



The Regulation and
Quality Improvement
Authority

RQIA Board Meeting

Date of Meeting	25 March 2021
Title of Paper	Public Session Minutes
Agenda Item	2
Reference	Min / Feb21 / 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 4 February 2021.
FOI Exemptions Applied	None
Equality Impact Assessment	Not applicable
Recommendation/ Resolution	The Board is asked to APPROVE the minutes of the Board meeting on 4 February 2021.
Next steps	The minutes will be formally signed off by the Chair.

PUBLIC SESSION MINUTES

RQIA Board Meeting Via Zoom 4 February 2020, 12.45pm	
Present Christine Collins MBE (Interim Chair) (CC) Neil Bodger (NB) Alan Hunter (AH) Prof. Stuart Elborn (SE) Bronagh Scott (BS) Jacqui McGarvey (JMcG) Suzanne Rice (SR) Apologies:	Officers of RQIA in attendance Dr Tony Stevens (Interim Chief Executive) (TS) Emer Hopkins (Acting Director of Improvement) (EH) Karen Harvey (Professional Advisor, Social Work) (KH) Julie-Ann Walkden (Deputy Director of Assurance) (JAW) Lynn Long (Acting Deputy Director of Improvement) (LL) Jacqui Murphy (Acting Head of Business Support Unit) (JM) Malachy Finnegan (Communications Manager) Hayley Barrett (Business Manager) (HB)

1.0 Agenda Item 1 - Welcome and Apologies

1.1 CC welcomed all Members and Officers of the Board to this meeting.

2.0 Agenda Item 2 – Minutes of the public meeting of the Board held on 19 November 2020 and matters arising

2.1 CC presented the minutes of the public meeting of the Board held on 19 November 2020 for approval. AH commented that section 3.4 of the minute should reflect TS declaration of interest.

2.2 **Resolved Action (229)**
TS to update the wording of his Declaration of Interest.

2.3 Board members **APPROVED** the public minutes of the Board held on 19 November 2020.

2.4 Board members noted that action 225 and 228 remain ongoing. Action 227 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 (PCC), 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 role as Chair of the PCC.
- 3.3 TS declared that, as former Medical Director of Belfast Health and Social Care Trust and former Chief Executive of Northern Health and Social Care Trust, that he would excuse himself from any historic matters that arise for discussion regarding Muckamore Abbey Hospital that relate to his previous roles. The DoH has provided advice that a conflict would occur if any matters or issues relate to TS' previous role of Medical Director of the Belfast Health and Social Care Trust. Based on this advice, TS will consider the potential for any conflict of interest in respect of Muckamore Abbey Hospital as and when a related matter arises. In respect of the Deceased Patient Review, or any other matter relating to Dr Watt, TS has effectively recused himself from RQIA's undertakings, referring these matters to the Chair of the Board and the Acting Director of Improvement.

4.0 **Agenda Item 4 - Finance Performance Report (Month 9)**

- 4.1 At this point, Lesley Mitchell (LM), Associate HSC Leadership Centre, joined the meeting.
- 4.2 LM advised that Finance Performance Report outlines RQIA's position at month nine. LM advised that there is a year to date underspend of £424K and a year end projected underspend of £351K. The underspend is in both pay and non-pay.
- 4.3 LM advised that she and TS met with DoH prior to Christmas to discuss an easement. LM acknowledged that the DoH have accepted an easement of £506K, which included £178K of COVID funding.
- 4.4 SE queried the types of expenditure that relates to COVID costs. LM advised PPE and staff overtime / additional hour costs.
- 4.5 NB thanked LM for the report and the clear analysis of costs aligned to specific expenditure codes.
- 4.6 Board members **NOTED** the Finance Performance Report.

5.0 Agenda Item 5 - Review of Financial Governance Process: Progress Update

- 5.1 LM advised that there are 15 / 22 recommendations fully implemented from her Review of Financial Governance. LM thanked Officers of RQIA for their work and support throughout the implementation of the recommendations.
- 5.2 AH queried if the self-assessment governance tool had been shared with the Board for completion. LM advised that it is expected that all new Boards will complete the governance tool; however the Board should agree when it is going to be completed.
- 5.3 AH queried if the Principal Risk Document could be shared with the Board. JMcG asked if COVID was listed on the Principal Risk Document. JM confirmed that COVID in relation to staff and business continuity planning was included.
- 5.4 LM advised that Internal Audit will complete a re-audit of finance in March.
- 5.5 CC confirmed that the Board Self-Assessment Governance Tool will be completed at an appropriate point and support should be sought via HSC Leadership Centre.

6.0 Agenda Item 6 – Performance Report: Activity Review (Quarter 3)

- 6.1 JM presented the Performance Report: Activity Review for Quarters 1, 2 and 3. JM advised that the report is continuously being improved and enhanced with new KPIs and that the goal was to include outcome based measures.
- 6.2 JM advised that a Performance Management schedule for each directorate to report to the Chief Executive is in place, enabling TS to hold the directorates to account for their deliverables and to encourage improvement.
- 6.3 EH and KH highlighted key areas of the report.. EH noted that in relation to RQIA's statutory obligations of Mental Health Inspection activity there is a 60% shortfall of inspections this year. EH advised that a process in relation to identifying the required resources is currently being completed.
- 6.4 KH advised that there are 131 inspections still to be completed in care homes; these will be completed through onsite, remote or a blended approach. KH advised that a number of out of hours inspections have been completed throughout the pandemic.
- 6.5 CC commented that this iteration of the Performance Activity Report is more informative than previous versions. Board members agreed. JMcG commented on the range of activities completed by staff in order to deliver the functions of the organisation.

6.6 Board members **NOTED** the Performance Report: Activity Review (Quarters 1, 2 and 3)

6.7 At this point, SE and KH left the meeting.

7.0 Agenda Item 7 – Transition Plan Progress

7.1 JM and EH provided an overview of the Transition Plan Progress. EH highlighted that work in relation to RADAR has commenced and reports from Reviews are on track for publication.

7.2 JM advised that in relation to the necessary upgrade/replacement of the information system, iConnect, this action will carry forward to 2021/22 and will be linked to an appropriate business plan. JM highlighted that action seven in relation to reporting on the initial COVID-19 surge is completed.

7.3 In relation to proactively seeking to involve service users, carers and other stakeholders in our work (Action 8), EH advised that this was progressing with partnership working being established. EH noted that there is a gap in the organisation structure for a dedicated role to bring forward improved engagement with service users and carers.

7.4 EH advised that in relation to restructuring, progress is being made. EH noted that work in relation to complaints and concerns from services will be completed during 2021/22.

7.5 CC thanked JM and EH for the comprehensive overview of the transition plan. BS congratulated the team, advising that it is noticeable that a lot of work has been completed in a short period of time. TS thanked all members of the Executive Team for their energy and commitment.

7.6 Board members **NOTED** the Transition Plan Progress.

8.0 Agenda Item 8 – Audit and Risk Assurance Committee Business

8.1 NB, Chair of the Audit and Risk Assurance Committee, advised that the minute of the meeting from 28 January 2021 will be formally agreed at the next meeting of 4 March 2021.

8.2 NB advised that training for the Audit and Risk Assurance Committee was being arranged and that all Board members and Executive Team members were invited to attend.

8.3 NB informed members that the Terms of Reference of the Audit and Risk Assurance Committee were presented to the meeting on 28 January 2021 and a slight amendment was made to section 1.1; membership. NB outlined that there are three members of the Committee and a quorum was two, however this was agreed to be a temporary measure only.

8.4 NB advised that the Audit and Risk Assurance Committee minutes would be circulated to members for approval and the Principal Risk Document extract would be shared with all members.

8.5 Resolved Action (230)

Audit and Risk Assurance Committee members to approve the minutes of the meeting on 28 January 2021 and the Principal Risk Document section to be circulated to Board members.

8.6 NB advised that Internal Audit plan to complete audits in relation to Risk Management and Board Effectiveness during Quarter 1 of 2021/22. In relation to the recently completed audit of Intelligence Monitoring, a limited level of assurance was received.

8.7 CC thanked NB for the comprehensive update in relation to the Audit and Risk Assurance Committee. CC requested that a meeting is arranged with NB and AH to review the Standing Orders and Committees' Terms of Reference.

8.8 Resolved Action (231)

A meeting to be arranged with CC, NB and AH to review the Standing Orders and Committees' Terms of Reference.

8.9 Committee members **NOTED** the Audit and Risk Assurance Committee Business.

9.0 Agenda Item 9 – James House Update (Accommodation Project)

9.1 HB presented the James House Update paper, advising that RQIA was identified in 2018 as a viable tenant in a new public sector building, James House, due to the relatively short length of time left on the lease in Riverside Tower.

9.2 HB advised that the lease in Riverside Tower is unable to be extended until August 2022, therefore a business case has been developed outlining proposals for the interim period (1 June 2021 – 31 August 2022).

9.3 The Department of Finance, via Land and Property Services, continues to lead on negotiations with the landlord of Riverside Tower in respect of dilapidation costs.

9.4 TS added that this is a residual risk for RQIA until there is a signed tenancy agreement for the new premises.

9.5 Board members **NOTED** the James House Update (Accommodation Project).

10.0 Agenda Item 10 – Chief Executive's Report

10.1 EH presented the Review of Vulnerable Prisoners' Terms of Reference, advising that all Terms of Reference will be shared with the Board and published on RQIA's website.

10.2 Board members **NOTED** the Chief Executive's Report.

11.0 Agenda Item 11 - Any Other Business

11.1 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:
25 March 2021**

Signed 
**Christine Collins MBE
Interim Chair**

Date 25 March 2021

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	
228	19 November 2020	RQIA Communications Plan to be presented to the Board.	Communications Manager	March 2021	
229	4 February 2021	TS to update the wording of his Declaration of Interest.	Interim Chief Executive	25 March 2021	
230	4 February 2021	Audit and Risk Assurance Committee members to approve the minutes of the meeting on 28 January 2021 and the Principal Risk Document section to be circulated to Board members.	Business Manager / ARAC Members	4 March 2021	
231	4 February 2021	A meeting to be arranged with CC, NB and AH to review the Standing Orders and Committees' Terms of Reference.	Business Manager	25 March 2021	

Key

Behind Schedule	
In Progress	
Completed or ahead of Schedule	