



The Regulation and
Quality Improvement
Authority

Minutes of Authority Meeting

Date of Meeting	4 November 2021
Title of Paper	Public Session Minutes
Agenda Item	2
Reference	Min/Sept21/private
Author	Hayley Barrett, Business Manager
Presented by	Christine Collins MBE, Interim Chair
Purpose	To provide a record of the meeting of the Authority held on 9 September 2021.
Executive Summary	The minutes contain an overview of the key discussion points and decisions of the Authority meeting on 9 September 2021.
FOI Exemptions Applied	None
Equality Impact Assessment	Not applicable
Recommendation/Resolution	The Authority is asked to APPROVE the minutes of the meeting held on 9 September 2021.
Next steps	The minutes will be formally signed off by the Interim Chair.

PUBLIC SESSION MINUTES

RQIA Authority Meeting
Via Zoom
Thursday 9 September 2021, 12.02pm

Present

Christine Collins MBE (Interim Chair)
(CC)
Neil Bodger **(NB)**
Bronagh Scott **(BS)**
Jacqui McGarvey **(JMcG)**
Suzanne Rice **(SR)**
Alan Hunter **(AH)**

Apologies:

Prof. Stuart Elborn **(SE)**

RQIA Staff in attendance

Briege Donaghy (Chief Executive) **(BD)**
Emer Hopkins (Acting Director of Improvement) **(EH)**
Karen Harvey (Professional Advisor Social Work / Project Lead for Assurance) **(KH)**
Jacqui Murphy (Acting Head of Business Support Unit) **(JM)**
Malachy Finnegan (Communications Manager) **(MF)**
Lynn Long, Acting Deputy Director of Improvement **(LL)**
Julie-Ann Walkden, Deputy Director of Assurance **(JAW)**
Audrey Murphy, (Assistant Director) **(AM)**
Lesley Mitchell (HSCLC Associate) **(LM)**
Sarah Adebambo (BSO Senior Client Accountant) **(SA)**
Hayley Barrett (Business Manager) **(HB)**

1.0 Agenda Item 1 - Welcome and Apologies

- 1.1 The meeting commenced at 12.02pm
- 1.2 CC welcomed all Authority Members and RQIA staff to this meeting. CC welcomed Audrey Murphy, Assistant Director and Sarah Adebambo, BSO Senior Client Accountant, to the meeting.

2.0 Agenda Item 2 – Minutes of the meeting of the Authority held on 12 August 2021 and matters arising

- 2.1 The Authority **APPROVED** the Minutes of the meeting held on 12 August 2021.

2.2 The Authority noted that action 235 and 237 are now complete. Action 236 remains ongoing.

3.0 Agenda Item 3 - Declaration of Interests

3.1 CC asked Authority Members if, following consideration of the agenda items, any interests were required to be declared in line with Standing Orders.

3.2 CC declared an interest due to her position as Chair of the Patient Client Council (PCC), however, DoH has confirmed that the position is time bound and that it is actively seeking to recruit a Chair. CC would recuse herself from dealing with any matters which she considers would constitute a conflict of interest in relation to her respective role as Chair of the PCC.

3.3 BS advised that she is an Associate with the HSC Leadership Centre and is currently seconded to DoH, via HSC Leadership Centre, to advise on COVID surge planning. If any areas arise that cause a conflict she will excuse herself.

3.4 JMcG advised that she is a member of the NI Social Care Council (NISCC) Board and an Associate with the HSC Leadership Centre, currently involved in the Adolescent Forensic Service.

4.0 Agenda Item 4 – Members’ Activity Report

4.1 JMcG advised that she met with BD on 16 August as an introductory meeting.

4.2 AH asked that Members attendance at Authority Meetings and Authority Workshops, participation in Decision Making Panels and SOAD/Part II Panels, and involvement in ad hoc Working Groups is documented within the Members Activity Report.

4.3 **Resolved Action (238)**
Members’ Activity Report to be updated to show attendance at Authority Meetings and Authority Workshops, participation in Decision Making Panels and SOAD/Part II Panels, and involvement in ad hoc Working Groups

4.4 The Authority **NOTED** the Members’ Activity Report.

5.0 Agenda Item 5 – Winter and Services Pressures Resilience Plan 2021/2022

5.1 BD noted that as approved at the last Authority Meeting she had begun to engage with stakeholders.

5.2 BD said that she met with Sponsor Branch and the Trade Union Chair and feedback has been positive. The Plan has been shared with staff and discussed at the staff meeting.

- 5.3 BD said that there will be a lot of work in order to deliver these significant initiatives. She is planning to develop a reporting tool to update the Authority.
- 5.4 BS congratulated BD on the development of this plan. BS noted that RQIA has come a long way to building credibility and transparency and is showing leadership through its commitment and support despite being under pressure. BS queried why there is no explicit identified planning for COVID; and if COVID related activity is being integrated into current expenditure.
- 5.5 BD advised that due to the current scale of RQIA slippage, no separate COVID bids or October Monitoring bids have been made. Actions associated with COVID have been built into the Winter Resilience Plan. BD noted the increased commitment for RQIA to spend the in-year slippage to achieve breakeven.
- 5.6 CC noted that this was a useful plan and acknowledged the commitment from staff.
- 5.7 BD advised that progress reports will be provided in due course. NB thanked BD and saying that he found the report was very useful.
- 5.8 The Authority **APPROVED** the Winter and Services Pressures Resilience Plan 2021/2022.

6.0 Agenda Item 6 – Investors in People (IiP) Re-Accreditation

- 6.1 JM informed the Authority that RQIA received IiP accreditation in 2017 and was reassessed in 2020. JM advised that the assessment in 2020 was a strategic review to enable RQIA to maintain its accreditation for an extension of one year. JM noted that the points in the assessment had increased to 60.
- 6.2 JM outlined that during this assessment there will be a context discussion with the Executive Management Team, a survey issued to all staff and 1-1 engagement with staff. JM noted that work has commenced to build on staff recognition and reward. JM advised that the HSC Leadership Centre and BSO are assisting RQIA with the re-accreditation.
- 6.3 CC noted the importance of staff feeling recognised and valued; and said that the RQIA's staff were its greatest resource and asset..
- 6.4 JMcG suggested seeking advice from other organisations with IiP Accreditation. JMcG also said she would be interested in attending staff meetings, as would all Authority Members. JM advised that there are staff meetings arranged and invitations can be shared with Authority Members for attendance as and when available.
- 6.5 **Resolved Action (239)**
Communications Manager to share invites to staff meetings with Authority Members.

6.6 The Authority **APPROVED** the arrangements for moving forward with Investors in People (IiP) Re-Accreditation.

7.0 **Agenda Item 7 – Finance Performance Report (Month 4)**

7.1 *[In the interest of time, this agenda item was taken at the beginning of the meeting. LM joined the meeting at 12.05pm.]*

7.2 LM presented the Finance Performance Report (Month 4) advising that critical decisions are required to be made following Month 5 in relation to the mid-year position.

7.3 LM advised that a breakeven position has been reported for Month 4, however the Authority should note that the latest best estimate for year end is indicating a growing surplus. LM noted that the Executive Management Team is making decisions in relation to a spending plan for the current surplus within the Winter and Services Pressures Resilience Plan.

7.4 LM informed Members of three assumptions:

1. There will be no slippage on the Deceased Patients Review and the £227K will be spent in full
2. All costs are contained
3. There will be limited further slippage

7.5 LM noted that there has been an over-recovery of £37K income and that there are growing underspends within pay, £22K and non-pay, £61K. LM advised that £63K in respect of the compensation payment has already been recognised and will be removed going forward as an easement is to be made to DoH in respect of this.

7.6 LM outlined the key messages for the Authority that:

- RQIA continues to project a year-end breakeven position of a surplus amounting to £4K;
- The financial position at 31 July is reporting a surplus of £285K;
- A mid-year review will be carried out on Month 5 financial position; and
- The compensation element of the dilapidations settlement has been factored into the financial analysis.

7.7 BD thanked LM for her support and expertise and noted that the report demonstrates a surplus of £280K. BD outlined that elements of the Winter and Services Pressures Resilience Plan have been recognised within the forecast as non-recurrent.

7.8 CC queried why RQIA is not recognising any COVID costs to date. BD advised that this has been taken into consideration and, to date, additional funding is not required. BD advised that any expenditure relating to COVID is integrated into our work. CC asked that COVID related expenditure be identified and captured so that the impact of the Pandemic can be shown notwithstanding the fact that RQIA's individual circumstances mean that additional bids do not need to be made.

- 7.9 JMcG queried if staff were absent with COVID or long-COVID would this become an issue. BD confirmed and advised that she is seeking additional staff to join the bank list to support where practicable as part of contingency planning and winter resilience.
- 7.10 NB queried if non-pay budgets were devolved. LM advised that it is difficult to devolve budgets in year and can be a consideration for 2022/2023.
- 7.11 CC thanked LM for the comprehensive report; and for her help and guidance over the past months.
- 7.12 The Authority **NOTED** the Finance Performance Report (Month 4).
- 7.13 At this point, LM left the meeting (12.30pm)

8.0 Agenda Item 8 – Part II / Second Opinion Appointed Doctors (SOADs) Panel Update

- 8.1 EH presented the Part II / Second Opinion Appointed Doctors (SOADs) Panel Update advising that between April and August 2021, there have been 27 Part II Doctors appointed / reappointed and 11 removed. EH advised that one SOAD had been appointed in the same timeframe.
- 8.2 CC thanked EH for the paper and outlined that the function of Appointed Doctors is an element of RQIA's statutory functions under the Mental Health Order. These are very significant powers involving deprivation of liberty, and decisions on treatment when an individual lacks capacity. CC noted that the timing of the process is dependent upon revalidation by the GMC.
- 8.3 LL told the Authority that RQIA is currently operating with three SOADs, with one currently going through their induction process. LL advised that there are a number of plans being discussed with the DoH in order for it to be more manageable.
- 8.4 The Authority **NOTED** the Part II / Second Opinion Appointed Doctors (SOADs) Panel Update, and asked to be kept updated..

9.0 Agenda Item 9 – Audit and Risk Assurance Committee Update

- **Verbal Update: Meeting of 26 August 2021**
 - **Minutes of Meeting: 26 August 2021**
 - **Risk Management Strategy 2021/2022**
 - **Principal Risk Document (PRD)**
- 9.1 NB, Chair of the Audit and Risk Assurance Committee, presented the minutes of the Audit and Risk Assurance Committee of 26 August 2021, for information. NB advised that a breakdown of SLA costs had been provided to the Committee and he was completing an analysis to review value for money.

- 9.2 NB advised that the Risk Management Strategy 2021/2022 was presented to the Committee for approval. NB noted that the Strategy will be required to be reviewed again following the review of Standing Orders.
- 9.3 NB advised that the Principal Risk Document (PRD) was presented and that it was an improving work in progress, with Members' suggestions being applied. NB advised of a meeting with BD and JM to review the PRD in more detail. NB also advised that he was considering the levels of risk register required for the organisation and it was likely that three levels would be agreed later, to include a Strategic Risk Register, a Corporate Risk Register and Directorate Risk Registers. NB would be working with BD and JM to agree formats.
- 9.4 NB informed Members that an update was provided by Internal Audit on progress to date. A nil return was presented in relation to whistleblowing, fraud and bribery. NB noted that an update in relation to Direct Award Contracts (DAC) was provided and more detail has been requested in respect of a DAC with the Care Quality Commission.
- 9.5 The Authority **NOTED** the Audit and Risk Assurance Committee Update and **APPROVED** the Risk Management Strategy and Principal Risk Document.
- 9.6 NB advised that he met with BD, KH and Senior Managers within the Care Homes Team to discuss new financial models in Great Britain and Northern Ireland. NB advised that this will be discussed at the next meeting of the Audit and Risk Assurance Committee and he will consider adding this to the Risk Register.
- 9.7 At this point, JMcG and SR left the meeting (1.16pm).

10.0 Agenda Item 10 – Five Year Equality Review Report

- 10.1 MF presented the Five Year Equality Review Report advising that this is a reflective review and must be completed every five years. MF advised that BSO Equality Unit complete this on our behalf as part of the Service Level Agreement.
- 10.2 MF noted equality training, attendance at the HSC Tapestry Forum, Human Rights Training, Reviews and other activities that form part of the equality agenda.
- 10.3 MF noted a commitment from the Executive Management Team to have more of a focus on equality across the organisation. MF added that equality impact assessment refresher training will be provided during 2021-2022. MF informed Members that the RQIA Equality Forum will also be re-established.
- 10.4 CC noted the substantial work that has gone into the development of the Review Report and noted the importance of re-establishing the Equality Forum.
- 10.5 BS thanked all for the work completed on this report and noted that unless there is a clear focus on the equality agenda, things can slip. AH commented

that this is a comprehensive and honest report and noted the work to be completed internally. AH asked that an update on the Equality Forum is provided as a standing item at the Business, Appointments and Remuneration Committee meetings.

10.6 Resolved Action (240)

An update on the Equality Forum to be added as a standing item on the agenda of the Business, Appointments and Remuneration Committee.

10.7 The Authority **APPROVED** the Five Year Equality Review Report.

11.0 Agenda Item 11 – Chief Executive’s Update

• **Mental Capacity Act: Update**

11.1 BD advised the Authority that a business case has been submitted to the Department of Health in relation to the Mental Capacity Act. BD advised that it is reflected on the Principal Risk Document and that the Audit and Risk Assurance Committee are fully sighted on same.

11.2 BD noted that there are concerns across the system about capacity to address the issues that come with implementation of the Mental Capacity Act.

11.3 The Authority **NOTED** the Chief Executive’s Update.

12.0 Agenda Item 12 – Any Other Business

12.1 BD advised that she is mindful of the pressures in the health and social care system and that there is ongoing engagement with providers and the Department of Health to ensure a proportionate approach to regulation. BD noted that she has formally written to the Department of Health asking that they consider and advise RQIA in relation to their previous direction in relation in potential variation to some of its functions. A response is awaited.

12.2 AH queried if RQIA could introduce a self-assessment in its inspection programme. BD confirmed that this is already an element of the inspection programme and that a blended approach to inspection which includes remote and onsite, if required, is in place.

12.3 At this point, SA left the meeting (1.47pm).

12.4 NB said that, in future, intelligence received in relation to trends in care homes should better inform the inspection programmes. This was an essential element in RQIA’s development of a modern, intelligence led approach. **This was agreed by the Authority**

12.5 As there was no other business, the Interim Chair brought the meeting to a close at 1.52pm.

**Date of next meeting:
Thursday 14 October 2021 (Workshop)**

Signed

Christine Collins

**Christine Collins MBE
Interim Chair**

Date

4 November 2021

Authority Action List

Action number	Authority meeting	Agreed action	Responsible Person	Date due for completion	Status
236	12 August 2021	Seminar on Registration Activity to be arranged for Authority Members.	Deputy Director of Assurance	7 October 2021	
238	9 September 2021	Members' Activity Report to be updated to show attendance at Authority Meetings and Authority Workshops, participation in Decision Making Panels and SOAD/Part II Panels, and involvement in ad hoc Working Groups	Business Manager	4 November 2021	
239	9 September 2021	Communications Manager to share invites to staff meetings with Authority Members.	Communications Manager	4 November 2021	
240	9 September 2021	An update on the Equality Forum to be added as a standing item on the agenda of the Business, Appointments and Remuneration Committee.	Business Manager	4 November 2021	

Key

Behind Schedule	
In Progress	
Completed or ahead of Schedule	