



RQIA Board Meeting

Date of Meeting	5 July 2018
Title of Paper	Public Session Minutes
Agenda Item	8
Reference	Min/April18/Public
Author	Saoirse Wilson
Presented by	Prof. Mary McColgan
Purpose	To share with Board members 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 30 April 2018.
FOI Exemptions Applied	None
Equality Impact Assessment	Not applicable
Recommendation/ Resolution	The Board is asked to APPROVE the minutes of the Board Meeting on 30 April 2018
Next steps	The minutes will be formally signed off by the Chair and will be uploaded onto the RQIA website.



PUBLIC SESSION MINUTES

RQIA Board Meeting Boardroom 30 April 2018, 10.00am	
Present Prof Mary McColgan OBE (Acting Chair) (MMcC) Lindsey Smith (LS) Gerry McCurdy (GMcC) Denis Power (DP) Robin Mullan (RM) Seamus Magee OBE (SM)	Officers of RQIA in attendance Olive Macleod OBE (Chief Executive) (OM) Theresa Nixon (Director of Assurance) (TN) Dr Lourda Geoghegan (Director of Improvement) (LG) Malachy Finnegan (Communications Manager) (MF) Saoirse Wilson (Acting, Board and Executive Support Manager)
Apologies Dr Norman Morrow OBE, Sarah Havlin and Patricia O'Callaghan	

- 1.0 Agenda Item 1 - Minutes of the public meeting of the Board held on Thursday 22 March 2018 and matters arising**
- 1.1 The Board **APPROVED** the minutes of the meeting of the Board held on Thursday 22 March 2018.
- 1.2 The Board noted that action 176 will be presented today.
- 2.0 Agenda Item 2 – Declaration of Interests**
- 2.1 MMcC asked Board members if, following consideration of the agenda items, any interests were required to be declared in line with Standing Orders. No declarations were made.
- 3.0 Agenda Item 3 – Acting Chair's Report**
- 3.1 MMcC informed the Board the Care Tribunal Appeal lodged by Runwood Homes Ltd had been withdrawn. The Chairman of the Care Tribunal dismissed proceedings on 13 April 2018.
- 3.2 COPNI have informed the Review of Dunmurry Manor is progressing to the final stage of investigation, publication is anticipated by mid-June 2018.

- 3.3 MMcC advised she and DP attended the evening session of the NICON conference facilitated by Sir Steven Dorrell on 17 April 2018.
- 3.4 MMcC informed she will present details of the RADAR project, its progress and anticipated outcomes at the International Biannual DARE Conference in July 2018.
- 3.5 MMcC attended a Makaton training workshop and advised the training had reinforced her understanding of oppression for people whose language is not mainstreamed. OM informed RQIA will make contact with the training providers and will invite her to provide training for RQIA staff.
- 3.6 Board members held an open discussion about the Board Development Programme facilitated by HSC Leadership Centre and noted a lack of planning and structure and no quality assurance of content. Board members acknowledged this was a pilot programme but voiced their concerns about the reputational risk of being associated with this programme. The Board agreed not to proceed with the final part of the programme
- 3.7 **Resolved Action (185)**
MMcC and OM to provide feedback to HSC Leadership Centre and advise the Board are withdrawing from the Board Development Programme.
- 3.8 MMcC advised Board members they do not need to provide information feedback forms when the event attended has been documented within the Acting Chair's report.
- 3.9 The Board **NOTED** the Acting Chair's Report.
- 4.0 Agenda Item 4 – Meetings attended by RQIA Non-Executives**
- 4.1 LS and GM attended the NICON conference on 17 April. The key emphasis appeared to be on working collaboratively and engaging in co-production and co-design strategies. LS stated once the restructuring has been completed that she would like to see OM representing RQIA on this platform.
- 4.2 The Board **NOTED** the Meetings attended by RQIA Non-Executives.
- 5.0 Agenda Item 5 – Chief Executives Report**
- 5.1 The Chief Executive presented her report and welcomed feedback in relation to content.
- 5.2 The Chief Executive received a complimentary letter from a relative of a patient who lived in Ashbrooke Care Home. The relative thanked RQIA for moving her father to another care home and detailed how well he has been doing since the move. This letter has been shared with the Western Trust. DP advised of complimentary remarks made by representatives of the Patient Client Council commending the work of RQIA in relation to the closure of Ashbrooke Care Home.

- 5.3 OM provided an update in relation to ongoing legal actions. GM asked if there was any movement in the Wylie case relating to financial mismanagement in Bawn Cottage and Hebron House. OM advised this has again been deferred. DP queried if any further financial inspections had been undertaken in Bawn Cottage and Hebron House. OM advised there had not been any further RQIA inspections, and explained RQIA are working very closely with SHSCT who are currently in the process of completing a piece of work in relation to back payments.
- 5.4 OM advised a band 8a Senior Children's Inspector has been appointed and will commence work on 8 May 2018. An appointment has also been made to the band 7, Children's Inspector post.
- 5.5 An advertisement will be placed in the Belfast Telegraph for all inspector vacancies, including three within the Nursing Team. A generic band 7 job description will be used. This will allow staff to work across directorates.
- 5.6 The Trust Chief Executive Forum have invited OM to join them on scheduled occasions throughout the year. OM noted this is positive step towards building trust and respectful relationships.
- 5.7 RQIA's budget allocation has been received and a 2% reduction has been applied. OM stated she is satisfied this can be achieved without impacting on our services. DP acknowledged as Chair of Audit Committee that a 2% reduction was a good result, but noted that RQIA have exhausted opportunities to find savings and next year could prove more difficult.
- 5.8 OM advised dual registered homes have been reduced from 110 to 5. OM has written to the two providers of the five homes that remain dually registered and offered to meet with them in order to reach a mutually agreeable solution
- 5.9 The Assistant Director of Children's Services and the Director of Assurance met with the HSCB to agree terms of reference to take forward a joint piece of work exploring how best to move forward with unregistered facilities accommodating Looked After Children. TN explained the process of trying to identify the full extent of the risk is ongoing. TN has contacted Trusts to ensure this is noted on their risk registers. A meeting with the Department on 25 May 2018 has been scheduled to discuss findings at a senior level.
- 5.10 OM advised the Improvement Notice placed on NIAS has been extended for six months. NIAS are subject to a special measure, placed by the Department, and have had their first enhanced accountability meeting. OM and LG met with new Chief Executive of NIAS and the Senior Nurse seconded from PHA. RQIA will support the Chief Executive to improve governance and assurance. An improvement plan was shared with RQIA and substantial feedback about the plan was provided to the Department.
- 5.11 An editorial assistant has been employed on a trial basis to facilitate report writing and quality assurance of writing styles. GMcC queried if RQIA will move towards including standard phraseology in reports. LG advised there would be some standard phraseology in reports but it will be limited to ensure inspections are accurately described and risks are clear. The editorial assistant will be provided with analysis and findings to turn into a report

- 5.12 In relation to dental inspections RQIA will move to shorter and more focused inspections. OM advised of a positive reception at a recent meeting with the GDC Local Committee.
- 5.13 The Review of Implementation of Clinical Guideline CG174 Intravenous Fluid Therapy in Adults in Hospital commissioned by the Department is nearing the end of the fieldwork stage, this review examined governance in relation prescription and management of fluid in adults. Themes are emerging and have been discussed with the Chief Medical Officer. LG advised there is a very significant interface with Hyponatremia.
- 5.14 The review of GP Out of Hours service is also nearly completed fieldwork and is in the analysis stage. This is an important review in terms of service transformation going forward.
- 5.15 LG advised the Clinical Audit on TVT is complete and will be published on 8 May 2018. Media interest is expected.
- 5.16 An inspection of Maghaberry was undertaken from 20 to 23 April 2018 conjointly with HMIP, CJI and ETI. TN informed she was very encouraged by improvements made in relation healthcare provision and credited all involved. Costing of this inspection will be completed. MMCC acknowledged the immense amount of work undertaken triangulating information and gathering evidence as part of this inspection.
- 5.17 RQIA and Royal College of Psychiatrists are organising a further joint workshop on 6 June 2018 to address issues of consent and information sharing between professionals and families. This workshop will be attended by the five trusts. Board members were advised they could also attend.
- 5.18 OM provided an update in relation to the organisational restructure and advised MHLD functions are now part of the Quality Improvement Directorate. Two Deputy Director posts are currently being banded by BSO. Staff training and development needs along with performance management and appraisal were discussed.
- 5.19 DP acknowledged the creation of the Deputy Director posts are linked to learning from the workforce review and voiced his support for how the Chief Executive is developing the structure of the organisation.
- 5.20 OM advised a further update in relation to workforce review will be shared at the July Board Meeting.
- 5.21 The Board **NOTED** the Chief Executives Report.
- 6.0 Agenda Item 6 – Finance Update**
- 6.1 OM informed RQIA had received their financial allocation and have earmarked savings. RQIA's yearend position will report a surplus of a £50k. OM discussed slippage that accrued as a result of holding posts while developing the new organisational structure as part of the Workforce Review. OM advised that an attempt to surrender £67k to the Department at the beginning of March was

unsuccessful. A portion of this slippage was used through the Voluntary Exit Scheme. Accounts will not be qualified due to underspend.

- 6.2 OM informed the Board that budget holders and slippage will be monitored through the monthly finance section of EMT meetings. This will enable slippage to be controlled throughout the organisation rather than held in allocated directorates.
- 6.3 DP advised of a meeting he attended with the Chief Executive and BSO's Senior Client Accountant and acknowledged the effort made to achieve targets. RQIA's yearend position will be discussed at Audit Committee with internal and external audit.
- 6.4 DP advised he would like grievance noted against the HR report detailed in the finance paper to avoid confusion with the investigation commissioned by RQIA's Board.
- 6.5 DP advised he is happy to support the financial report as presented.
- 6.6 The Board **NOTED** finance update.
- 7.0 Agenda Item 7 – Approved Audit Committee Minutes of meeting held on 19 October 2017.**
- 7.1 DP, Chair of Audit Committee, advised a further Audit Committee meeting has taken place in March. The 19 October 2017 minutes have been approved at Audit Committee and are presented for Board members to note.
- 7.2 Board members **NOTED** the approved Audit Committee Minutes of meeting held on 19 October 2017.
- 8.0 Agenda Item 8 – Draft RQIA Information Team Work Plan**
- 8.1 OM advised the Board of a focus on the use of information. This work plan details how the information team will discharge their responsibilities OM discussed the make-up of the team and advised a permanent information analyst post will be advertised.
- 8.2 DP queried if outcomes of this information team work plan would be monitored. OM informed the action plan will be implemented and outcomes will be monitored by the new team manager.
- 8.3 The Board **NOTED** the Information Team Work Plan
- 9.0 Agenda Item 9 – Quarterly Communications Report**
- 9.1 OM sought feedback on first quarterly communications report presented to the Board. Board members advised they were happy with the format and detail of information.
- 9.2 GM queried if key themes emerging from engagement could be captured in this report. OM agreed

- 9.3 MMcC noted the opportunity for Board members to have more involvement with community engagement.
- 9.4 Board members **NOTED** the Quarterly Communications Report.
- 10.0 Agenda Item 10 – Proposed changes to the procedure for Appointment to RQIA's List of Part II Medical Practitioners**
- 10.1 RQIA consulted with the Royal College of Psychiatrists (RCP) regarding consultant psychiatrist's views on RQIA's process for applying for Part II status. Feedback from NIMDATA and RCP indicated RQIA could streamline its application process. Criteria for appointing Doctors has been revised. The Appointment Panel propose that Trust Clinical Directors provide RQIA with assurances that the applying medical practitioner has been approved to practice and under take Part II work following revalidation, and confirm that they already meet the revised criteria.
- 10.2 MMcC questioned what systems would be in place to get assurances from Clinical Directors in the Trusts.
- 10.3 TN advised that checklists currently used will be provided to Clinical Directors but the onus is on them to provide assurances. Current policies and procedures would require updating to reflect the proposed changes subject to the agreement of the five Trusts.
- 10.4 SM advised if RQIA move to this process we must ensure Clinical Directors fill in documentation as fully as possible. SM used one word references as an example. TN agreed the format of references varied across the Trusts and there was no standardised approach. TN agreed to raise this issue.
- 10.5 GMcC noted current RQIA processes for the appointment of a Part II Consultant Psychiatrists (under the Mental Health Order) includes input from; four Board members, a senior medical person, a director and two members of staff. GMcC advised he appreciates seriousness of this type of appointment however does not believe the level of resource is necessary.
- 10.6 **Resolved Action 186**
The protocol and procedure relating to Part II appointments will be reviewed.
- 10.7 MMcC informed a final decision will be deferred to the next Board meeting. Existing procedures will be amended and resource required for the panel will be reviewed.
- 11.0 Agenda Item 11 – Annual Report of Appointment Panel April 2018**
- 11.1 TN presented the Annual Report of Appointment Panel and asked the Board to consider if another Board member should be co-opted to the Appointment Panel following the resignation of Stella Cunningham.







- 11.2 TN advised of decreasing interest in the application for Part II Medical Practitioners. Advertisements have been placed on RCP website and HSC Recruit.
- 11.3 TN discussed raising the enhanced fee from £156 to £180 in line with CQC and other regulators. If required this will be raised with the Department at the Bi Monthly meeting
- 11.4 Board members **NOTED** the Annual Report of Appointment Panel.


**Date of next meeting:
5 July 2018, RQIA Boardroom**

Signed M. McColgan
Professor Mary McColgan
Acting Chair



Date 20/9/18.

Board Action List

Action number	Board meeting	Agreed action	Responsible Person	Date due for completion	Status
176	6 November 2017	Paper to be presented to the Board outlining developments in the use of ICT.	Director of Corporate Services (MA)	30 April 2018	
180	11 January 2018	HR report to be devised regarding the movement of people, sickness, litigation, grievances, and basic statistics.	Chief Executive (OM)	5 July 2018	
181	22 March 2018	RQIA specific Equality Action Plan to be devised based on BSO agreed policy.	Chief Executive (OM)	5 July 2018	
182	22 March 2018	Health and Wellbeing Hub to be referenced in the Equality and Disability Action Plan.	Chief Executive (OM)	5 July 2018	
183	22 March 2018	Audit Committee Minutes of meeting held on 19 October 2017 to be circulated to Board members and added to the next Board meeting agenda.	Board and Executive Support Manager (SW)	30 April 2018	
185	30 April 2018	The Chair will provide feedback to HSC Leadership Centre and advise the Board are withdrawing from the Board Development Programme.	Acting Chair (MMcC)	5 July 2018	

186	30 April 2018	The protocol and procedure relating to Part II appointments will be reviewed.	Director of Improvement and Medical Director (LG)	20 September 2018	
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Key

Behind Schedule	
In Progress	
Completed or ahead of Schedule	