



RQIA Board Meeting

Date of Meeting	20 September 2018
Title of Paper	Public Session Minutes
Agenda Item	9
Reference	Min/July18/Public
Author	Saoirse Wilson
Presented by	Prof. Mary McColgan
Purpose	To share with Board members a record of the previous meeting of the RQIA Board.
Executive Summary	The minutes contain an overview of the key discussion points and decisions from the Board meeting on 5 July 2018.
FOI Exemptions Applied	None
Equality Impact Assessment	Not applicable
Recommendation/Resolution	The Board is asked to APPROVE the minutes of the Board meeting of 5 July 2018.
Next steps	The minutes will be formally signed off by the Chair and will be uploaded onto the RQIA website.



PUBLIC SESSION MINUTES

RQIA Board Meeting

Boardroom

5 July 2018

Present

Prof Mary McColgan OBE
(Acting Chair)
Patricia O'Callaghan
Dr Norman Morrow OBE
Denis Power
Lindsey Smith
Seamus Magee OBE
Gerry McCurdy
Sarah Havlin
Counsellor Brian Heading

Officers of RQIA in attendance

Olive Macleod OBE (Chief Executive)
Lourda Geoghegan (Medical Director and Quality
Improvement Lead)
Theresa Nixon (Director of Assurance)
Malachy Finnegan (Communications Manager)
Jennifer Lamont
Saoirse Wilson (Board and Executive Support
Manager)

1.0 Welcome and Apologies

1.1 MMcC welcomed all members and Officers of the Board this meeting. MMcC welcomed Cllr Brian Heading and advised that speaking rights would be offered. MMcC acknowledged apologies from Board member, Robin Mullan.

2.0 Minutes of the private meeting of the Board held on 30 April and matters arising

2.1 GMcC requested section 10.5 is added as an action point.

2.2 Action 181 will be presented at the September Board Meeting.

2.3 Board members **APPROVED** the minutes of the public Board Meeting held on 30 April 2018, subject to minor amendments.

3.0 Declaration of Interests

3.1 MMcC asked Board members if, following consideration of the agenda items, any interests were required to be declared in line with Standing Orders. No declarations were made.

3.0 Chair's Report

- 3.1 MMcC informed she and the Chief Executive attended the RQIA End of Year Accountability meeting on 20 June 2018.
- 3.2 The acting Chair and the Chief Executive attended the annual Royal College of Nursing event held to celebrate innovation and high quality care within nursing.
- 3.3 A joint RQIA / Royal College of Psychiatrists Seminar was held to highlight ethical issues relating to consent and confidentiality in cases when suicide occurs, as well as the constructive statement which enables service users to consent to family/relative involvement in their care.
- 3.4 MMcC and GMcC attended the NICON Chairs meeting on 24 May. They also attended a medical data seminar which was aimed to help NED's understanding of how statistical data could be presented to support the challenge function of the NED role. GMcC found the meeting enlightening and encouraged Board Members to attend when possible.
- 3.5 MMcC advised three Board Members will participate in Hyponatraemia work-streams being established by the Department of Health.
- 3.6 MMcC attended the Sustaining Collaborative Partnerships Workshop on 15 June which aimed to enhance understanding of respective roles and responsibilities.
- 3.7 MMcC participated in an unannounced review visit to Causeway Hospital on 27 June. The thoroughness of the process balanced observations with professional assessments and collated the different perspectives of the inspection team. Feedback sessions were held for the respective ward staff and senior management. DP asked that Board members have the opportunity to participate in hospital and care inspections.
- 3.8 **Resolved Action 187**
SW to forward opportunities for Board members to attend hospital and care inspections.
- 3.9 MMcC attended a RADaR review meeting with RQIA staff to reflect on a number of operational issues and hear feedback from staff about the domains and intervals. The information gathered was presented at Professor Taylor's International DARE conference and was positively received.
- 3.10 DP acknowledged the acting Chairs contribution and the extensive range of visits undertaken as a measure of the Chairs commitment to RQIA.

4.0 Meetings attended by RQIA Non-Executives

4.1 Norman Morrow advised Board Members that he attended a Hyponatraemia work group briefing session.

5.0 Risk Management Strategy

5.1 The Risk Management Strategy was presented and approved in principle at Audit Committee on 21 June 2018. DP as Chair of the Audit Committee recommends that the Board approve the Risk Management Strategy.

5.2 The Risk Management Strategy was revised with all references to the Australian New Zealand Risk Management Standard removed. The Risk Management Strategy meets all requirements set out by the HM Treasury 'The Orange Book Management of Risk'.

5.3 Board members **APPROVED** the Risk Management Strategy

6.0 Corporate Risk Assurance Framework Report

6.1 The Corporate Risk Assurance Framework Report has been extensively revised and was presented at Audit Committee on 21 June 2018. It is a summary of risks currently present in RQIA and includes background information as to the nature of the risks.

6.2 DP alerted Board members to a new risk in relation to RQIA's IConnect system which will soon be out of license. Work is ongoing in the development of a business case to address this risk

6.3 Risk 14 relates to the COPNI Investigation and will be revisited once RQIA have submitted their response to the COPNI Investigation

6.4 DP recommended the Corporate Risk Assurance Framework Report as current and asked Board members to approve.

6.5 Board members **APPROVED** the Corporate Risk Assurance Framework Report.

7.0 Corporate Performance Report

7.1 The Corporate Performance Report presents a cumulative picture of corporate performance and summarises key achievements and issues for the year.

7.2 OM advised the majority of corporate objectives have been achieved. Some slippage has occurred in a number of areas in relation to one audit which has been deferred until then end on June. The Review Programme is on target with the exception of one Review which is due to be published in October.

- 7.3 Plans to zero base budgets have been delayed as the current restructure of RQIA has taken longer than expected. OM noted it was unlikely that zero basing budgets will be achieved this year, but advised that work has begun to align budgets to the new structure.
- 7.4 GMcC queried the status of the lease of RQIA's premises. OM advised RQIA have a further two years on the current lease. Belfast Optimisation Project will complete an assessment of needs based on our model with a view to relocating. Once the restructure is completed and teams have been aligned it will provide a clearer picture of core staff required to be in the office every day.
- 7.5 DP noted action 2.4 provides an ideal opportunity to look at lessons learnt through the COPNI investigation. DP suggested in light of recent media attention action 3.1 should be reviewed at the September Board Meeting.
- 7.6 **Resolved Action 188**
Communications and Engagement Strategy taking account of HSC PPI Standards to increase the publics' awareness of the role and function of RQIA to be reviewed at the September Board meeting.
- 7.7 **Resolved Action 189**
Language in action 4.4 of the Corporate Performance Report should be changed from 'significant underspend' to 'irregular underspend' in keeping with language used by auditors in financial reports.
- 7.8 GMcC queried if RQIA hold a list of residents living in care homes. OM advised RQIA do not due to data protection but informed that if a complaint or compliment is made regarding a specific service user this is done so using a unique identifier number that allows inspectors to follow up on issues.
- 7.9 OM advised of the constraints of conducting unannounced inspections. The majority of questionnaires returned after an inspection are from staff. In an attempt to receive more feedback from residents and family members, Inspectors now leave cards with their contact details in residents' rooms when on inspection.
- 7.10 DP asked for clarity of the Patients Client Councils role in regards to feedback from care home service users. OM advised they share information if they receive a complaint or concern as does the Ombudsman but these are in very small numbers.
- 7.11 OM informed Board Members of a successful recruitment campaign and noted the strength of the candidates that applied. Over 140 applicants received, 66 were shortlisted, five vacancies have been filled and 25 applicants have been placed on a waiting list.

- 7.12 TN advised the use of lay assessors on inspection has increased by 25% however also discussed the difficulty in sourcing available lay assessors at short notice. OM advised that representatives from RQIA have been attending the Pensioners Parliament to inform of opportunities available for people to join our team of lay assessors. LG informed that every hospital inspection has at least one lay assessor who plays a hugely important part of the team.
- 7.13 GMcC sought assurances about the monitoring arrangements of 'areas for improvement' that have been stated more than once. OM advised that a number of 'areas for improvement' are restated due to the fabric of the building. RQIA continue to monitor these issues.

8.0 Audit Committee Business

- Approved Minutes of Meeting of 3 May 2018
- Audit Committee Annual Report 2017/18
- Update on Board Governance and Effectiveness Review

- 8.1 The minutes and action points of the Audit Committee meeting held on 3 May 2018 were presented to the Board for approval.
- 8.2 DP informed Audit Committee members completed a self-assessment of audit effectiveness using a new template devised by NIAO. Audit Committee was deemed effective which was agreed with by Internal Audit and NIAO. DP thanked Audit Committee members for their participation and support throughout the year.
- 8.3 Internal Audit confirmed satisfactory assurance in the Board Governance and Effectiveness Review which had taken place the previous year
- 8.4 Audit Committee members were pleased that the Chief Executive and senior team have already taken action to act upon the findings and recommendations of the Information Governance Audit which resulted in limited assurance.
- 8.5 The Audit Committee Annual Report 2017/18 confirmed RQIA have an effective Audit Committee who use of a variety of tools for information gathering which confirms the committee is operating effectively. DP noted he is now happy with how the report is presented in terms of style.
- 8.6 The draft Report to Those Charged with Governance received no qualification and has been approved by Audit Committee.
- 8.7 Assurances have been received from BSO in relation to GDPR requirements.
- 8.8 MMcC thanked DP for the summary of work carried out by Audit Committee which provides the Board with a clear overview and assurance of

governance arrangements. MMcC acknowledged the work of Audit Committee under DP's leadership.

8.9 Board members **APPROVED** the Audit Committee minutes of 3 May 2018.

8.10 Board members **APPROVED** the Audit Committee Annual Report 2017/18.

9.0 Chief Executive's Report

9.1 The Child Protection Governance Review was published in May, fourteen recommendations were made and the report was well received. RQIA also published the findings of a regional clinical audit of the use of mid-urethral tapes for management of stress urinary incontinence in Northern Ireland. This was a long awaited report which has received substantial media interest.

9.2 RQIA have launched a Membership Scheme inviting users of health and social care services, their families and friends to join our scheme to help us design and deliver the best ways of sharing the information we gather. Around 1,000 posters and 10,000 business reply postcards advertising the scheme were distributed to GP surgeries, libraries and care homes across Northern Ireland. Board members queried if the Membership Scheme is open to anyone who wanted to join such as journalists or politicians. OM advised the scheme was open to all.

9.3 As part of our ongoing political engagement RQIA attended the Sinn Féin Ard Fheis in June. This provided RQIA with an opportunity to engage directly with MPs, MLAs, councillors, political advisors and party members on our work. RQIA also attended NIMDTA's Dare to Excel Educational Excellence Day, where RQIA engaged with delegates, and Dr Chris Allen presented an overview of his contribution to the work of RQIA as our ADEPT Clinical Leadership Fellow.

9.4 OM summarised Stakeholder Engagement that she had taken part in and drew attention to a request from the Chief Executives forum to attend every three months to provide an update of ongoing work within RQIA. OM noted the opportunity for information sharing.

9.5 OM advised the COPNI investigation into Dunmurry Manor Care Home was received on 13 June 2018 at 11:00am and that afternoon a team including the Chief Executive, Inspectors, Senior Inspectors and Assistant Directors met to review any immediate learning for RQIA from the report. RQIA are working through a number of substantial findings. The team are considering the content of report and work has already begun on many of the recommendations. A specific focus is being paid to the number of inspections carried out 'out of hours' as a result of one of the Commissioners recommendations. In relation to engagement, RQIA continue attempts to attract people to join our team of lay assessors. The Chair of the Board, Chief Executive and Director of Assurance met with 24 families of Dunmurry Manor Care Home residents to provide an overview of

what RQIA do, the powers that we have and how we use those powers. The most recent report of Dunmurry Manor Care Home was shared with family members. Some family members discussed how the reports are technical and factual. OM advised work is ongoing to address this issue and make reports more user friendly. This is being undertaken alongside the RADaR tool which will help identify risks and will enable more targeted inspection planning. The RADaR tool will also provide an evidence base when facing push back from providers who present a higher risk. A programme of meetings has been scheduled to meet other families with relatives living in Runwood Homes over the next two months.

- 9.6 DP noted that RQIA's Board were presented in the media as not being fit for purpose. DP stated that the Board had received regular presentations and were up to speed with what was happening in Dunmurry Manor Care Home. DP stated his desire that members of the public and the media are aware that RQIA's Board were not blind to issues within Dunmurry Manor Care Home. DP asked that Board Members are engaged in the response to the COPNI recommendations
- 9.7 OM assured Board members that when COPNI announced they would commence this investigation 18 months ago the team re-examined every step from pre inspection to the current day to see if there was anything we could have done differently. RQIA are again reviewing these steps.
- 9.8 GMcC discussed the opportunity to work with the Department to ensure the policy and legislative framework is fit for purpose in the modern day. OM advised of ongoing work with the Department in regards to the Review of the 2003 Order, a gap analysis has been completed but a government will need to be in place in order to amend the 2003 Order.
- 9.9 TN advised of a working group set up with HSCB to analyse trends in relation to the use of unregulated facilities based on the information provided by two Trusts, TN advised of disparity between the two trusts. Work is ongoing and a report will be produced in due course.
- 9.10 DP queried if there was any direct relationship with enforcement action taken and findings from Dunmurry Manor Care Home. OM advised she has reminded inspectors to ensure they do not over correct as a result of increased scrutiny. TN noted many issues relating to staffing shortages with over reliance on agency staff, continuity of care is the issue. TN advised that enforcement action taken has been proportionate
- 9.11 **Resolved Action 190**
A paper detailing common enforcement themes from April 2018 is to be presented at the September Board Meeting.
- 9.12 LS queried if contractual changes are required for inspectors to work weekends. OM advised there is flexibility built into contracts that will not require them to be changed but advised additional costs may be accrued when staff when working past 8pm and weekends.

10.0 RQIA ICT / Digital Roadmap Update

- 10.1 DP noted CR16 and CR17 are listed as high risk in ICT Digital Roadmap. DP advised that if the solutions suggested to mitigate these risks are adopted they would no longer be in the high risk category.
- 10.2 GMcC felt risks relating to Dunmurry Manor should temporarily be raised to high risk.
- 10.3 LG clarified option two is the preferred option for consideration on conclusion of collateral agreement.
- 10.4 Board members agreed to support option two.

11.0 Any Other Business






- 11.1 Councillor Brian Heading, SDLP addressed the Board. MMcC thanked Councillor Heading for attending this board meeting and expressing his views relating to the Commissioner of Older Peoples recent report. MMcC stated she hopes that Councillor Heading leaves the meeting with an informed perspective of how seriously RQIA take these matters. Councillor Heading thanked Board members for the opportunity to attend and left the meeting.

Date of next meeting:
20 September 2018, RQIA Boardroom

Signed M. Mc Colgan
Professor Mary McColgan
Acting Chair

Date 20/9/18.

Board Action List

Action number	Board meeting	Agreed action	Responsible Person	Date due for completion	Status
186	30 April 2018	The protocol and procedure relating to Part II appointments will be reviewed.	Director of Improvement and Medical Director (LG)	20 September 2018	
187	5 July 2018	Board and Executive Support Manager to forward opportunities for Board members to attend hospital and care inspections.	Board and Executive Support Manager (SW)	20 September 2018	
188	5 July 2018	Communications and Engagement Strategy taking account of HSC PPI Standards to increase the publics' awareness of the role and function of RQIA to be reviewed at the September Board meeting.	Communications Manager (MF)	20 September 2018	
189	5 July 2018	Language in action 4.4 of the Corporate Performance Report should be changed from 'significant underspend' to 'irregular underspend' in keeping with language used by auditors in financial reports.	Communications Manager (MF)	20 September 2018	
190	5 July 2018	A paper detailing common enforcement themes from April 2018 is to be	Director of Assurance (TN)	20 September 2018	

		presented at the September Board Meeting.			
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