

PUBLIC SESSION

RQIA Authority Meeting

Thursday 16 March 2023 at 10:45 am

Via MS Teams

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| <p>Present: Christine Collins (Chair) (CC) Alphy Maginness (AM) Bronagh Scott (BS) Cheryl Lamont (CL) Mary McIvor (MMcI) Nazia Latif (NL) Sarah Wakfer (SW) Stuart Elborn (SE)</p> <p>Apologies: Neil Bodger (NB)</p> <p>Briege Donaghy (BD) Emer Hopkins (EH) Lynn Long (LL)</p> | <p>RQIA Staff in Attendance: Elaine Connolly (Director of Adult Care Services) (EC) Jacqui Murphy (Head of Corporate Affairs) JM Ian Steele (Medical Lead and Responsible Officer) (IS) Karen Harvey (Professional Advisor, Social Work / Project Lead for Assurance) (KH) Malachy Finnegan (Communications Manager) (MF) Paul Cummings, Associate, Financial Advisor (PC)</p> |
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1.0 Agenda Item 1- Welcome and Apologies

1.1 The meeting commenced at 10.46 am.

1.2 The Chair welcomed everyone to the meeting, particularly the new Authority Members who had taken up appointment since 1 February 2023. CC explained that the Chief Executive (BD) was attending a Coroner's Inquest to give evidence, on behalf of RQIA and so could not join the meeting, indicating that our thoughts are with BD today.

1.3 Apologies were received from Neil Bodger (NB), Briege Donaghy (BD), Emer Hopkins (EH) and Lynn Long (LL).

2.0 Agenda Item 2 - Minutes of the Meeting of the Authority held on 8 December 2022 and Matters Arising

2.1 CC and JM provided an update to the Action List.

Action 253 – The Five Year Equality Action Plan – closed. The Action Plan has been aligned to the new Draft Strategic Plan, to enable common reporting across the two documents.

- 2.2 Action 255 – ongoing. Preface relating to the 'RQIA Review of Systems and Processes for Learning from Serious Adverse Incidents in Northern Ireland, June 2022' completed and published to website. The preface is undergoing final agreement with stakeholders.
- 2.3 Action 256 – closed. RQIA has liaised with Mr Little in relation to the Authority meeting of 8 December 2022 and agreed a summary of the discussion.
- 2.4 Action 257 – closed. The triumvirate of RQIA, PCC and Mental Health Champion's Office has been formed and met in January, in order to move forward amending the SAI process.
- 2.5 CC invited those Members who had been present at the meeting of 8 December 2022 to approve the Minutes.
- 2.6 SE and BS agreed the Minutes were a good, accurate record of the meeting.
- 2.7 Authority Members **APPROVED** the minutes of 8 December 2022.

3.0 Agenda Item 3 - Declaration of Interests

- 3.1 There were no declarations of interests.

4.0 Agenda Item 4 - Chair's Business

- a) RQIA / DoH Partnership Agreement**
- b) Public Inquiries**
- c) Resources**
- d) Legal Issues**

4.1 a) RQIA / DoH Partnership Agreement

- 4.2 JM provided an update, explaining that a working draft had been sent to the Department of Health (DoH), following input from BARC, the Authority Chair and Authority Members. Sponsor Branch and the Governance Unit at the DoH was to review the draft and provide advice on the content of the included Engagement Plan. The draft remains at the DoH and will be shared with the Chief Medical Officer (CMO), Deputy Chief Medical Officer (DCMO) and other officials before being return to RQIA for final adjustments during week commencing Monday 27 March 2023, when it could be shared with the Authority, with the intention that the final review would be completed by the end of March 2023.

The final draft would be submitted to the DoH Governance Unit and, when any queries were addressed, could be forwarded to the Department of Finance (DoF) Supply in early April 2023. Following approval by DoF, the Agreement would be signed by RQIA and DoH.

The final document would come to the Authority Meeting of 20 April 2023.

- 4.3 CC reminded all that this is an important document, upon which an effective relationship between the organisation and the DoH could be built. CC noted that the Agreement should take full account of the recommendations from the Nicholl Review and Authority Members should bear this in mind when reviewing the final draft.

4.4 CC enquired as to whether Authority Members had access to the Nicholl Review Report. JM confirmed that Members have the link to the Nicholl Review in their induction packs and agreed to circulate the Minister's response.

4.5 **Resolved Action: 258: Minister's response to the Nicholl Review in respect of the RQIA Board resignations to be shared with Authority Members.**

4.6 CC reiterated that it is important to ensure Members have time to review the final draft of the Partnership Agreement and asked that the DoH are reminded of the need to return in sufficient time for that consideration. If this cannot be achieved, then finalising the Agreement will be held to the next appropriate Authority Meeting.

4.7 **Resolved Action: 259: RQIA to follow up with Sponsor Branch in relation to the return of the final draft of the Partnership Agreement.**

4.8 **b) Public Inquiries**

4.9 In relation to the previous **Inquiry into Hyponatraemia Related Deaths**, CC reminded all that there is a need to be cognisant of this, particularly the Implementation Programme work around "Duty of Candour" and "Being Open", although all aspects of the Implementation Programme have far reaching implications for the HSC as a whole and for RQIA itself.

4.10 In relation to the **Muckamore Abbey Hospital Inquiry (MAHI)**, CC advised that the Chief Executive would give evidence on 3 May 2023, having now submitted the RQIA's Statement under Rule 9.

The solicitor for MAHI, Joanne Witheford from DWF, is meeting on a weekly basis with the Chief Executive to keep a close eye on any outstanding work, documentation required and witness statements, etc, needing to be processed.

Two members of staff remain involved in MAHI and no further funding has been received from the DoH, which is creating an overspend in this work. CC advised that it will be a challenge to ensure financial break-even during 2022/2023, taking into consideration that the work to respond to the Public Inquiry needs to be resourced.

4.11 In relation to the **COVID-19 Inquiry**, as advised previously, RQIA had applied for Core Participant status, and this application had been declined by the Inquiry at this stage, and information had been supplied under Rule 9. Communications have been issued with regard to continuing preliminary hearings for Module 3.

4.12 In relation to the **Infected Blood Inquiry**, RQIA has received a request to submit information to the Inquiry by 29 March 2023, which will be shared with the Authority before submission.

4.13 **c) Resources**

4.14 CC noted that all will be aware that the financial landscape for next year looks to be very challenging, and resourcing for RQIA will be tight. She reminded Members that in order to try to break-even this year and on into next year, difficult decisions will require to be taken in how we apply our resources, given the

RQIA's legislative duties and requirements. Nevertheless, we must keep the safety and quality of care of patients, service users, residents, at the centre of our work and decision taking.

4.15 d) Legal Issues

- 4.16 Members noted the current Coroner's Inquest and a possible Judicial Review in respect of RQIA's duties to inspect / regulate mental health community services, with the hearing currently scheduled for June 2023. CC advised these legal issues will require resource and careful attention.
- 4.17 e) Congratulations
CC took the opportunity to record congratulations to the Deputy Chief Medical Officer, Dr Lourda Geoghegan, former Medical Director with RQIA, on her recent appointment to Professor of Public Health Practice in Queen's University, Belfast.

5.0 Agenda Item 5 - Members Activity Report

- 5.1 Members noted the Members Activity Report, which illustrates all Authority activity since April 2022 and the breadth of work undertaken.

6.0 Agenda Item 6 - Financial Performance Report (Month 10)

- 6.1 PC presented the Month 10 (January 2023) Financial Performance Report, explaining that it had been considered in detail at the previous Audit and Risk Assurance Committee (ARAC) meeting.

PC advised he had looked at the draft figures for Month 11 (February 2023) and assured the Authority that there had been little movement from those in Month 10.

The challenges remain around MAHI, trying to predict expenditure in accordance with its volatile nature. Legal fees are larger than that expected and counsel fees are challenging to predict.

Projection for year-end is circa £150k deficit and may increase or decrease slightly. The component parts of this overspend are for the commissioned piece of Deceased Patients Review (DPR) and the inescapable cost of MAHI. Even though progress with MAHI had slowed, RQIA has not received full cost recovery in line with the Business Case amount of over £600k. If this had been known at the time, RQIA would have been more reluctant to return £125k in accommodation savings to the centre.

A letter has been received from DoH asking for the detail on MAHI spend and we are still hopeful get an allocation, which will assist with break-even within the tolerance of \pm £20k.

PC advised that the Senior Executive Pay Award is not being separately funded and BSO are hopeful that the allocation for the Agenda for Change (AfC) pay award will cover this.

PC went on to say that income in registration fees has decreased this year, with a reduced turnover in manager variations and new applications.

PC reminded the Authority that in order to ensure effective use of funds there had been agreement to over-commit this year by circa £400k. It is doubtful, given the forthcoming financial environment, that this will be possible next year. PC advised there is nothing in pay and non-pay that he is concerned about and in relation to the new accommodation, we will need to wait a few months until we can get a realistic handle on running costs and staff moving to hybrid working during the first few months.

- 6.2 MMCI thanked PC for a very comprehensive report, which outlined clearly the reasons for the overspend. She felt assured that the organisation is being well managed financially and that the MAHI work, in particular, has led to the overspend. She expressed her hope for the remaining funding by year-end.
- 6.3 CC acknowledged that the DPR work has been good learning, in that the organisation should not take commissioned pieces on without the associated funding. CC asked if there was any possibility of additional monies for compensation in respect of the delays in moving to James House.
- 6.4 PC explained that there had not been a lot of additional costs and RQIA had made a saving on the premises bill for around one month. PC went on to advise that compensation payments were not applied in the public sector.
- 6.5 MMCI agreed and noted that the majority of organisations set to move to James House had been delayed and compensation payments could not be realised in the public sector.
- 6.6 AM reminded the Authority that the MAHI work cannot be viewed solely as a request from the DoH; rather a request from a Public Inquiry under the Inquiries Act, which must be complied with. There is no choice but to comply. AM explained further that he had checked this out after the ARAC meeting and found that under the Inquiries Act, a fine and/or 6-month prison sentence could be imposed for failure to comply with an Inquiry's demands.
- 6.7 PC noted that commissioned work was able to be resourced "in house" in previous years due to a consistent underspend. However, he agreed that the volume of Public Inquiries was not in existence in previous years.
- 6.8 CC reminded all that RQIA was now an organisation which was utilising its money fully.
- 6.9 NL felt that RQIA, while appreciating the costs and demands on staff from public inquiries, we need to be careful in our messaging, acknowledging it is a fundamental right to examine when things go wrong and inquire into what has gone wrong. RQIA needs to have a positive message, that it is an organisation on board with the rationale for an Inquiry and that it will comply with the demands and take on board the learning coming from this.
- 6.10 CC agreed that this is a good point; MAHI is about protection of basic human rights and is very much in the public interest. It is an inescapable position that we must meet its requests fulsomely and in a timely manner.
- 6.11 Members **APPROVED** the Financial Performance Report (Month 10).

7.0 Agenda Item 7 - RQIA Strategic Plan 2022-2027

a) Response Document to Public Consultation

b) Strategic Plan 2022-2027

7.1 a) Response Document to Public Consultation

7.2 JM advised that an Authority Workshop had taken place in January 2023, when the response document had been considered in detail. The Chief Executive had outlined five key areas which had emanated from the consultation and had been addressed in the Strategic Plan, namely:

1. Broader Listening and Involvement at service level and strategically;
2. Simplify Language, communications and awareness of inspection reports, and findings;
3. Limits in the Scope of the organisation can be confusing and we need to be clearer on what RQIA can and cannot do;
4. More ambitious in Driving Improvement and Accountability and showing Achievement; and
5. Our Independence, visibility and lack Confidence in our effectiveness.

7.3 CC agreed that the Response document was well compiled and clear.

7.4 The Response Document to Public Consultation of the RQIA Strategic Plan 2022-2027 was **APPROVED**.

7.5 b) Strategic Plan 2022-2027

7.6 JM updated that the draft of the Strategic Plan has incorporated the key messages from the public consultation and comments from the Authority Members have since been received and also incorporated.

7.7 CC advised that the date would be changed to 2022-2028, noting that the previous corporate strategy / plan had expired in 2021 and due to the Pandemic and the inability to undertake a public consultation, a Transitional Plan had been put in place for 2021/2022, followed by a Management Plan for 2021/2022. Therefore, this production started in 2022 and covers 2022/2023 and runs for five years to 2028. This will provide continuity. CC went on to say that the Plan is clear and gives us a good sense of direction in the very uncertain environment that we will face. There is a need to have something in the public domain which indicates our overarching ambition and what our sense of purpose is and what can be achieved reasonably. CC advised she will draft a foreword to complete the Plan.

7.8 NL commented on the comprehensive engagement to develop the plan and felt the transparency is very positive. NL suggested that the organisation's role as a National Preventive Mechanism should be added.

7.9 BS congratulated all on the production of this new Plan, saying it was clear, open and comprehensive.

7.10 CC explained that the intention is to keep it at a high level, as the world is changing so fast, for example, Northern Ireland's political and general, national and global uncertainties.

- 7.11 SE cautioned to ensure that we are not over-promising in this and advised to identify the top priorities. SE went on to say it would be wise to link this with the Risk Strategy, as the corporate strategy should drive where our risks will lie. SE acknowledged that there is more work to be done in identifying the key indicators.
- 7.12 CL advised that the Strategic Plan should be specific in stating the resourcing challenges. While the organisation needs to consolidate its ground, the Plan must be linked to our resources, highlighting the resources issues. CL went on to say that it would be reasonable that the DoH share this risk with RQIA.
- 7.13 AM noted his agreement with the previous comments, specifically around aligning risk to the strategic objectives. AM suggested that the risk-based approach should be mentioned in the Plan, particularly in consideration of the audit report brought to the recent ARAC meeting, indicating a need to explain the risk-based approach to inspection. AM also suggested that a piece under Enabling Priorities should be inserted in relation to finance and the current static registration fees.
- 7.14 SE and BS left the meeting at 12.02 pm.
- 7.15 CC agreed to include in her foreword, where appropriate. CC confirmed that all that was left to do was to make the suggested changes / additions; she will write the Chair's Foreword; the Chief Executive will update her Introduction and it can be submitted to the DoH.
- 7.16 Members **APPROVED** the Strategic Plan for 2022 to 2028, subject to the suggested amendments, for submission to DoH.
- 8.0 Agenda Item 8 - Business, Appointments and Remuneration Committee (BARC)**
- 8.1 **a) Meeting of 16 February 2023: Verbal Update**
As the Chair of BARC, SE, had just left the meeting, JM provided the update from the BARC meeting of 16 February 2023.
- 8.2 **b) Workforce, Modernisation and Organisation Development Programme: Inspection Support Volunteers**
JM explained that RQIA is proposing to launch its Inspection Support Volunteer (ISV) initiative as a 12-month pilot initially, in the Care Homes Team. RQIA is collaborating with Volunteer Now (VN) in relation to recruitment and training of volunteers and VN will act as a critical friend in this initiative. The launch is planned in March 2023, if all the preparatory issues can be completed, with arrangements for shortlisting and the interview panel in place thereafter. VN will process Access NI checks and Belfast Trust will process Occupational Health arrangements. The launch will be supported by communications to key stakeholders. The plan is that induction and training will be co-developed and co-delivered with the University of Ulster, with a handbook and a clearly defined set of evaluation criteria developed to assess the value added to the inspection process. The pilot and its evaluation will demonstrate if there is tangible value in this initiative, leading to a possible Business Case.
- 8.3 SW advised she had previously worked with CQC in a similar arrangement and would be happy to share experience and materials. CC welcomed this.

- 8.4 Members agreed this is a worthwhile initiative and **APPROVED** the plans to move forward.
- 8.5 **c) Activity Performance and Outcomes Report: Quarter 3, 2022/2023**
JM advised that BARC had considered the Quarter 3 Report for 2022/2023. BARC had considered the inspection activity and RQIA's performance, largely due to limited capacity and resource, alongside the challenges of legislation which requires updating. A Strategic Outline Case (SOC) was completed last year and submitted to the DoH, describing the shortfall in staffing to allow us to meet our commitments, both legislative and responding to risk. BARC had agreed that the importance of digital transformation is critical, so that the organisation is systematically acquiring the data to inform the decision-making. JM advised that RQIA will publish the performance activity report to the website in 2023/2024, thus putting in the public domain our performance in this regard.
- 8.6 Members **APPROVED** the Activity Performance and Outcomes Report: Quarter 3, 2022/2023.
- 8.7 **d) Digital: iConnect Down-Time and Software Upgrade Project: Addendum to Business Case: Verbal Update**
JM advised that BARC had discussed the iConnect Down-Time as part of the Software Upgrade Project. BARC considered the plan for shut-down to allow implementation of the new software platform and the communication arrangements for staff, iConnect web portal users (provider) and relevant stakeholders. The iConnect System has now undergone the software upgrade, with the web portal operational for providers. However, Business Continuity arrangements remain for a couple of modest issues; this is being reported through a regular Sit Rep meeting to the Executive Management Team.
- 8.8 EC reported that staff are working through the information reported during the Down-Time which requires to be input to the system.
- 8.9 JM went on to explain that an Addendum to the Business Case to implement Option 2, considered to be the best way forward, enabling the software platform to be upgraded to a version which allows for appropriate support and reduces the risk of possible security vulnerability, was being finalised for submission to Digital Healthcare Northern Ireland (DHCNI).
- 8.10 CC welcomed this progress, explaining that this was the start of a journey to ensure RQIA is digitally enabled for the future.
- 8.11 Members **NOTED** the update in relation to the Business Continuity Plan 'Down-Time' and the iConnect: Software Upgrade Project: Addendum to Business Case.
- 8.12 **e) Accommodation Move: Verbal Update**
JM explained that BARC had been appraised of the moving arrangements to James House. Since the BARC meeting, RQIA had moved from Victoria House on 17 February 2023 and was currently occupying a small temporary accommodation space in James House. The date for the move to RQIA's permanent office in James House is Monday 27 March 2023, which is looking favourable. A communication plan to keep staff and external stakeholders informed is in place.
- 8.13 Members **NOTED** the Accommodation Move Update.

- 8.14 **f) RQIA Equality and Disability Action Plan: 2023-2028**
 BARC noted the RQIA Equality and Disability Action Plan for 2023-2028, which had been drafted in collaboration with other Arms' Length Bodies, assisted by the Equality Unit from the Business Services Organisation (BSO). The Plan will be subject to a joint public consultation from April 2023 to the end of June 2023, 13 weeks. A range of consultation sessions will be available to stakeholders and RQIA will also arrange session for its own specific stakeholders. RQIA had submitted the draft plan on 15 February 2023 to the BSO Equality Unit in preparation for the public consultation.
- 8.15 The Authority **APPROVED** the RQIA Equality and Disability Action Plan: 2023-2028.
- 8.16 **g) Policy: Regional ICT Security and Associated Standards**
h) Policy: Anti-Fraud and Anti-Bribery Policy and Response Plan
i) Policy: Whistleblowing
j) MoU and DAA: RQIA and Criminal Justice Inspection NI (CJINI)
 The above-mentioned policies and MoU/DAA were reviewed by BARC and recommended for approval by the Authority.
- 8.17 In relation to the Regional ICT Security and Associated Standards, AM noted the reference to the former HSC Board and noted this has been replaced by the Strategic Planning and Performance Group (SPPG). JM agreed to alert BSO to this update required in the policy.
- 8.18 Authority Members **APPROVED** the Regional ICT Security and Associated Standards for adoption by RQIA.
- 8.19 The Authority **APPROVED** the Anti-Fraud and Anti-Bribery Policy and Response Plan and the Whistleblowing Policy, for adoption by RQIA.
- 8.20 In respect of the MoU and DAA: RQIA and Criminal Justice Inspection NI (CJINI), SW declared she is a member of the Prison Board. That being noted, Members **APPROVED** the MoU and associated DAA.
- 8.21 **j) National Preventive Mechanism: NI Sub Group Establishment: Verbal Update**
 JM explained that BARC had heard that the national NPM has now established a Northern Ireland Sub Group and RQIA has a seat at the table, with one of our Directors representing the organisation.
- 8.22 NL welcomed the establishment of the NI Sub Group, explaining that NPM could offer opportunities for RQIA, feeding into Treaty Monitoring Bodies, which may help in the future with strengthening a voice to indicate the organisation needs more resources and updated legislation.
- 8.23 CC agreed that this was a good advancement and Members **NOTED** the update in relation to the National Preventive Mechanism: NI Sub Group Establishment.
- 9.0 Agenda Item 9 - Audit and Risk Assurance Committee (ARAC)**
- 9.1 **a) Meeting of 2 March 2023: Verbal Update**

As the Chair of ARAC, NB, was absent from the Authority meeting, MMcl provided the update. ARAC noted the BSO Annual Assurance Letter, setting out assurances, processes and governance arrangements.

ARAC discussed the Mental Capacity Business Case, an action from the previous meeting, agreeing that a clear message needed to be sent to the DoH to explain that the organisation requires funding in this area to enable it to fulfil its requirements under the Mental Capacity Act (MCA). ARAC Members had also discussed income from fees and the outdated legislation in respect of same.

- 9.2 CC agreed that it is useful for ARAC to have these discussions and advised that it tied into the earlier discussion at today's meeting about the risks inherent in all of this and the need to ensure the DoH share this risk. This needs to be navigated with care.
- 9.3 NL indicated that the fees had set from the time of RQIA's establishment and cautioned that the Independent Healthcare Providers would, most likely, take issue with any suggestion that we wish to raise fees and will revert to say that all their costs have increased also. NL advised that RQIA needs to be aware of the level of resistance that such a proposal will generate, which could be turned into a resident safety issue, noting that of course this depends on legislative change which is outside of RQIA remit.
- 9.4 PC agreed with Members that there has been no increase in the fees for around 15 years and that RQIA is out of kilter with the rest of the UK, at a magnitude of around 5/6 times. PC advised of the need to push hard on the DoH to endeavour to get this to a position where there is the potential to revisit fees, to reflect current actual costs, or at least to contribute more to the actual costs. PC reminded Members that providers do continue to make a profit.
- 9.5 CC felt this would be difficult in the absence of a NI Assembly, nevertheless, agreed that we must encourage the DoH to get the process underway, which will most likely be a consultation process about legislative change. CC commented that the soon to be established RQIA Legislative and Policy Committee will be very important in this regard.
- 9.6 **b) Scheme of Delegated Authority (SODA)**
MMcl advised that ARAC had reviewed the SODA, which is a standard document, listing the approval amounts at each level of the organisation.
- 9.7 The Authority **APPROVED** the Scheme of Delegated Authority (SODA).
- 9.8 **c) Risk Management Strategy: 2023-2024: Verbal Update**
The Strategy had been presented to the Authority Workshop in January 2023 by the Chair of ARAC, NB and was then presented to ARAC. ARAC Members had discussed the need for risk identification and management to be linked to the Strategic Plan and the budget. The review of the Strategy will be part of the forthcoming Risk Management Workshop on 20 July 2023.
- 9.9 CC agreed that the Strategy is a key part of governance and all needs to align. CC and NB will meet with the trainer, Amberwing, to ensure the Workshop is tailored to the Authority Members' and RQIA's needs.

- 9.10 SW advised that she also undertakes work for USEL and linking the Principal Risk Register, Strategy and Strategic Plan have been invaluable.
- 9.11 Members **NOTED** the update in respect of the Risk Management Strategy: 2023-2024.
- 9.12 **d) Principal Risk Document (PRD)**
MMcl provided the update, advising of the key changes to the PRD, namely:
ID1: Health and Safety – all actions have been completed, therefore this risk is now managed and will be removed;
ID3: Failure to Break-Even – rating for this risk has increased as the receipt of funding for the Muckamore Abbey Hospital Inquiry (MAHI) work has not yet been realised.
ID5: Accommodation – this risk will reduce over the next month when the date for the move to permanent accommodation is certain.
ID9: Cyber Security Attack – this risk profile has not changed, as RQIA is working through the upgrade of iConnect to ensure its ICT inspection system is compliant. MMcl advised that the risks will be redefined and the PRD updated for 2023/2024.
- 9.13 The Authority **APPROVED** the Principal Risk Document (PRD).
- 9.14 **e) External Audit Update: Verbal Update**
MMcl explained that our external auditors and the Northern Ireland Audit Office (NIAO) had provided updates to ARAC, setting out the process for 2021/2022 accounts. There have been a couple of changes, with a focus on the IT environment and the introduction of ISA 315 *Identifying and Assessing the Risks of Material Misstatement*. assessing risks for material and misstatement. There has been a 20% increase in audit fees and ARAC had challenged this, resulting in the NIAO representative agreeing to request a reduction. The timetable for the annual accounts was also presented.
- 9.15 **f) Internal Audit: Progress Report**
ARAC had heard from the Head of Internal Audit, indicating that the Annual Plan is on track, with one more assignment to complete, that is, Cyber Security. MMcl went on to explain that the audit in Mental Health and Learning Disability Inspections had resulted in limited assurance for a number of reasons, such as, RQIA is not compliant with responsibilities under the Mental Capacity Act (MCA) and while the organisation has developed a risk-based approach, this has not yet been written up and approved/ adopted as policy. Internal Audit noted this is a good approach and needs to be agreed, formally approved and then implemented. Again, the issue of under-resourcing is a factor in play and there were some administrative aspects which would be addressed promptly.
- 9.16 NL queried how this sits with the organisation's statutory requirements under the MCA and MMcl explained that the auditors' view is that the risk based approach is reasonable but is not aligned to the legislation.
- 9.17 AM supported the view that if RQIA cannot fulfil its statutory obligations, this is next best approach, noting that it is not a case of one or the other but likely a case of the need to have a regular inspection programme and the ability to assess and respond to intelligence received, based on risk. However, the organisation will need to record this position, with a definition of what needs to be

created and the methodology to be used. Technology and analytics investment will be vital to enable it too.

- 9.18 CC agreed that the staff are taking this forward, exploring the components and how to achieve consistency. CC advised that there is work underway under the Regulation Framework project. This work is set within this, and Authority approved the project plan last year.
- 9.19 MMCI felt that, with limited assurance from Audit, this highlights an increased priority and the need to link the work to the volume of inspections being undertaken.
- 9.20 KH advised that a phased development and testing the implementation of the Regulation Framework in the new financial year was being discussed and that the teams are doing what they can within the resources that they have.
- 9.21 In respect of SW's question about issuing a controlled risk self-assessment out to the care homes as a good way of triangulating the risk, KH explained that this was not an approach adopted at this time, although acknowledged some aspects of that approach may have been undertaken during the COVID period and agreed to catch up with SW in relation to same. She noted that in developing the risk based approach, part of the next steps is engaging with service providers and others as part of the development of the risk indicators, and these are different for different services.
- 9.22 **Resolved Action: 260: KH and SW to meet to discuss previous use of a controlled risk self-assessment for the care homes and possible future uses**
- 9.23 In relation to the Authority Effectiveness Audit, MMCI reported this had received satisfactory assurance, the auditor noting improvements since June 2020 following the Board resignations. ARAC Members had agreed this was a credit to staff and previous Authority Members for this satisfactory result.
- 9.24 The Authority **NOTED** the update in relation to Internal Audit: Progress Report.
- 9.25 **g) RQIA Audit Action Plan**
MMCI reported that ARAC had examined and approved the RQIA Audit Action Plan which lists those recommendations outstanding the actions being taken to resolve.
- 9.26 Authority Members **APPROVED** the RQIA Audit Action Plan.
- 9.27 **h) Standing Reports: Verbal Update**
MMCI reported that ARAC had noted standing reports on:
- Whistleblowing Report
 - Fraud and Bribery Report
 - Data Breach Report
 - Direct Award Contracts & External Consultancy
 - Update on DoH Circulars
- and reported all was in order.
- 9.28 Members **NOTED** the Standing Reports as outlined in the papers.

There being no other business, CC closed the meeting at 1:05 pm.

Date of Next Meeting:



The next Authority Meeting will take place on Thursday 20 April 2023 at 9:30 am.

Signed 




**Christine Collins MBE
Chair**

Date 20 April 2023

Authority Action List: Meeting of 16 March 2023

| Authority Public Session: Action List | | | | | |
|---------------------------------------|-------------------|---|--|-------------------------------|--|
| Action number | Authority meeting | Agreed Action | Responsible Person | Date due for completion | Status |
| 255 | 8 December 2022 | Preface relating to the 'RQIA Review of Systems and Processes for Learning from Serious Adverse Incidents in Northern Ireland, June 2022' completed and published to website. | Chief Executive | When agreed with stakeholders |  |
| 258 | 16 March 2023 | Minister's response to the Nicholl Review in respect of the RQIA Board resignations to be shared with Authority Members | Head of Corporate Affairs | 20 April 2023 |  |
| 259 | 16 March 2023 | Partnership Agreement: RQIA to follow up with Sponsor Branch in relation to the return of the final draft of the Partnership Agreement. | Chief Executive / Head of Corporate Affairs | 31 March 2023 |  |
| 260 | 16 March 2023 | KH and SW to meet to discuss previous use of a controlled risk self-assessment for the care homes and possible future applications. | Professional Advisor, Social Work and Authority Member, SW | 31 May 2023 |  |

Key

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