

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

1 February 2023, 10am – 2pm  
Board Room, Smithfield Office

**Present:**

<b>Name</b>	<b>Details</b>	<b>Initials</b>
Pat O'Mahony	Chairperson	POM
Marion Meany	Board Member	MM
Martin O'Halloran	Board Member	MOH
Martin Higgins	Board Member	MH
Michael Rigby	Board Member	MJR
Jim Kiely	Board Member	JK
Bernadette Costello	Board Member	BC
Lynsey Perdisatt	Board Member (virtual)	LP
Caroline Spillane	Board Member (virtual)	CS
Paula Kilbane	Board Member	PK

**In Attendance:**

Angela Fitzgerald	CEO	AF
Kathleen Lombard	Board Secretary and Chief Risk Officer	KL
Sean Angland	Acting Chief Operations Officer (for items 9, 14,15)	SA

**Apologies:**

Danny McConnell	Board Member	DMcC
-----------------	--------------	------

**1. Welcome and Quorum**

The Chairperson welcomed Board members to the meeting. A quorum was confirmed and the Board meeting was duly convened. A short Board only session took place in line with the Code of Practice for the Governance of State Bodies where the following items were noted:

- Tony McNamara (TMcN) had advised the Chairperson that he wished to resign from the Board from 31 January 2023. The Board expressed their best wishes to TMcN and it was agreed that the Chairperson would write expressing their appreciation of his membership.
- Following the session on corporate governance in December, it was agreed that the ARGC will undertake further work on the matters discussed and a paper will

be drafted which will focus on updating relevant policies to align with emerging practice.

## **2. Declarations of Interest**

No declarations of interest were raised.

## **3. Minutes of Board meetings**

### **3.1 30 November 2022**

The minutes of the meeting of 30 November 2022 were reviewed by the Board and subject to some minor amendments, it was agreed that they were an accurate record of the meeting. POM proposed approval of the minutes and MH seconded the proposal; **accordingly it was resolved that the minutes of 30 November 2022 be approved by the Board.**

### **3.2 16 December 2022**

The minutes of the meeting of 16 December 2022 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 MM seconded the proposal; **accordingly it was resolved that the minutes of 16 December 2022 be approved by the Board.**

### **3.3 Formal note of email approval by the Board to appoint external member to the Audit Risk and Governance Committee (ARGC)**

The email approval by the Board (12 Jan 2023) was formally noted for the minutes.

## **4. Review of Actions**

KL referred the Board to the paper with an update on the actions arising from the last meeting of the Board and advised that a paper on MOU arrangements will be discussed at the next meeting of the Resource Oversight Committee (ROC). An update on the organisation structure review will be covered during the CEO report item.

## **5. Matters arising**

There were no matters arising.

## **6. Health and safety matters**

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

## **7. Updated HTA Quality Assurance Framework (QAF) – to include Methodology for Generic Justification of Ionising Radiation and the associated Methods document**

Mairin Ryan (MR) Director of HTA, introduced the following members of her team who had delivered this work; Lydia O’Sullivan (LOS) and Dr Patricia Harrington. In addition Aoife McCann (AMcC) Head of Legal Services joined the meeting for this item. A number of papers were included in the Board papers; a Methods document for the Generic Justification function, the revised QAF and checklist, a cover page providing the background to the function and a short presentation.

MR reminded the Board of the context and background of the new function. She explained that the proposed model for the function had been presented to the Board in July 2022, when the Board had approved the delegation of approval of Generic Justification decisions to the Director of HTA.

It was noted that this item had been reviewed by the SIRT committee and as a result, a number of clarifications had been made to the documentation before the Board which are highlighted in red.

The Board considered the methodology and revised Quality Assurance Framework and a number of further points were clarified by the Executives:

- If a decision is made not to justify a new practice, the rationale will be published
- Transparency of decision making is part of the evidence synthesis
- An appeals process is part of the methodology
- Additional or emerging evidence will be examined as part of the appeal process
- Practices already in operation are subject to enforcement processes
- There is a solid framework supporting the function which will provide for exceptions and issues, should these arise.

MJR confirmed that there had been detailed and constructive discussion at the SIRT committee and he reflected his appreciation of the changes made as a result. He also raised two additional points for the Board to consider:

- Assurances for the Board on the robustness of the conflict of interest process for the Expert Advisory Group and
- The scope of the Director of HTA’s role in the process.

The Board discussed these points in detail and it was noted that there are strong governance arrangements in place that are subject to review. In addition, MR confirmed that any issues or divergence that arise will be brought to the Board and that there will be annual reporting on any conflicts declared by the EAG.

It was also agreed, given the regulatory nature of this function, that the Regulation committee would provide appropriate oversight on behalf of the Board.

The Board indicated their unanimous satisfaction with the methods document presented and the updated QAF. MOH proposed approval of the updated QAF to include Methodology

for Generic Justification of Ionising Radiation and the associated Methods document and JK seconded the proposal. **Accordingly it was resolved that the updated QAF to include Methodology for Generic Justification of Ionising Radiation and the associated Methods document be approved by the Board.**

## **8. HTA of repatriation of paediatric hematopoietic stem cell transplant services (HSCT) to Ireland**

MR introduced the following members of her team who had worked on this HTA; Dr Helen O'Donnell (HOD) Dr Susan Spillane (SS) and Dr Patricia Harrington.

MR introduced the HTA advising that the HTA Process Outline had been approved by the Board in April 2022 and the HTA was carried out in line with the Quality Assurance Framework (QAF).

HOD presented on the HTA and provided the background and context to HSCT, the stages involved in the Process Outline, the key milestones of the project and summarised the key advices that, subject to Board approval, will be presented to the Minister.

MJR, Chair of the SIRT stated that the Committee reviewed the report in detail and made a number of suggested clarifications. MJR thanked the Executive for including these clarifications in the draft before the Board. A further minor clarification was sought in respect of costs arising from ancillary services.

Subject to the inclusion of this clarification, MM proposed approval of the HTA of repatriation of HSCT services to Ireland and MOH seconded the proposal; **accordingly it was resolved that the HTA of repatriation of HSCT services to Ireland be approved by the Board.**

## **9. Call off contract "Discovery and Design for DER project"**

Sean Angland (SA) Acting Chief Operations Officer, presented this item and referenced the Board meeting in December 2022 when the Board approved a framework agreement with Codec-DSS Limited to deliver an integrated regulatory management system (DER project). That framework provides for individual call-off contracts for the delivery of specific tranches of work as part of the overall project and this is the first of these call-off contracts.

SA advised that the ROC had reviewed the deliverables for the contract and a number of clarifications had been provided. He advised that because of the value of the contract, it is now before the Board for approval.

AF also advised that the DER governance arrangements will be presented to a joint meeting to the Audit Risk and Governance and Resource Oversight Committees in the coming week.

MH proposed approval of the Call-off contract for the "Discovery and Design" phase of the DER project" and BC seconded the proposal; **accordingly it was agreed that the call-off contract for the "discovery and design" phase of the DER project be approved by the Board for approval.**

## 10. Board Work Plan 2023

KL presented the Board Work Plan for 2023 and explained that the plan reflects the matters for Board attention during the year as well as ensuring that governance requirements are met. KL advised that scheduled items may be subject to change, based on the timing of when certain pieces of work are delivered.

The Board considered the plan and indicated their agreement. POM proposed approval of the Board work plan for 2023 and BC seconded the proposal; **accordingly The Board work plan for 2023 was approved by the Board.**

## 11. CEO's Report – key strategic and operational matters

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

AF presented the report and explained that a number of changes have been made since the last report including adding a table summarising the key legislative pieces of immediate relevance to HIQA. In this context, AF confirmed that AMcC will present at the March Board meeting on the legislation reforms that are in train. AF highlighted the following items:

- Issues relating to corporate governance and organisational matters including
  - o Work with the ARGC and developments in the Quality Risk and Compliance Unit
  - o A review of blended working arrangement which is due to commence shortly and will focus on productivity, connectivity, culture and flexibility
  - o Workforce Planning is in progress and is focussing on 3 areas; new commencements, the organisational restructure project and core support functions
  - o Draft proposals on the organisational restructure are being developed and will be brought to the ROC in the near future for consideration.
- International Protection Accommodation Services (IPAS - Direct Provision)  
A number of pilot inspections of IPAS centres have taken place since the last Board meeting. Reports will be drafted on these inspections. The Board noted the complexities and difficulties associated with this function.
- Monitoring of Emergency Departments against National Standards  
Following publication before Christmas of the Overview of Inspection findings of Emergency Departments, four areas were highlighted for services to focus on. Further inspections are scheduled for early 2023. It was noted that the report and subsequent media attention had brought greater clarity and a broader focus to Emergency Department challenges.
- Human Tissue Bill – the scope of HIQA's role under this legislation has extended to include the regulation of specific aspects of the conduct of coronial post mortems.

- HTA Directorate  
Considerable progress has occurred in consolidating the Directorate staffing arrangements. This enables an agile and comprehensive response to requests for HTA and evidence synthesis work.
- Health Information Reform  
Considerable engagement has been ongoing with the Department of Health (DoH) on issues relating to the proposed health information reform. There are a number of areas identified in terms of policy and these broadly reflect the position paper published by HIQA in October 2021. In addition there are a number of infrastructural changes and HIQA will continue to engage on these factors in terms of inputting to the new Bill and other implementation considerations.

The Board considered HIQA's supportive role on this important issue to be appropriate and necessary for bringing about the best solution for the public in the longer term.

- Digital and Data Transformation strategy (DDTS)  
A summary of the programme of work that is being undertaken as part of the DDTS was included in the CEO report, such as data classification, cyber security initiatives, and plans for new video conferencing and firewall upgrades.

The Board complimented AF on a succinct, yet informative report. It was noted that the table on the legislative reforms was particularly useful in setting out the scope, status and recent developments of the discrete entries.

## **12. Chief Inspector (CI) report**

CG introduced her report and advised that she had amended the structure of the report so that there is more focus on key changes. It was agreed that more detail will be brought to the Regulation Committee. CG highlighted the following from her report:

- Designated Centres for Older Persons (DCOP)
  - o At the end of 2022, there was a reduction of 11 nursing homes over the period since the end of 2021, with a consequent reduction in available beds
  - o Providers have cited the gap between their National Treatment Purchase Fund (NTPF) rate and inflation as a core reason for closure
  - o Inflationary pressures are also impacting residents as some providers are placing additional charges on residents or are increasing their charges
  - o The number of unexpected deaths are lower than 2020 and 2021, but still considerably higher than the pre-pandemic years
  - o Nursing home Providers have reported difficulties with sustaining adequate numbers of staff. This matter has been escalated to the HSE and the DoH.

In response to the Board's observations on the points highlighted, CG advised that a round table discussion is being arranged with key stakeholders on matters impacting the nursing home sector. The Board welcomed this development.

In addition, it was clarified that it is unclear why there is a relatively high rate of deaths in nursing homes. Views from the sector suggest a variety of factors such as it being a reflection of mortality trends in the wider community, a subsequent outcome of the impact of the pandemic or that it may be related to late or non-diagnosis of disease.

- Designated Centres for Disability Services

- o There has been an increase in the number of centres for people with disabilities but residential capacity remains a challenge
- o The government plan to move responsibility from the DoH to the Department of Children, Equality, Disability, Integration and Youth (DCEDIY) is anticipated to occur on 1 March 2023
- o The Chief Inspector has been concerned about the capacity of providers in the context of compliance with the regulation on governance and compliance and while the rate of compliance improved during 2022, it is still a matter for concern.

- Children's Services

There has been a lot of change in the staffing of the Children's team which impacts on the number of inspections that can be delivered. There will be a considerable focus during 2023 on training and induction to ensure new staff are equipped to carry out their work effectively.

- Legal proceedings

The Board were referred to the summary of legal proceedings contained within the report.

The Board thanked CG for a detailed and comprehensive report and CG and SE left the meeting at this point.

### **13. Report from Board Committees**

#### Resource Oversight Committee (ROC)

- Meeting 30 January 2023:

LP, Chair of the ROC reported that this meeting was to review the Call-off contract arrangements for the first contract from the overall framework agreement for the DER project – this item has been addressed by the Board.

- Meeting 16 December 2022:

LP reported that this meeting was to review the overall Framework agreement with Codec-DSS for the DER project – this contract was subsequently approved by the Board.

## Audit Risk and Governance Committee (ARGC)

- Meeting 17 January 2023

BC, Chair of the ARGC, reported that the Committee had:

- o Agreed a draft internal audit plan which will be finalised at their next meeting
- o Reviewed the internal audit report on the system of internal controls which had shown strong internal control arrangements
- o Reviewed the finance report to the end of November 2022 (included in Board papers)
- o Agreed the ARGC annual assurance report (included in Board papers)
- o Reviewed a report on HIQA's statutory compliance (included in Board papers)
- o Reviewed HIQA's corporate risks.

In addition, the committee carried out a review of the effectiveness of the internal audit service and the outcome will be shared as feedback to the service provider.

- Meeting 12 December 2022

BC reported that the committee had:

- o Reviewed the Internal Audit report on recruitment processes. No high priority findings were identified and the report demonstrated that reasonable assurances can be placed on the adequacy and effectiveness on the internal controls in this area
- o Reviewed a report from DHKN accountants, who carried out the audit of the 2021 financial statements on behalf of the C&AG. The Committee had a closed session with the C&AG representative, without executives present, in line with governance requirements, who confirmed there were no issues of concern with the internal control environment.

## SIRT Committee – 19 January 2023

MJR, Chair of the SIRT committee advised that the

- HTA of HSCT repatriation was reviewed in detail – this item has been addressed by the Board
- A work plan for the committee for 2023 was agreed.

## Regulation Committee - 2022

JK, Chair of the Regulation Committee advised that the Regulation Committee is due to meet later this month.

## **14. Corporate Performance Report and Corporate Risk Review**

- Corporate performance

SA presented the corporate performance report to the end of 2022 which provides a full account of the delivery of the annual business objectives for 2022. It was noted that of the 97 objectives, 10 have not been completed within 2022. A clear rationale is included in the report for the variances where the delivery is timing related and will be either delivered in early 2023, or carried forward into the business plan for 2023. A further two objectives could not be achieved due to external factors.

The Board noted the significant delivery of the 2022 plan and the management actions for those that remain outstanding.

- Risk management

KL referred the Board to the risk register cover page which summarises the key changes to the corporate risks since the last meeting of the Board.

KL advised that a review of risk management will be finalised shortly, following which it is likely that there will be some changes to aspects of the risk management policy.

The Board thanked KL for her report.

## **15. Finance report**

SA presented the Finance Report to the end of November and advised that the report was considered by the ARGV at their recent meeting. SA advised that since the ARGV meeting, additional information is now available on the end of year position and that the grant available from the DoH has been fully drawn down.

BC, Chair of the ARGV confirmed that the Committee had reviewed the finance report in detail and were assured of effective financial management over the year.

The Board thanked SA for the finance report.

## **16. Human Capital Report – end of year position**

Susan Montgomery (SM) Head of HR and Organisational Development joined the meeting for this item and presented a full overview report for 2022 which included commentary and context to the figures. The report included details on:

- The numbers of starters and leavers during the year
- The annual turnover rate
- Factors underlying attrition such as a competitive market and career progression
- The decision to place a dedicated focus on retention strategies
- The ongoing close management of agency staff numbers
- The status on the programme of recruitment and
- Types of absence and rates.

The Board thanked SM for a comprehensive and clear picture of staffing metrics. In response to the Board's observations, SM clarified that initial findings on the interim blended model of working were positive but perspectives may have changed with the

passage of time. In that context she confirmed that issues around this will be probed when undertaking the review of the working model.

It was also noted that the report on the Gender Pay Gap should reflect the public sector pay scale model which means that salaries cannot be discriminatory.

SM left the meeting at this point.

## **17. ARGC annual assurance report**

BC introduced the annual assurance report from the ARGC, the purpose of which is to support the Board's review of the effectiveness of the systems of internal control instituted and implemented by management.

The report provides the basis of assurance to the Board from the following sources:

- Executive management assurances on the controls for delivering the internal support functions and the external facing functions
- The 2022 internal audit programme
- The audit by the Comptroller and Auditor General
- Risk management and
- Reviews of financial statements.

BC also referred the Board to the report on HIQA's statutory compliance which lists HIQA's statutory obligations. The report was reviewed by the EMT and a number of actions were agreed to enhance compliance.

The Board reviewed the report from the ARGC and noted the Board's responsibility for annually reviewing the effectiveness of HIQA's internal controls systems. The Board confirmed their satisfaction that the internal controls and risk management systems in place during 2022 were operating well and were adequate.

The Board thanked BC for the work of the ARGC and for providing the assurance report.

## **18. Chairperson's report**

The Chairpersons report was noted.

## **19. Any other Business**

It was highlighted that the European Public Health Conference will take place next November in Ireland and it would be important for HIQA to be represented. The details of the conference will be circulated to the Board.

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

**Signed:**



---

Pat O'Mahony  
Chairperson



---

Kathleen Lombard  
Board Secretary

## Actions arising from Board meeting on 1 February 2023

No	Action	Person Responsible	Time-frame
1	Letter on behalf of Board expressing their appreciation of his membership.	KL/POM	immediate
2	Draft paper with focus on updating relevant policies to align with emerging practice.	KL/ARGC	April
3	Include further minor clarification in HTA on HSCT on costs arising from ancillary services	MR	Immediate
4	Circulate the details for the Public Health Conference in November	KL/MJR	Immediate
<b>Actions carried forward from previous meetings</b>			
1	Proposals on the org structure will be presented to the Board at their next meeting.	AF	Verbal update provided 1 Feb
2	When relevant documents for the DER project have been finalised, they will be presented to the ROC for review and then to the Board for approval the contract	AF/BK	Reviewed by Board on 15 Feb
3	Impact of new Protected Disclosure Act on operations will be considered further by the Commencements Governance Group and outlined to the Regulation Committee when complete.	CG	Following completion of commencements group work
4	Review of MOU arrangements will come to the ROC for further discussion.	AF/Head of Legal	Timeline moved to March ROC
5	Regulation committee to maintain oversight of developments on OPCAT. A report will come back to the Board at the appropriate time.	JK/KL	When appropriate

### On hold actions

1	CEO and Chairperson to meet with the HRB to explore what is being done in the area of technology research	POM/PQ	To be activated now that new CEO is in position
---	---	--------	---