

PUBLIC SESSION

RQIA Authority Meeting

Thursday 11 December 2025 at 9:00am

Link Room, The Mount Business and Conference Centre

<p>Present: Stuart Elborn (SE), Deputy Chair (Chairing in the absence of the Authority Chair) Derek Clydesdale (DC) Cheryl Lamont (CL) Nazia Latif (NL) Alphy Maginness (AM) Mary Mclvor (MMcl) Rodney Morton (RM) Sarah Wakfer (SW)</p> <p>Apologies: Christine Collins (CC), Chair</p> <p>Elaine Connolly (EC), Director of Adult Care Services Karen Harvey (KH), Professional Advisor of Social Work Caroline Lee (CLee), Interim Director of HSC Reviews, Inspections and Quality Improvement</p>	<p>RQIA Staff in Attendance: Briege Donaghy (BD), Chief Executive Lynn Long (LL), Director of Mental Health, Learning Disability, Children’s Services and Prison Healthcare Jane Kennedy (JK), Interim Director of Independent Healthcare Jacqui Murphy (JM), Head of Corporate Affairs and Business Services Paul Cummings (PC), RQIA Financial Advisor Aaron Addidle (AA), Corporate Governance and Business Manager</p>
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1.0 Agenda Item 1 - Welcome and Apologies

- 1.1 The meeting commenced at 9:08 am, with the Deputy Chair (SE), welcoming all to the meeting. As CC was not present at the meeting, SE would be presiding as Chair.
- 1.2 Apologies were noted from Christine Collins, Elaine Connolly, Karen Harvey and Caroline Lee.
- 1.3 SE welcomed Chris Young, Audit Manager, and Tom Wilson, Audit Supervisor, to the meeting as observers for the purposes of the RQIA Board Effectiveness Audit.

2.0 Agenda Item 2 - Minutes of the meeting of the Authority held on 16 October 2025 and Matters Arising

- 2.1 Members **APPROVED** the Minutes of the meeting of the Authority held on 16 October 2025 as a true and accurate record.

Action 272: Response to Mrs Catherine Fox: Closed: BD advised that a response from the Authority Chair had been issued and RQIA continues to liaise with Mrs Fox on the sensitive matters she raises.

3.0 **Agenda Item 3 - Declaration of Interests**

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

- 3.2 RM declared that he has been appointed a Fellow in the Royal College of Surgeons in Ireland.

- 3.3 SE declared that he has recently been appointed as an Associate in the Health and Social Care (HSC) Leadership Centre.

SE declared that he and PC are supporting the Research and Development Office on work regarding income flows across HSC Trusts.

- 3.4 The Authority **NOTED** the Declarations of Interest.

4.0 **Agenda Item 4 - Chair's Business:**

- a) RQIA Board Effectiveness Self-Assessment 2025 / 2026: Action Plan**
b) Korn Ferry Review of Senior Executive Grading: RQIA Outcome

4.1 **a) RQIA Board Effectiveness Self-Assessment 2025 / 2026: Action Plan**

SE noted that the self-assessment and associated actions were discussed and approved at the previous meeting. An action plan has since been formalised and progress against the agreed actions is reported as positive.

- 4.2 JM reported that, of the eleven actions identified, two have been completed and closed. Authority Members continue to participate in governance groups to progress actions arising from the Organisational Culture Review and Investors in People (IIP) reaccreditation. A dedicated governance awareness session was held in October 2025 and the remaining actions are progressing well, with ongoing monitoring in place. A significant number of actions are scheduled for completion by year-end. The annual self-assessment will be undertaken next year, which will provide an opportunity to address any residual issues.

- 4.3 The Authority **NOTED** the RQIA Board Effectiveness Self-Assessment 2025 / 2026: Action Plan.

4.4 **b) Korn Ferry Review of Senior Executive Grading: RQIA Outcome**

SE provided an update on the Korn Ferry review, which forms part of a wider assessment of HSC Director-level roles. It was confirmed that the grading of RQIA posts remains unchanged following Korn Ferry's review. Substantive recruitment to vacant RQIA Director posts had been deferred pending completion of this process.

- 4.5 BD expressed appreciation to JK and CL, in the interim Director roles, for their contributions to the organisation and noted that three Director posts will be advertised from Monday 15 December 2025, via HSC Jobs and, for the Director

of Independent Healthcare and Responsible Officer (Medical), also the British Medical Journal. This is to be filled on a medical Consultant contract. Business Services Organisation (BSO) Human Resources (HR) are supporting and advising RQIA in these recruitment processes.

- 4.6 The Authority welcomed the progress made. During discussion, it was acknowledged that while the grading remains consistent for RQIA roles under Korn Ferry, the resolution of pay scale for those staff in receipt of the senior executive pay is a very positive outcome. The uplift significantly narrows the gap between medical and director-level posts, which is expected to enhance competitiveness in attracting candidates.
- 4.7 Members considered strategies to improve diversity and broaden the applicant pool. Suggestions included regional engagement across arms-length bodies (ALBs), hosting open days, leveraging social media, and targeted outreach through platforms such as LinkedIn.
- 4.8 BD noted that recent advertising campaigns have achieved some success and further advice on best practice would be welcomed.
- 4.9 AM highlighted the importance of independent assessment during recruitment, alongside opportunities for candidates to engage with the organisation prior to interview.
- 4.10 The Authority **NOTED** the Korn Ferry Review of Senior Executive grading regionally, and RQIA Outcome.

5.0 Agenda Item 5 – Chief Executive’s Update

a) Verbal Update on Current Matters

- 5.1 **a) Verbal Update on Current Matters**
BD noted that the Health and Social Care Quality Improvement (HSCQI) function has been embedded within RQIA for one year, with Project ECHO more recently joining the organisation in October 2025. BD added that a dedicated division has been established to support HSC-facing work, although several posts remain vacant.

BD highlighted the wider challenges within the HSC statutory sector and the importance of collaborative engagement and RQIA considering its response to the wider context for HSC, and also working with external partners. A workshop focussed on ‘HSC Improvement’ will be hosted by RQIA in February 2026, inviting Trust Chief Executives, Chairs, the Department of Health (DoH), individuals with lived experience and others. A proposal paper will be developed from what is heard at the event and engaged upon more widely. RQIA trusts this will ensure strategic alignment of the work of the QI Hub, ECHO and the work of the HSCQI Alliance, in the HSC context of pressures and Reset.

- 5.2 Members emphasised the need for system-wide working to support transformation and recognised the potential for Project ECHO to become an integral part of systemic improvement, while acknowledging that scalability remains a challenge.
- 5.3 DC highlighted digital transformation as a key enabler.

- 5.4 RM noted the importance of triangulating improvement initiatives with policy work.
- 5.5 BD noted the impact of winter pressures, including findings from a recent study on corridor care, which revealed stark outcomes and increased risks to patient safety in Northern Ireland compared to other UK regions. There is a need to connect with SPPG and how such pressures are being monitored and responded to.
- BD drew Members' attention to the RQIA Winter Plan and Winter Statement and advised that later that day, RQIA will host a webinar on Being Human During Winter Pressures. BD reported that she had co-signed a letter with the PHA encouraging the uptake of the flu vaccine to Care Home staff in particular.
- 5.6 BD referred to safeguarding concerns within the Presbyterian Church, which have been acknowledged by the church and widely reported in the media. The Presbyterian Council for Social Witness (PCSW) operates 12 services registered with RQIA, which provide care to vulnerable adults. RQIA has written to the Responsible Individual and plans to meet senior leaders in the organisation. BD added that RQIA will continue to work collaboratively with relevant stakeholders.
- BD advised that RQIA will establish an oversight group of our regulatory review of PCSW registered services, inviting HSC Trusts, the DoH and PSNI. This is in respect of the 12 registered services and RQIA's role in seeking assurance in respect of safeguarding, safety and quality by way of a assurance in light of the public concerns, which she emphasised relate to Church activities and not directly at the registered services. Nonetheless, important RQIA provides assurance.
- 5.7 RM left the meeting at 9:49 am.
- 5.8 BD reported that the Northern Ireland Assembly Health Committee held a recent meeting in the South West Acute Hospital (SWAH). RQIA has been inspecting Emergency Departments in SWAH and Altnagelvin, with inspection outcome to be reported in the new year.
- 5.9 RM re-joined the meeting at 9:52 am.
- 5.10 BD advised that RQIA is actively pursuing matters relating to the RQIA Review Programme Protocol and has sought a nomination from DoH to support a revision.
- 5.11 Members discussed the need for clarity on accountability for implementing RQIA's Review recommendations, noting that current protocols do not fully address this. It was agreed that collaboration with DoH and SPPG is essential to ensure transparency and this should be considered as part of the refresh of the Review Protocol. While RQIA could request implementation achievements from Trusts, capacity to act on information received is limited. A range of approach could be considered.
- 5.12 The Authority **NOTED** the verbal update from the Chief Executive.
- 6.0 Agenda Item 6 - Members Activity Report**

- 6.1 SE presented the Members Activity Report and thanked Members for their invaluable contribution to the work of the Authority. SE noted that the report reflected a strong culture of engagement by the Authority.
- 6.2 The Authority **NOTED** the Members Activity Report.
- 7.0 Agenda Item 7 - Business, Appointments and Remuneration Committee (BARC): Update**
- a) Draft Minutes of Meeting 6 November 2025**
- b) Policies and MoUs**
- i) Information Governance Policy**
 - ii) Information Governance Framework**
 - iii) Data Protection Policy**
 - iv) Freedom of Information Policy**
 - v) Records Management Policy**
- c) Performance**
- i) Activity Performance and Outcomes Report: Quarter 2, 2025/2026**
- 7.1 **a) Draft Minutes of Meeting 6 November 2025**
Following consideration, the Authority **NOTED** the draft Minutes of the meeting on 6 November 2025.
- 7.2 **b) Policies and MoUs**
- i) Information Governance Policy**
SE commended the Information Governance Policies to the Authority for approval, following recommendation from BARC, as well as the opportunity for other Authority Members to review prior to the meeting. SE noted the importance of standardising the templates for policies.
- 7.3 NL noted some minor amendments are required in terms of references to the Human Rights Act 2010, which does not apply to Northern Ireland.
- 7.4 JM agreed to update this to ensure the policies cite the correct legislation.
- 7.5 Subject to these minor amendments, the Authority **APPROVED** the Information Governance Policy.
- 7.6 **ii) Information Governance Framework**
Following consideration, the Authority **APPROVED** the Information Governance Framework.
- 7.7 **iii) Data Protection Policy**
Following consideration, the Authority **APPROVED** the Data Protection Policy.
- 7.8 **iv) Freedom of Information Policy**
Following consideration, the Authority **APPROVED** the Freedom of Information Policy.
- 7.9 **v) Records Management Policy**
Following consideration, the Authority **APPROVED** the Records Management Policy.
- 7.10 **c) Performance**
- i) Activity Performance and Outcomes Report: Quarter 2, 2025/2026**

SE presented the report and commended BD and staff on another positive quarter of performance. SE informed the Authority that BARC will now undertake a deep dive at each meeting into a particular area of performance. The February 2026 meeting will focus on Children's Services.

- 7.11 BD advised that due to the unavailability of the RQIA website, the organisation will report on performance of 'open' reports instead of published reports. This will be reflected in the quarter three report. BD assured Members that work continues with ITS on the interim website and the uploading of inspection reports is progressing.
- 7.12 The Authority **APPROVED** the Activity Performance and Outcomes Report: Quarter 2, 2025/2026.
- 8.0 Agenda Item 8 - Audit and Risk Assurance Committee (ARAC): Update**
- a) Draft Minutes of Meeting 20 November 2025**
 - b) RQIA Governance and Assurance Framework**
 - c) Draft Mid-Year Assurance Statement**
 - d) Risk Management**
 - i) RQIA Risk Management Strategy**
 - ii) Principal Risk Document**
 - iii) Risk Register: Directorate of Independent Healthcare**
 - e) RQIA Audit Action Plan**
- 8.1 **a) Draft Minutes of Meeting 20 November 2025**
Following consideration, the Authority **NOTED** the draft Minutes of the meeting of 20 November 2025.
- 8.2 **b) RQIA Governance and Assurance Framework**
SW presented the Framework to the Authority and noted ARAC's view that there are a significant number of Governance Groups at the Executive Team level and it may be an opportune time to review whether all groups remain necessary, with the intention of reducing this volume.
- 8.3 The Authority **APPROVED** the RQIA Governance and Assurance Framework.
- 8.4 **c) Draft Mid-Year Assurance Statement**
Following consideration, the Authority **APPROVED** the Draft Mid-Year Assurance Statement.
- 8.5 **d) Risk Management**
- i) RQIA Risk Management Strategy 2025-2028**
SW advised that she, JM and AA had undertaken a review of the Strategy to ensure it remains current and relevant; minor updates were made to references throughout the document, however, there was little material change to the previous strategy.
- 8.6 SE commended the Strategy and welcomed the clear articulation of risk appetite.
- 8.7 The Authority **APPROVED** the RQIA Risk Management Strategy 2025-2028.
- 8.8 LL joined the meeting at 10:24 am.
- 8.9 **ii) Principal Risk Document**

SW presented the Principal Risk Document (PRD), which now contains a Red Amber Green (RAG) rating of the effectiveness of Controls to mitigate the Risk, based on the assurances received. SW noted that this will be a useful grading system for ARAC and satisfy the Internal Audit recommendation.

- 8.10 MMCI welcomed the work to streamline the PRD and ensure its accessibility and readability.
- 8.11 The Authority **APPROVED** the Principal Risk Document.
- 8.12 **iii) Risk Register: Directorate of Independent Healthcare**
SW advised that ARAC welcomed the opportunity to review the Risk Register for Independent Healthcare, the first time as a standalone directorate. SW praised JK and her team for developing the register, noting their knowledge of the risks in their directorate was evident to the Committee.
- 8.13 JK welcomed the opportunity to present the Risk register to the Committee and the feedback, which is being reflected on for future iterations of the risk register.
- 8.14 The Authority **APPROVED** the Directorate of Independent Healthcare Risk Register.
- 8.15 **e) RQIA Audit Action Plan**
Following consideration, the Authority **APPROVED** the RQIA Audit Action Plan.

9.0 Agenda Item 9 - Legislative and Policy Committee (LPC): Verbal Update

- 9.1 AM provided an update on forthcoming legislative developments. It was noted that the UK Public Accountability Bill will apply across all public bodies, introducing a statutory duty of candour for organisations and individuals. In contrast, the Duty of Candour Bill is specific to Health and Social Care (HSC) and is expected to apply primarily to organisations rather than individuals. The Duty of Candour Bill does not impose criminal sanctions but seeks to implement recommendations aimed at strengthening openness and transparency within HSC.

AM continued by advising that the Public Accountability Bill will require all public bodies to adopt a code of ethics, creating an offence for failure to comply with the code.

- 9.2 Members discussed the potential implications for disciplinary processes and the alignment between the two pieces of legislation, noting that full consistency may not be achieved. Timescales for implementation remain unclear.
- 9.3 The Authority reflected on the cultural impact of these legislative changes, recognising their potential to drive systemic improvement. Reference was made to the “Being Human” framework as an enabler for embedding these principles within organisational practice.
- 9.4 The Authority **NOTED** the verbal update from the Legislative and Policy Committee.

10.0 Agenda Item 10 Mental Health Committee (MHC): Verbal Update

- 10.1 MMCI provided an update on the presentation from the Strategic Planning and Performance Group (SPPG) regarding the development of a system-wide approach to mental health. The proposed model adopts a regional framework that cascades to local levels, aiming to create integrated connections across the system. Evidence-based design has informed the approach, although challenges remain in obtaining comprehensive mental health data within Northern Ireland. Progress was noted on the rollout of mental health data onto the Encompass platform, with 95% of measures now included. This development is expected to improve accessibility and provide a clearer view of service performance.
- MMCI advised that co-production will be a central feature of the framework, with emphasis on meaningful service user involvement. The need to build relationships, share events, and overcome funding obstacles to enable collaborative resource allocation was highlighted by SPPG.
- 10.2 LL reported that a recent workshop, led by the Regional Service User Consultant, engaged individuals with lived experience to co-produce approaches to service design. While work is ongoing, the framework has not yet been finalised.
- 10.3 RM acknowledged that the challenge lies not in engagement but in achieving shared decision-making. He noted that workforce planning cannot be considered in isolation from system design. The concept of multidisciplinary teams (MDTs) often translates into transactional collaboration rather than integrated working.
- 10.4 BD used the example of the work in relation to the Southern Health and Social Care Trust's whole-system approach, demonstrating both progress and persistent challenges. RQIA's Quality Improvement work will play a key role in supporting 'whole system' working.
- 10.5 LL reported that RQIA is extending the Inspection Support Volunteer (ISV) programme, with the next cohort contributing to Mental Health and Learning Disability inspections. Engagement with the PCC Mental Health Platform will continue, including sharing inspection frameworks and seeking feedback from individuals with lived experience, particularly those detained in mental health facilities.
- 10.6 NL raised the issue of remunerating service users for their contributions, noting that while PHA has a policy, financial support from DoH has not yet materialised.
- 10.7 The Authority **NOTED** the verbal update from the Mental Health Committee.
- 11.0 Agenda Item 11 - Financial Performance Report: 2025 / 2026 Month 7 (EP3: Resources)**
- 11.1 BD presented the Financial Performance Report: 2025 / 2026 Month 7 to the Authority and asked PC to add comment.
- 11.2 PC noted that the report reflects a surplus of £43k for month 7, with a projected year-end surplus of approximately £40k. However, this assumes income to cover the cost of pay awards. This is a potential risk regarding funding for the impact of the regional Senior Executive pay award and its impact for RQIA. It was noted that RQIA management structure has 4 staff who are paid on the basis of the regional senior executive pay scale, the Chief Executive and 3 Directors.

11.3 BD advised that correspondence has been issued to the Director of Finance and monthly reporting continues. The importance of securing clarity and resolution on the funding of pay award was emphasised.

BD noted that RQIA have absorbed legal costs associated with the two public inquiries in which RQIA is a Core Participant. It was acknowledged that some factors remain outside the organisation's direct control.

11.4 The Authority **APPROVED** the Financial Performance Report: 2025 / 2026 Month 7.

12.0 Agenda Item 12 – Any Other Business

There being no further business, SE closed the public meeting at 11:06 am.

Date of Next Meeting:

Full Authority Meeting: Thursday 26 March 2026 at 9:30 am, virtual via MS Teams.

Signed



**Christine Collins MBE
Chair**



Date

26 March 2026

Authority Action List: Meeting of 11 December 2025

Action Number	Authority Meeting	Agreed Action	Responsible Person	Date due for Completion	Status

Key

Behind Schedule	
In Progress	
Completed or ahead of Schedule	