



RQIA Board Meeting

Date of Meeting	23 March 2017
Title of Paper	Public Session Minutes
Agenda Item	2
Reference	Min/Jan17/public
Author	Hayley Barrett
Presented by	Dr Alan Lennon
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 19 January 2017.
FOI Exemptions Applied	None
Equality Impact Assessment	Not applicable
Recommendation/ Resolution	The Board is asked to APPROVE the minutes of the Board meeting of 19 January 2017.
Next steps	The minutes will be formally signed off by the Chairman and will be uploaded onto the RQIA website.

PUBLIC SESSION MINUTES

**RQIA Board Meeting
Boardroom, RQIA
19 January 2017, 10.30am**

Present

Dr Alan Lennon OBE (Chair)
Patricia O'Callaghan
Stella Cunningham
Lindsey Smith
Gerry McCurdy
Sarah Havlin
Dr John Jenkins CBE
Robin Mullan
Dr Norman Morrow OBE
Denis Power
Prof Mary McColgan OBE
Seamus Magee OBE

Officers of RQIA in attendance

Olive Macleod (Chief Executive)
Maurice Atkinson (Director of Corporate Services)
Theresa Nixon (Director of Mental Health, Learning
Disability and Social Work)
Kathy Fodey (Director of Regulation and Nursing)
Lourda Geoghegan (Medical Director and Quality
Improvement Lead)
Malachy Finnegan (Communications Manager)
Hayley Barrett (Board and Executive Support
Manager)

Apologies

Daniel McLarnon

1.0 Agenda Item 1 - Welcome and Apologies

- 1.1 The Chairman welcomed all members and officers of the Board to this meeting. The Chairman advised that Lindsey Smith would be late and apologies were acknowledged from Daniel McLarnon. The Chairman welcomed and congratulated Hayley Barrett on obtaining the Board and Executive Manager permanent position. The Chairman advised that the Board would be joined by John Murray, BSO Internal Audit in relation to the Board Effectiveness and Governance audit. The Chairman welcomed Lourda Geoghegan, Medical Director and Quality Improvement Lead to the organisation.
- 1.2 The Chairman invited the Medical Director and Quality Improvement Lead to say a few words. The Medical Director and Quality Improvement Lead advised that her role would be to have responsibility of medical issues, officer for Medical Colleagues across the HSC sector. The Medical Director and Quality Improvement Lead advised that her role as Quality Improvement Lead would review the internal and external capabilities and capacity to identify how we drive change in line with the Quality Improvement agenda. The Medical Director and Quality Improvement

Lead advised that there is a statistician working with RQIA to identify what information we hold and how we can use this information going forward.

2.0 Agenda Item 2 - Minutes of the public meeting of the Board held on Thursday 10 November 2016 (Min/Nov16/public)

2.1 The Board **APPROVED** the minutes of the meeting of the Board held on Thursday 10 November 2016.

3.0 Agenda Item 3 - Matters arising from minutes

3.1 The Board noted that actions 101, 132, 133, 136 and 137 are included on the agenda and will be presented to the Board at the meeting. Action 134 will be discussed in the Chairman's report. Action 135 has been tabled for Board members information. Action 127 is due to be tabled in March 2017.

4.0 Agenda Item 4 - Declaration of Interests

4.1 The Chairman 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.

5.0 Agenda Item 5 - Chairman's Report

5.1 The Chairman noted that he has had a series of meetings since the last Board meeting and highlighted his attendance at a meeting with the Chief Executive and Health Improvement Scotland. The meeting reflected that Health Improvement Scotland are facing similar challenges to that of RQIA. The Chief Executive added that Health Improvement Scotland have recorded their inspection reports on their risk register as they believe they can become better at report writing. It has been agreed that RQIA and Health Improvement Scotland will work together and peer review each other's reports.

5.2 The Chairman advised that the Board Effectiveness Group met following the Board meeting on 10 November 2016, to plan and look forward to the next meeting. The meeting is used to form the agenda and identify to the Executive Management Team the papers that are required for the next meeting. The Group met again pre-Board meeting. The pre-meeting is used as a quality assurance process to ensure that the Board's time is used effectively.

5.3 A Board member asked for clarification on who was part of this Group. The Chairman advised that two Board members, the Chief Executive and the Chairman form this group. A Board member advised that there has only been a few of these meetings and the Terms of Reference is currently being defined and refined. Another Board member added that the role of this Group needs to be clear.

5.4 The Chairman advised that one paper was removed from the current

agenda and one paper was requested to have further amendments made. The attendance at these meetings will rotate over time to ensure all Board members gain experience.

5.5 The Chairman noted that as per the Standing Orders membership of Board Committees and Panels should be reviewed; however it is not the intention to change this unless requested. The Chairman advised that the Committee membership list will be forwarded to Board members.

5.6 Resolved Action (138)

The Board and Executive Support Manager will issue Committee and Panel membership to Board members

5.7 A Board member asked for clarification on whether Audit Committee members are able to sit on Enforcement Panels, this would also be applicable for the Part II / SOAD Panel. The Chairman advised that a meeting will be arranged with the Chairman, the Chief Executive, Chair of Audit Committee, the Chair of the Part II / SOAD Panel with Internal Audit to obtain clarification.

5.8 Resolved Action (139)

A meeting will be convened with the Chairman, Chair of Audit Committee, Chair of the Part II / SOAD Panel with Internal Audit for clarification on involvement in Enforcement Panels

5.9 The Director of Regulation and Nursing suggested that if Panel members are excluded from enforcement panels a rota should be in place to ensure that all Board member get experience of enforcement panels.

5.10 The Chairman invited a Board member to highlight the ongoing issues with Board members iPads and emails. The Board member stated that this has been going for a number of months. Board members highlighted that they wish to understand the issues, where we are now and what is happening going forward.

5.11 The Director of Corporate Services advised that there was a meeting on 18 January 2017 with ITS who advised that the issues are being resolved as they are reported. The Director of Corporate Services advised that any 'technical' issues, to include email and opening documents must be referred to ITS and any issues with BoardPad should be referred to the Board and Executive Support Manager. Contact details for ITS will be forwarded to all Board members. The Director of Corporate Services informed Board members that Stephen Muldoon, RQIA's ITS contact person, has offered to facilitate sessions to solve any outstanding iPad issues.

- 5.12 **Resolved Action (140)**
The Board and Executive Support Manager will forward ITS contact information to Board members
- 5.13 **Resolved Action (141)**
The Director of Corporate Services will arrange sessions with Stephen Muldoon to resolve any outstanding iPad issues
- 5.14 The Board NOTED the Chairman's Report.
- 6.0 **Agenda Item 6 - Draft Corporate Strategy 2017-21 (A/01/17)**
- **Draft Consultation Letter**
 - **Draft Consultation Questionnaire**
 - **Equality Screening of Strategy**
- 6.1 The Chairman advised that the Board has responsibility for approving the Corporate Strategy and that a suite of performance measures will be developed by the Chief Executive and team for incorporation into the 2017-18 Business Plan.
- 6.2 The Director of Corporate Services thanked Board members for their comments and advised that all comments received have been discussed with the Chairman and where appropriate have been included. The Director of Corporate Services has advised that guidance is being sought to advise if RQIA can go out to consultation on the Corporate Strategy. It was confirmed that if RQIA are unable to consult on the Corporate Strategy a Business Plan will still be developed.
- 6.3 Board members suggested minor amendments to the Draft Corporate Strategy for consideration by the Director of Corporate Services.
- 6.4 **Resolved Action (142)**
The Director of Corporate Services will make minor amendments to the Corporate Strategy 2017-21 prior to public consultation
- 6.5 **Resolved Action (143)**
Finalised draft of the 2017-21 Corporate Strategy to be presented at the May Board meeting for approval following consideration of feedback from the public consultation and public engagement events
- 6.6 The Board APPROVED the Draft Corporate Strategy 2017-21.
- 6.7 Board members suggested that the Draft Consultation Letter is amended to reflect that there are no outcome measures included in the Draft Corporate Strategy 2017-21.
- 6.8 **Resolved Action (144)**
The Director of Corporate Services will make minor amendments to

the consultation letter prior to public consultation.

- 6.9 The Board **NOTED** the Draft Consultation Letter.
- 6.10 The Director of Corporate Services noted that the Draft Consultation Questionnaire has been reviewed and revised following the Corporate Strategy Steering Group meeting on the 23 December 2016. The Director of Corporate Services noted that it is hoped that two public consultation events will take place to receive feedback on the Corporate Strategy, previously feedback has been useful and used within the Corporate Strategy.
- 6.11 The Board **APPROVED** the Draft Consultation Questionnaire
- 6.12 The Board **NOTED** the Equality Screening of the Strategy
- 7.0 Agenda Item 7 - Policy and Procedure on the Management and Handling of Complaints against RQIA (B/01/17)**
- 7.1 The Chief Executive noted that the changes to the Policy and Procedure on the Management and Handling of Complaints against RQIA were made following an audit.
- 7.2 Board members requested a copy of the amended Policy and Procedure on the Management and Handling of Complaints against RQIA.
- 7.3 Resolved Action (145)**
The Board and Executive Support Manager will forward a copy of the revised Policy and Procedure on the Management and Handling of Complaints against RQIA
- 7.4 Board members **APPROVED** the Policy and Procedure on the Management and Handling of Complaints against RQIA
- 8.0 Agenda Item 8 – Enforcement Procedures (C/01/17)**
- 8.1 The Director of Regulation and Nursing noted that the Enforcement Policy was presented and approved by the Board in January 2016. A project has been established for the development of the enforcement procedures, which have been included in the iConnect system.
- 8.2 The Director of Regulation and Nursing noted that the Enforcement Procedures are now for use throughout the organisation and not only the Regulation Directorate, therefore the language in the procedures reflects the language used in the 2003 Order.
- 8.3 The Director of Regulation and Nursing noted that all administrative and inspector staff within the Regulation Directorate have been fully trained on these procedures and Board member training will be arranged. The training will follow a format of scenarios which has previously worked well

before.

8.4 Resolved Action (146)

The Director of Regulation and Nursing will arrange training on Enforcement Procedures for Board members

8.5 A Board member suggested that within the Enforcement Procedures document two sections 3.6, 8.1 and 8.2 should be highlighted in bold.

8.6 Resolved Action (147)

The Director of Regulation and Nursing will make minor amendments to the Enforcement Procedures, document two

8.7 A Board member suggested that an outcomes section is included on template two, Report of Enforcement Review Panel Decision. The Director of Regulation and Nursing advised that this is available on the cover letter but will consider including it on the template.

8.8 Resolved Action (148)

The Director of Regulation will include an outcome section on template two of the Enforcement Procedures

8.9 Board members **NOTED** the Enforcement Procedures

9.0 Agenda Item 9 – Communication Plan (D/01/17)

9.1 The Chairman advised that the Communication Plan was originally for approval, however following further conversations it has been decided that the Communications Plan requires further work and dialogue with the short term working group.

9.2 Board members advised that the paper has not been finalised at the short term working group on the development of this plan. The Chief Executive advised that the short term working group would reconvene to further develop this plan.

9.3 Resolved Action (149)

The Chief Executive and Communications Manager will meet with the Board members from the short term working group to amend and develop the Communication Plan

9.4 Board members suggested that in line with the Corporate Strategy the plan should include engagement. Communication and engagement are separate, but closely aligned with one another. The Board should also be considered in the structure of communication within RQIA.

9.5 Board members **NOTED** the Communication Plan

10.0 Agenda Item 10 – Chief Executive’s Report (E/01/17)

- 10.1 The Chief Executive presented her report to the Board. The Chief Executive noted that her report format has been updated since the last Board meeting in November 2016.
- 10.2 The Chief Executive noted that RQIA have been asked to participate in a working group with the Competition and Markets Authority UK.
- 10.3 The Chief Executive noted that the organisational review being undertaken by the HSCLC is on-going.
- 10.4 The Chief Executive advised that a meeting with liP assessor has taken place and the external assessment will commence in Quarter 4 of 2016-17.
- 10.5 The Chief Executive noted that the draft MOUs will be presented to the RQIA Board at a future meeting, the approach to the MOUs is being standardised.
- 10.6 A Board member asked for clarification in relation to the revised Management Statement and Financial Memorandum for RQIA. The Chief Executive advised the Department of Health are reviewing this, but will seek further clarification at the next bi-monthly meeting.
- 10.7 **Resolved Action (150)**
The Chief Executive will follow up on the revised Management Statement and Financial Memorandum at the bi-monthly meeting with the Department of Health
- 10.8 The Chief Executive noted that the Regulation Directorate are meeting their statutory target of inspections. There has been enforcement action taken since the last Board meeting. Foreglen Community Association has withdrawn their appeal to the Care Tribunal. Runwood Homes received three Failure to Comply notices for Dunmurry Manor. The Chief Executive noted that there has been some improvements made but still find difficulty in recruiting full time permanent nursing staff.
- 10.9 The Chief Executive noted that in relation to Dental World Ltd, the General Dental Council has accepted an application for voluntary erasure from the professional register. A Notice of Proposal to cancel registration of the dentist was issued on 19 October 2016. A meeting with RQIA, DOH and HSC Board will be meeting with the General Dental Council to request further information relating to their reason for granting the application for voluntary erasure.
- 10.10 The Chief Executive noted that the phase 2 of the Acute Hospital Inspection programme has started and two of the five hospitals have been inspected.

- 10.11 The Chief Executive noted the voluntary exit scheme has closed for 2016/17. Eight members of staff have been offered and have accepted it. It is anticipated that RQIA will bid for the same amount of 2017-18. The Director of Regulation and Nursing advised that three Band 7 employees are included in the eight staff members; their lost activity will not impact upon the statutory target.
- 10.12 A Board member raised a concern in relation to the MHL D Information System Project on the need to urgently progress this. The Director of Corporate Services advised that the SOC was reviewed at the eHealth Programme Management Group and the Department of Health have since advised that they will consider the outline business case next and have recommended it contains more detail about links with Trust systems. The development of an outline business case will commence shortly.
- 10.13 Board members **NOTED** the Chief Executive's Report
- 11.0 Agenda Item 11 – Finance Report (F/01/17)**
- 11.1 The Director of Corporate Services updated the Board on the financial position as at the end of November 2016. Currently RQIA are forecasting breakeven with an underspend of almost £5000, based on pay and non-pay assumptions.
- 11.2 The Director of Corporate Services noted that RQIA are meeting the prompt payment targets for 30 and 10 days. Debt recovery has been outsourced to BSO with approximately £11000 outstanding. The Director of Corporate Services advised that there are fees outstanding from 2015/16. The recurring savings target for 2017-18 should be received by RQIA during February or March 2017. RQIA has been asked to submit a financial scenario plan to DoH based on 2/5/10/15% savings targets in 2017-18.
- 11.3 The Director of Corporate Services noted that the VES application process was completed in December using ring-fenced funding of £243,000. 8 staff (7.13 WTEs) had been offered VES generating savings of £226,000 from 2017-18 onwards. A further £72,400 is to be re-invested in two new posts in the Regulation Directorate.
- 11.4 Board members **NOTED** the Finance Report.
- 12.0 Agenda Item 12 - Presentation on the review of The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003) (G/01/17)**
- 12.1 The Director of Regulation noted that this presentation will provide an overview of the issues arising from the 2003 Order. The Director of Regulation and Nursing noted that this presentation was presented to the Department of Health in February 2016.

- 12.2 The Director of Regulation and Nursing noted that the domiciliary care agencies regulations and standards are the same for conventional domiciliary care and domiciliary care supported living despite being different. The Director of Regulation and Nursing noted that separate regulations and standards have been requested.
- 12.3 The Director of Regulation and Nursing noted issues arising from the 2003 Order for Independent Healthcare, Laser Clinics, the publication of reports, the meaning and understanding of personal care, residential beds in nursing homes and dormant registrations. It was acknowledged that the Director of Mental Health, Learning Disability and Social Work is working with the Department of Health on the issues arising from the Mental Capacity Bill.
- 12.4 Board members thanked the Director of Regulation and Nursing for the informative presentation and requested further information in relation to the issues / concerns within the Mental Health Directorate.
- 12.5 **Resolved Action (151)**
The Director of Mental Health, Learning Disability and Social Work will give a presentation to the Board on the issues / concerns with MHL D legislation
- 12.6 The Board **NOTED** the Presentation on the review of The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003
- 13.0 **Agenda Item 13 – Proposed Policy Regarding Assessment of New Areas of Work (H/01/17)**
- 13.1 The Director of Mental Health, Learning Disability and Social Work noted that previously RQIA have taken on additional areas of work with no funding and highlight that as resources are continually reducing RQIA must have a policy for the future.
- 13.2 The Chief Executive noted that if the Department of Health ask RQIA to conduct work, RQIA must comply. It was highlighted that RQIA needs a policy to charge or seek funding for the additional areas of work.
- 13.3 The Chairman noted that the purpose of the document is to receive approval from the Board to develop a policy to obtain funding in advance of work commencing. It will include how RQIA will respond in emergency circumstances.
- 13.4 The Chief Executive noted that this policy will enable RQIA to review the skill sets, work plans and costs to ensure that RQIA has the capability and capacity to complete it.

- 13.5 The Chairman noted that the Board are supportive of a detailed policy and procedure to be developed and to ensure that an impact analysis is completed.
- 13.6 **Resolved Action (152)**
The Director of Mental Health, Learning Disability and Social Work will develop a policy, detailed procedures and an impact analysis on the Assessment of New Areas of Work
- 13.7 The Board **APPROVED** the Proposed Policy Regarding Assessment of New Areas of Work
- 14.0 **Agenda Item 14 – RQIA Acute Hospital Inspection Programme – Phase 1 Summary Report (I/01/17)**
- 14.1 The Chief Executive noted that this is a summary of the first five inspections under the Acute Hospital Inspection programme. The paper highlights the high level concerns for the Board to note. The Chief Executive noted that this summary report is with the Department of Health, it is available on RQIA website and it will be forwarded to the Trust Chief Executives.
- 14.2 A Board member requested clarification on the evaluation process, what has been learned and how the process can be improved. The Chief Executive advised that focus groups include staff from wards, AHP and Managers, this then feeds into the process.
- 14.3 A Board member requested the identification of costings to implement, design and complete the programme if this piece of work is to be continuous for RQIA. The Chief Executive advised that a costing exercise is currently being completed. A Board member advised that in order for the true cost consideration must be given to the use of lay assessors, peer reviewers and consultants.
- 14.4 Board members advised that RQIA advised that an external evaluation of the process would be completed and asked for clarification if this would go ahead. The Chief Executive advised that an internal evaluation has taken place, however consideration will be given to an external review.
- 14.5 **Resolved Action (153)**
The Chief Executive will provide a paper to the Board in relation to an external evaluation of the effectiveness and added value of hospital inspections
- 14.6 The Chief Executive noted that the review report has been reduced down to forty pages and there has been very positive feedback from trusts, in relation to the reviews and the reports, it has provided valuable learning and has been a positive experience.

Board Action List

Action number	Board meeting	Agreed action	Responsible Person	Date due for completion
127	9 June 2016	Board members to receive a presentation, at a future Board meeting, on the work of the GAIN team	Chief Executive	23 March 2017
138	19 January 2017	The Board and Executive Support Manager will issue Committee and Panel membership to Board members	Board and Executive Support Manager	16 February 2017
139	19 January 2017	A meeting will be convened with the Chairman, Chair of Audit Committee, Chair of the Part II / SOAD Panel with Internal Audit for clarification on involvement in Enforcement Panels	Board and Executive Support Manager	16 February 2017
140	19 January 2017	The Board and Executive Support Manager will forward ITS contact information to Board members	Board and Executive Support Manager	16 February 2017
141	19 January 2017	The Director of Corporate Services will arrange sessions with Stephen Muldoon to resolve any outstanding iPad issues	Director of Corporate Services	16 February 2017
142	19 January 2017	The Director of Corporate Services will make minor amendments to the Corporate Strategy 2017-21 prior to public consultation	Director of Corporate Services	16 February 2017
143	19 January 2017.	Finalised draft of the 2017-21 Corporate Strategy to be presented at the May Board meeting for approval following consideration of feedback from the public consultation and public engagement events	Director of Corporate Services	11 May 2017
144	19 January 2017	The Director of Corporate Services will make minor amendments to the consultation letter prior to public consultation.	Director of Corporate Services	16 February 2017

145	19 January 2017	The Board and Executive Support Manager will forward a copy of the revised Policy and Procedure on the Management and Handling of Complaints against RQIA	Board and Executive Support Manager	16 February 2017
146	19 January 2017	The Director of Regulation and Nursing will arrange training on Enforcement Procedures for Board members	Director of Regulation and Nursing	6 April 2017
147	19 January 2017	The Director of Regulation and Nursing will make minor amendments to the Enforcement Procedures, document two	Director of Regulation and Nursing	16 February 2017
148	19 January 2017	The Director of Regulation will include an outcome section on template two of the Enforcement Procedures	Director of Regulation and Nursing	16 February 2017
149	19 January 2017	The Chief Executive and Communications Manager will meet with the Board members from the short term working group to amend and develop the Communication Plan	Chief Executive	16 February 2017
150	19 January 2017	The Chief Executive will follow up on the revised Management Statement and Financial Memorandum at the bi-monthly meeting with the Department of Health	Chief Executive	23 March 2017
151	19 January 2017	The Director of Mental Health, Learning Disability and Social Work will give a presentation to the Board on the new Mental Capacity legislation	Director of Mental Health, Learning Disability and Social Work	23 March 2017

152	19 January 2017	The Director of Mental Health, Learning Disability and Social Work will develop a policy, detailed procedures and an impact analysis on the Assessment of New Areas of Work	Director of Mental Health, Learning Disability and Social Work	8 June 2017
153	19 January 2017	The Chief Executive will provide a paper to the Board in relation to an external evaluation of the effectiveness and added value of hospital inspections	Chief Executive	8 June 2017