive Officer	AF

1.0 Quorum

A quorum was present and the meeting was duly convened.

1.1 Confirmation of Chairperson

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.

MH proposed that MOH be chosen to be Chairperson of the meeting and MM seconded the proposal; **accordingly, it was resolved that MOH was chosen to be Chairperson of the HIQA Board meeting on 12 February 2026.**

2.0 Conflict of Interest

No conflicts of interest were declared.

3.0 Emerging Issues and Risks

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

MOH noted that AF is on leave and sends her apologies for the meeting. He thanked MR for deputising.

4.0 Annual Accounts 2025 – pre C&AG audit

The Board noted the papers previously circulated.

Sean Angland (SA), Acting Chief Operations Officer, Eleanor Noonan (EN), Finance Manager, and Marian Brady (MB), Financial Planning, Analysis and Reporting, joined the meeting.

BC introduced the draft Financial Statements for 2025. She provided an update on the ARGC meeting that took place earlier in the week at which the draft accounts were reviewed and recommended for approval by the Board, subject to two minor amendments which have since been updated on the draft accounts.

BC advised the following:

- There was a drawdown of €32.6m from the Department of Health.
- The figures are in line with the management accounts that had been reviewed by the Committee at previous meetings.

MB gave the presentation on the Annual Financial Statements 2025 in which she highlighted the following:

- An overview of the 2025 financial results, including income, expenditure and variances.
- Income from the Department of Health in 2025 was €32.6m. This represented an increase in income of 11% compared to 2024. This increased allocation to the budget relates to funding for additional activities.
- Income from Annual and Registration Fees from designated centres was €7.6m in 2025.
- Cash at bank at year end was €3.7m.
- The approval process for the Financial Statements, including next steps, was outlined.
- The Comptroller and Auditor General (C&AG) will be undertaking the audit fieldwork on the 2025 Financial Statements.
- It is anticipated that the audited Financial Statements will be brought back to the Board for approval in April 2026 subject to the availability of resources within the C&AG to complete the external audit within that timeframe.

BC advised that the ARGC reviews the management accounts in detail at every meeting and the Committee, at its recent meeting, had recommended the draft 2025 Financial Statement to the Board for approval.

The Board discussed the contents of the Statement on Internal Control including the controls around procurement.

MH proposed the approval of the draft Financial Statements for 2025 and BC seconded the proposal; **accordingly, it was resolved that the draft Financial Statements for 2025 be approved by the Board.**

The Board thanked SA, MB and EN for the comprehensive report and also for the clarity of the presentation of the financial statements.

MB and EN left the meeting.

5.0 Information Division Start of Year Submission 2026

Bala Krishnan (BK), Chief Information Officer, joined the meeting.

The Board noted the papers previously circulated.

BC introduced the Information Division (ID) Start of Year Submission 2026 and advised that the ARGC, at its meeting earlier in the week, had reviewed the Submission and recommended it for the approval of the Board subject to additional information being incorporated, including the 2025 analysis for non-project expenditure.

BK presented the Information Division (ID) Start of Year (SOY) 2026 and End of Year (EOY) 2025 Submission and highlighted the following:

- An overview of the 2026 budget, and the forecasted new project initiatives expected to commence in 2026.
- The SOY includes provision for new commencements that will rely on the IRIS system but were not provided within the original business case for DER.
- Project justification for all forecasted capital projects will be submitted to the Department of Health.
- Certain previously approved projects being rolled forward to 2026 amount to €13.8m.
- Capital expenditure incurred for 2025 approved projects was €864k and operational expenditure for 2025 was €4.3m.
- The variance between SOY 2025 and EOY 2025 is primarily related to:
 - o IT related consultancy costs associated where subject matter expertise was required for critical infrastructure needs.
 - o An increase in licensing costs due to increased vendor costs and additional usage.

The Board thanked BK for his presentation and noted that it provided a good overview of the new areas of planned activity for HIQA in and how the ID team will support this programme of work.

JK proposed the approval of the Information Division (ID) Start of Year (SOY) 2026 and End of Year (EOY) 2025 Submission and MM seconded the proposal; **accordingly, it was resolved that the Information Division (ID) Start of Year (SOY) 2026 and End of Year (EOY) 2025 Submission be approved by the Board.**

BK left the meeting.

6.0 Update on Contract for Services with Byrne Wallace Shields

The Board noted the papers previously circulated.

SA provided an update on the Contract for Services with Byrne Wallace Shields and advised that the secondment arrangement for legal services under the contract is necessary to ensure continuity of delivery by HIQA's in-house legal services due to significant temporary absences within the in house team.

LP joined the meeting.

7.0 Six-monthly risk report to the Board

The Board noted the papers previously circulated and that this agenda item had been deferred from the previous Board meeting in January.

Emma Deenihan (ED), Head of Quality Risk and Compliance and Mairead Murphy (MM), Audit and Risk Manager, joined the meeting.

ED presented the Six-Monthly Risk Review Report to the Board. In her presentation she provided an overview of the HIQA Risk Register as of 05 February 2026. The following points were highlighted:

- There had been a net reduction of 39 risks since the previous report to the Board in May 2025. This reflects the in-depth review and deep dive on the risk register undertaken during the Q3 2025 which resulted in the streamlining, re-categorisation and consolidation of risks.

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

- The Risk category of #20-380 in relation to Cyber Security will be reviewed to see whether the operational or reputational category is most appropriate.
- A review of the HIQA's Risk Policy, Handbook and Appetite is on the Board agenda for March 2026.
- Additional information on the mitigations and controls relating to Risk #99 will be included in the next update to the Board, together with an indicative timeline for potential risk reduction and/or closure.
- An update on risk #494 was provided, including the controls in place, with several actions delivered. It was noted that overall improvements have been made and the risk continues to be monitored.
- The actions and controls for risk #124 in relation to HIQA's expanding remit will be reviewed.

The Board noted the update on risk #494 in relation to incompatibility issues with the legacy SharePoint systems impacting one team in HIS, these issues are being resolved with the ID team so they don't impact BPOs.

Susan Montgomery (SM), Head of Human Resources and Organisational Development, joined the meeting at this point.

SM provided an update on risk #127 relating to organisational resources and structures, and advised the following:

- HIQA is currently on track regarding resource requirements, but the organisational restructuring is still outstanding.
- This risk is under ongoing review and assessment to ensure that resources are aligned to the strategic, and future responsibilities and functions of the organisation.

The Board noted the update and that ED would work with SM on rephrasing of risk #127 so that it reflects the progress that has been made on resourcing.

ED and MM left the meeting.

8.0 Human Capital Report

The Board noted the papers previously circulated.

SM presented the Human Capital Report 2025 Year End Summary and highlighted the following:

- An overview of headcount and recruitment, including competition data for 2025.
- An overview of activities of the HR Operations team in 2025.
- Corporate learning and development metrics for 2025.
- Significant training and development activity took place throughout the year and that the programmes were informed by employee feedback and trend analysis.
- The various types of leave taken over the course of the year.
- An update on the HIQA Wellbeing Programme.
- An overview of the HR systems in place.
- As a result of the Excellence Through People Assessment, HIQA maintained its 'Platinum' status for 2025.
- HIQA's recruitment process was independently reviewed by the Commission for Public Service Appointments (CPSA). The review found HIQA's processes are compliant and transparent.

In response to comments and questions from the Board, SM advised that:

- The timeline for recruitment is fifteen weeks on average from the application deadline to the date of starting the new position. The creation of panels has greatly assisted the recruitment process timelines.
- The importance of ongoing efforts to ensure managers are appropriately equipped to support staff and to contribute to a positive workplace culture.

The Board noted the challenges faced by HIQA during the course of 2025 and the support provided by HR in this regard.

The Board acknowledged the significant work carried out during 2025 by SM and her team. They also commended the team on the maintaining the 'Platinum' status.

FOD left the meeting at this point.

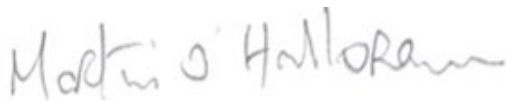
9.0 Any other business

The Chair noted it was CS's final meeting and thanked her for her commitment and valued contribution to the organisation over the past 8 years.

CS thanked the Chair and acknowledged the contribution of the previous Chair, Pat O'Mahony. She commended the work of the organisation and extended her best wishes to the CEO and the Executive Team as the organisation goes from strength to strength.

There being no further business, the meeting concluded at 17.40 pm.

Signed



Martin O'Halloran
Chairperson



Karen Egan
Board Secretary

Actions arising from Board meeting – 12 February 2026

No	Action	Owner	Timeframe
1	Risk category of #20-380 in relation to Cyber Security to be reviewed to see whether the operational or reputational category is most appropriate.	ED/BK	Immediately after meeting
2	Additional information on the mitigations and controls relating to Risk #99 to be included, together with an indicative timeline for potential risk reduction and/or closure.	ED/SE	Immediately after meeting
3	Risk #127 to be rephrased so that it reflects the progress that has been made on resourcing.	ED/SM	Immediately after meeting