

AGENDA

RQIA Board Meeting
Virtual Meeting via Zoom
19 November 2020, 10.45am
PUBLIC SESSION

| Item | Paper Ref | |
|--|----------------------|-----------------------------------|
| 1 Welcome and Apologies | | 10.45am |
| 2 Minutes of the public meeting of the Board held on 29 October 2020 and matters arising | Min/Oct20/ public | 10.50am APPROVE |
| 3 Declaration of Interests | | 11.00am |
| 4 Chair's and Members Update <ul style="list-style-type: none"> • Committee Membership Interim Chair | | 11.10am APPROVAL |
| STRATEGIC ISSUES | | |
| 5 Finance Performance Report (Month 6) Lesley Mitchell, Associate HSC Leadership Centre | A/11/20 | 11.25am APPROVE |
| 6 Performance Report: Activity Review (Quarter 1 and Quarter 2) Acting Head of Business Support Unit / Interim Director of Improvement | B/11/20 | 11.40am NOTE |
| OPERATIONAL ISSUES | | |
| 7 Chief Executive's Update Interim Chief Executive | | 11.55am NOTE |
| 8 Any Other Business | | 12.05am |

Date of next meeting: January 2021

RQIA Board Meeting

| | |
|----------------------------|--|
| Date of Meeting | 29 October 2020 |
| Title of Paper | Public Session Minutes |
| Agenda Item | 2 |
| Reference | Min / Oct20 / public |
| Author | Hayley Barrett |
| Presented by | Christine Collins MBE |
| Purpose | To provide Board members with 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 29 October 2020 |
| FOI Exemptions Applied | None |
| Equality Impact Assessment | Not applicable |
| Recommendation/ Resolution | The Board is asked to APPROVE the minutes of the Board meeting on 29 October 2020. |
| Next steps | The minutes will be formally signed off by the Chair. |

PUBLIC SESSION MINUTES

| | |
|--|---|
| RQIA Board Meeting Via Zoom 29 October 2020, 10.00am | |
| Present Christine Collins MBE (Interim Chair) (CC) Chris Matthews (CM) Apologies: Dermot Parsons Brigitte Worth Emer Hopkins (Acting Director of Improvement) Karen Harvey Malachy Finnegan (Communications Manager) | Officers of RQIA in attendance Dr Tony Stevens (Interim Chief Executive) Julie-Ann Walkden (Deputy Director of Assurance) (JAW) Lynn Long (Interim Deputy Director of Improvement) (LL) Jacqui Murphy (Acting Head of Business Support Unit) (JM) Hayley Barrett (Business Manager) (HB) Lesley Mitchell (Associate HSC Leadership Centre) (LM) Catherine McKeown (Head of Internal Audit) (CMcK) |

1.0 Agenda Item 1 - Welcome and Apologies

- 1.1 CC welcomed all members and Officers of the Board to this meeting. Apologies were noted from Dermot Parsons and Brigitte Worth.

2.0 Agenda Item 2 – Minutes of the public meeting of the Board held on 17 September 2020 and matters arising

- 2.1 TS advised that in relation to 3.5 of the public minutes, it should reflect that he will excuse himself from any historic matters that arise for discussion relating to Muckamore Abbey Hospital or the Review of Deceased Patients of Dr Watt.
- 2.2 CC presented the minutes of the public meeting of the Board held on 17 September 2020 for approval.
- 2.3 Board members **APPROVED** the public minutes of the Board held on 17 September 2020.
- 2.4 Board members noted that action 223 can be removed as it is included within the Transition Plan. Action 224 is complete.

3.0 Agenda Item 3 –Declaration of Interests

- 3.1 CC asked Board 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 of Chair of the Patient Client Council, however, DoH have confirmed that as the position is time bound and that they are actively seeking to recruit a Chair therefore CC should 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.
- 3.4 CM declared that as Director of Primary Care, DoH, if any matters arise for discussion that may be considered a conflict of interest he will withdraw from the discussion.
- 3.5 TS declared that declared that he would excuse himself from any historic matters relevant to his previous post, as former Medical Director of Belfast Health and Social Care Trust, that arise for discussion relating to Muckamore Abbey Hospital. In respect of the Deceased Patients of Dr Watt, TS indicated that he will excuse himself from any involvement in the Review. The DoH has provided advice that a conflict, relating to Muckamore Abbey Hospital, may occur if any matters or issues relate to TS previous role of Medical Director of the Belfast Health and Social Care Trust.

4.0 Agenda Item 4 - Chair's and Members Report

- 4.1 CC advised of a meeting with TS, Dr McBride, Chief Medical Officer and Dr Geoghegan, Deputy Chief Medical Officer on 29 September.
- 4.2 CC advised of a meeting with the General Medical Council, Chair and Chief Executive. It was agreed that the MOU would be updated and regular meetings put in place.
- 4.3 CC advised that progress continues to be made in relation to the recruitment of a permanent Chief Executive.
- 4.4 Board members **NOTED** the Chair's and Members' Report.

5.0 Agenda Item 5 - RQIA Transition Plan 2020/21

- 5.1 TS presented the RQIA Transition Plan 2020/21. TS advised that the Transition Plan had been presented in September at a workshop and discussed in detail.
- 5.2 TS noted that all actions outlined in the Transition Plan are achievable by year end. TS advised that the Transition Plan is supported by three frameworks. TS advised that following the Board Workshop in September, progress has been made in beginning the implementation of the actions.

5.3 JAW presented the Assurance Framework to the Board and advised of the progress made to date on the actions surrounding the framework. JAW highlighted that RQIA wish to move its regulation focus from enforcer to enabler, focusing on ensuring person centred care and building relationships with families, providers, and other regulators and oversight bodies to achieve this.

5.4 Board members **APPROVED** the Transition Plan 2020/21.

6.0 Agenda Item 6 – RQIA COVID-19: Lessons Learned

6.1 JM presented the lessons learned report to the Board advising that this is RQIA's response to Surge 1 of Covid-19. JM advised that there was a two stepped approach taken to receiving feedback from staff and providers using face to face and online technology.

6.2 JM provided an overview of what worked well for providers and staff and suggested improvements. JM advised of RQIA's preparedness for a second wave of COVID-19 if required.

6.3 CC asked that consideration is given to the inclusion of the perspectives and experiences of service users and families in such exercises..

6.4 Board members **NOTED** the RQIA COVID-19: Lessons Learned.

7.0 Agenda Item 7 – Finance Performance Report

7.1 At this point, Lesley Mitchell (LM), Associate HSC Leadership Centre joined the meeting.

7.2 TS advised that this is the first financial performance report since January presented to the Board. TS noted the importance of ensuring that a finance update is produced, accurate and timely presented to the Board.

7.3 LM advised that Finance Performance Report outlines RQIA's position at month six. LM advised that there is a year to date underspend of £292K and a yearend projected underspend of £150K. The underspend is in both pay and non-pay.

7.4 LM advised of a meeting with TS to discuss in year priorities that could assist RQIA and utilise the underspend as effectively as possible.

7.5 TS and LM acknowledged the work of JM and HB throughout this process.

7.6 Board members welcomed the production of the Finance Report; and **NOTED** the Finance Performance Report.

7.7 At this point, LM left the meeting.

8.0 Agenda Item 8 – Performance Report: Activity Review (Quarter 1 and Quarter 2)

- 8.1 TS presented the Performance Report: Activity Review for Quarter 1 and Quarter 2. TS noted that this is the first draft and will be developed and progressed throughout the year. TS highlighted that trajectories and comparison data will be included. TS acknowledged the work of HB in the development of this report.
- 8.2 TS advised that there are six weekly performance meetings with the Directorates at EMT meetings. HB outlined each element of the performance report to Board members.
- 8.3 CC commented that the report is easy to understand and see the activity being completed. CM noted it was easy to understand and to see trends. It was noted that as the report progresses it will become more meaningful.
- 8.4 Board members **NOTED** the Performance Report: Activity Review (Quarter 1 and Quarter 2)

9.0 Agenda Item 9 – Principal Risk Document

- 9.1 TS presented the Principal Risk Document to Board members. TS advised that the document includes six high level issues. TS advised that Information Governance is on the list, as the Executive Team believes there is no robust system of information governance currently in place. TS advised that expertise is currently being sought.
- 9.2 CC thanked TS for his honesty and advised that the Board was keen to support development of the Register; and of any action needed to manage and mitigate the risks.
- 9.3 TS highlighted that the RQIA lease is due to expire at the end of March 2021 and the new premises; James House is unlikely to be available until 2022. TS advised that conversations with the Project Team are required to ensure that RQIA fully utilise the space available to them. TS noted ongoing discussions with the Department of Finance in relation to a workspace for RQIA following March 2021.
- 9.4 Board members **APPROVED** the Principal Risk Document.

10.0 Agenda Item 10 – Governance Framework

- 10.1 TS advised that the Governance Framework incorporates Risk Management and outlines the roles and responsibilities of the Board and Executive Management Team. TS advised that this will be shared with incoming Board members as part of their induction.

- 10.2 TS advised that this is an output from the Transition Plan and will help with the running of the Board. TS noted that the Governance Framework is presented today for approval by the Board.
- 10.3 Board members advised that they were pleased with the Governance Framework and had no comments.
- 10.4 Board members **APPROVED** the Governance Framework.
- 10.5 Resolved Action (225)**
A review of the Governance Framework to be completed in six months' time, April 2021.
- 11.0 Agenda Item 11 – Internal Audit Update**
- 11.1 At this point, Catherine McKeown (CMcK), Head of Internal Audit, attended the meeting.
- 11.2 CMcK advised that the suite of papers presented today are normally papers for the Audit and Risk Assurance Committee, however in the absence of a full Interim Board they are presented directly to the Board.
- 11.3 CMcK presented the Progress Report advising that the Intelligence Monitoring Audit Report is currently being finalised. CMcK advised that 17 priority two recommendations and 1 priority three recommendation was made. Management have accepted all recommendations. The Financial Review Audit received a split assurance; limited level of assurance relating to governance and budgetary management and a satisfactory level of assurance relating to payroll and non-pay.
- 11.4 Board members **NOTED** the Progress Report.
- 11.5 CMcK presented the Mid-Year Review Report advising that 63% of recommendations were fully implemented. Ten of the 13 recommendation remaining relate to the Complaints and Inspections Audits during 2018/19. CMcK noted that the implementation of recommendations were reasonable due to the current challenges being faced.
- 11.6 Board members **NOTED** the Mid-Year Review Report.
- 11.7 CMcK provided an updated on Shared Services advising that two audit reports have received satisfactory level of assurance.
- 11.8 Board members **NOTED** the Shared Service Update.
- 11.9 CMcK advised that the Head of Internal Audit Mid-Year Assurance Statement was a summary of the work completed to date and would inform the RQIA Mid-Year Assurance Statement. TS advised that the Mid-Year Assurance Statement has been drafted and will be shared with the Board and DoH.

11.10 Resolved Action (226)

Mid-Year Assurance Statement to be shared with the Board and DoH.

11.11 Board members **NOTED** the Head of Internal Audit Mid-Year Assurance Statement.

11.12 CMcK presented the Internal Audit General Report 2019/20 advising that RQIA are organisation 16.

11.13 Board members **NOTED** the Internal Audit General Report 2019/20.

11.14 At this point, CMcK left the meeting.

12.0 Agenda Item 12 – Chief Executive’s Report

12.1 TS advised that the transition team are in place that includes, Francis Rice, Karen Harvey and Dr Richard Wright. TS advised that LM, through the HSC Leadership Centre will remain with RQIA one day per month to support JM and HB to build competence into BSU.

12.2 TS advised of his attendance at the Health Committee meeting last Thursday.

12.3 TS noted that in relation to Greenhaw Lodge Care Centre the decant of residents is not yet complete.

12.4 Board members **NOTED** the Chief Executive’s Report.

13.0 Agenda Item 13 - Any Other Business

13.1 As there was no other business, the Chair thanked Board Members and Officers for their attendance and contribution and brought the meeting to a close.

Date of next meeting:



19 November 2020

Signed




Christine Collins MBE
Interim Chair

Date

Board Action List

| Action number | Board meeting | Agreed action | Responsible Person | Date due for completion | Status |
|----------------------|----------------------|---|-------------------------------|--------------------------------|---|
| 225 | 29 October 2020 | A review of the Governance Framework to be completed in six months' time, April 2021. | Head of Business Support Unit | April 2021 |  |
| 226 | 29 October 2020 | Mid-Year Assurance Statement to be shared with the Board and DoH. | Business Manager | 1 December 2020 |  |

Key

| | |
|---------------------------------------|---|
| Behind Schedule |  |
| In Progress |  |
| Completed or ahead of Schedule |  |

RQIA Board Meeting

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|----------------------------|--|
| Date of Meeting | 19 November 2020 |
| Title of Paper | Finance Performance Report for the Month ended 30 September 2020 |
| Agenda Item | 6 |
| Reference | B/11/20 |
| Author | Lesley Mitchell, HSC Leadership Centre Associate |
| Presented by | Lesley Mitchell, HSC Leadership Centre Associate |
| Purpose | To report the Month 6 financial position. |
| Executive Summary | RQIA is reporting a month end surplus of £292k with a forecast year end position of £150k. |
| FOI Exemptions Applied | |
| Equality Impact Assessment | |
| Recommendation/Resolution | The Board are asked to NOTE the Finance Performance Report |
| Next steps | |



The **Regulation and
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Financial Performance Report

30 September 2020

1. FINANCIAL PLAN 2020/21

RQIA submitted its business plan for 2020/21 to the Department of Health in February 2020 with the financial proformas (Month 2 submission) being submitted at a later date in June 2020. RQIA has a legal duty to achieve a breakeven position by the end of the year, which is defined by the surplus/deficit not exceeding 0.25% of its RRL and/or not exceeding £20k. The initial Financial Plan was as follows:

| | £000 | % |
|--|--------------|-------------|
| RRL | 7,013 | 89% |
| Other Operating Income | 886 | 11% |
| Total Expected Income | 7,899 | 100% |
| | | |
| Pay | 6,164 | 78% |
| Non Pay | 1,696 | 21% |
| Covid Costs | 39 | 1% |
| Total Expected Expenditure | 7,899 | 100% |
| | | |
| Year End Forecast Surplus/(Deficit) | 0 | |

The financial plan has been updated monthly and the projected financial position for the year-end has been reported as follows:

| Month | Year End Forecast Surplus/(Deficit) £000 | Comments |
|--------------|---|------------------------|
| May | 0 | Breakeven |
| June | 4 | Breakeven |
| July | (77) | Over Threshold Deficit |
| August | 64 | Over Threshold Surplus |
| September | 150 | Over Threshold Surplus |

A mid-year review of the financial plan will be carried out within the next few weeks and the outcome will be reported to the next Board meeting.

2. SUMMARY FINANCIAL POSITION

The summary financial position is as follows:

| Month | Year To Date Surplus/(Deficit) £000 | Forecast Year-End Surplus/(Deficit) £000 |
|--------------|--|---|
| 31 May | 0 | 0 |
| 30 June | (167) | 4 |
| 31 July | 597 | (77) |
| 31 August | 207 | 64 |
| 30 September | 292 | 150 |

3. FINANCIAL POSITION AS AT 30 SEPTEMBER 2020

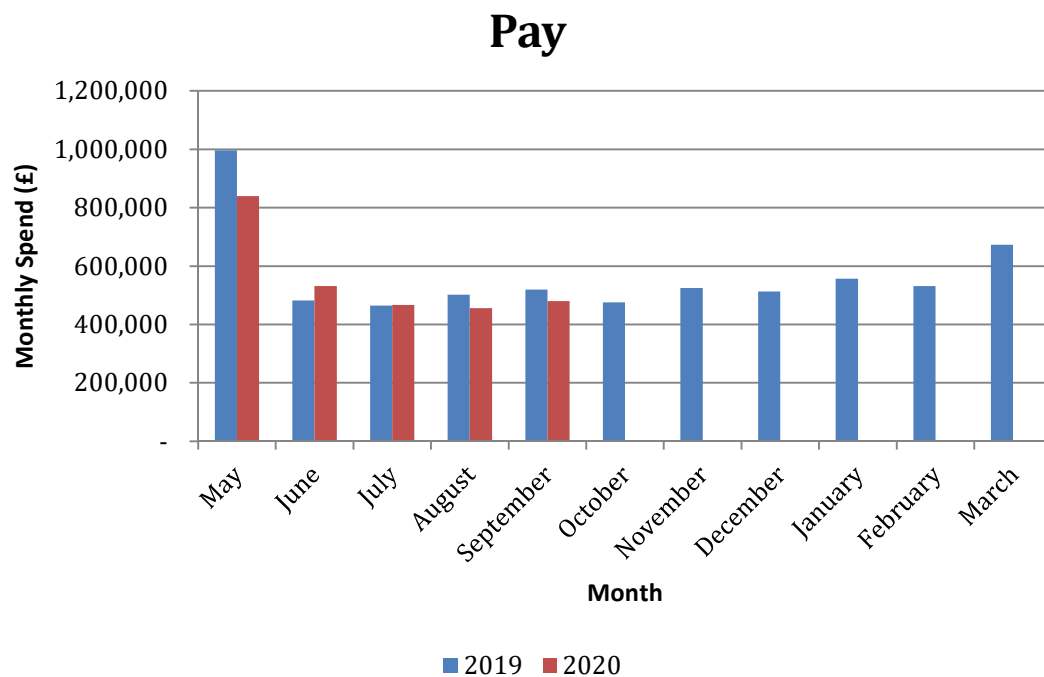
| | Budget YTD 30 September 2020 £000 | Actual YTD 30 September 2020 £000 | Variance £000 |
|-----------------------------------|--|--|--------------------------|
| RRL | 3,578 | 3,578 | |
| Other Operating Income | 372 | 414 | 42 |
| Total Expected Income | 3,950 | 3,992 | 42 |
| Pay | 3,040 | 3,017 | 23 |
| Non-Pay | 694 | 683 | 9 |
| Total Expected Expenditure | 3,734 | 3,700 | 32 |
| Surplus/(Deficit) | 216 | 292 | 74 |

Reasons for Other Operating Income Variance - £42k (Over-recovery)

Additional income has been identified relating to Registration of Establishment fees (£21k YTD), Register of Manager fees (£13k YTD) and other smaller balances amounting to £8k YTD.

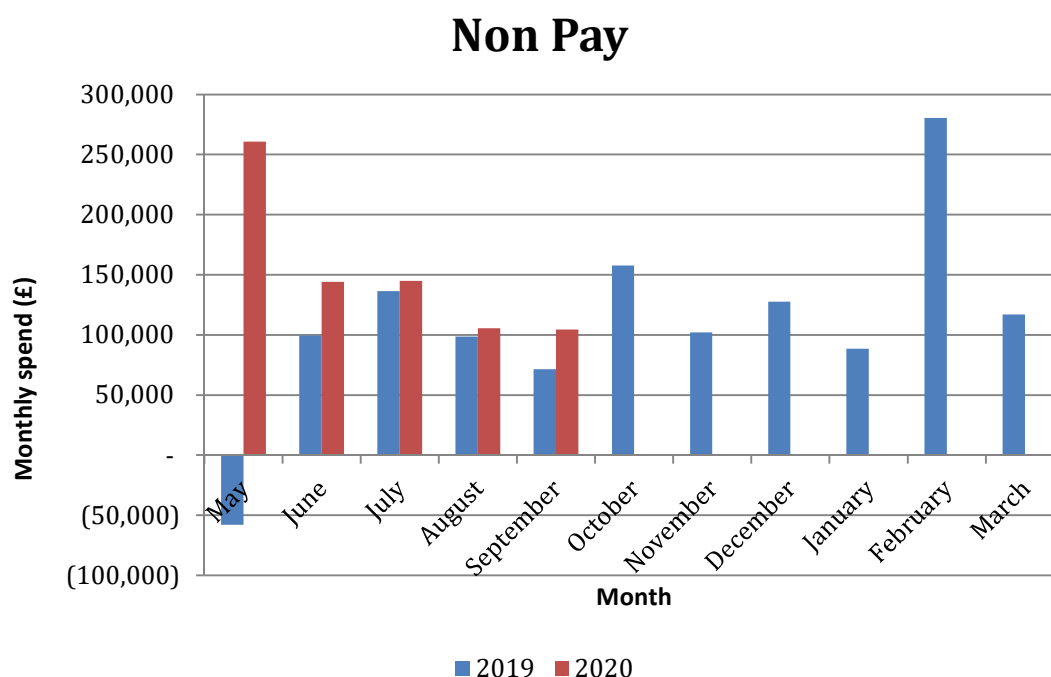
Reasons for Pay Variance - £23k (Underspend)

A significant underspend has arisen in relation to bank staff (£98k YTD), the Audit and Review Programme (£21k YTD), the Superannuation Scheme (£17k YTD) and a number of minor pay areas including vacancies. These underspends have been offset by a number of issues including incremental drift (£42k YTD), COVID19 pay costs (£116 YTD) and a number of minor pay overspends.



Reasons for Non Pay Variance - £9k (Underspend)

A range of underspends have arisen including staff travel and subsistence (£22k YTD), printing/stationery and admin (£13k YTD), cleaning/catering and staff training (£13k YTD) as well as a number of other minor areas. These underspends have been offset by overspends in relation to computer hardware and software (£30k YTD), COVID19 PPE and IT expenditure (£17k YTD) as well as a number of other minor areas.



4. COVID COSTS

RQIA has had to incur additional expenditure in relation to COVID19 and it is estimated that the full year costs will be £176k. To date the DoH has not made a RRL allocation against these costs. These costs are currently being absorbed within the overall financial position. Clarification will be sought from the DoH as part of the mid-year review process on whether these costs will be separately funded. COVID19 expenditure to date is as follows:

| Month | Actual Monthly Cost £000 | Cumulative Monthly Cost £000 | Forecast Year End Costs £000 |
|-----------|--------------------------|------------------------------|------------------------------|
| May | 39 | 39 | 39 |
| June | 99 | 138 | 306 |
| July | (1) | 137 | 237 |
| August | (9) | 128 | 185 |
| September | 6 | 134 | 176 |

5. KEY ASSUMPTIONS AND RISKS

The following key assumptions and risks should be noted:

- Costs associated with COVID19 are difficult to forecast given the changing environment and actual expenditure may have a material effect on the year-end out-turn.
- Costs associated with COVID19 are currently being absorbed by the overall financial position. Clarification from DoH needs to be sought as to whether these costs will be covered by an RRL allocation.
- Other income is mainly generated from annual home fees however there is an element that is difficult to predict and actual income may have a material effect on the year-end out-turn.

6. KEY MESSAGES

- RQIA is forecasting a year-end financial position of £150k which is outside the definition of breakeven (ie £20k).
- At 30 September 2020 RQIA is reporting a surplus of £292k.
- A mid-year review of the financial plan will be carried out and the outcome reflected in next month's Financial Performance Report.
- The recommendations from the recently completed Financial Review will be progressed over coming months including financial training for staff and a zero-based approach to realigning budgets.