

MINUTES

RQIA Board Meeting 2 September 2008

Lakeview Hospital, Gransha Park, Londonderry, 2:00pm

Present

Ian Carson (Chairman)
Geraldine Donaghy
Jim Jamison
Lilian Jennett
Patricia McCoy
Connor Mulholland
Una O'Kane

Officers of the Board present

Robert Graham (Committee Services Manager)
Theresa Nixon (Director of Quality Assurance)
Phelim Quinn (Director of Operations)
David Stewart (Director of Service Improvement)

Apologies

Richard Adams
Joan Harbison
Ruth Laird
Allen McCartney
Colin Reid
Austin Smith

Apologies

Alice Casey (Interim Chief Executive)

PUBLIC SESSION

08.87 Welcome and Chairman's remarks

08.87.1 The Chairman welcomed Board members, Officers of the Board and member of the public to the meeting. He noted apologies from Board members Richard Adams, Joan Harbison, Ruth Laird, Allen McCartney, Colin Reid and Austin Smith and from Interim Chief Executive, Alice Casey.

08.88 Minutes of the meetings of the Board held on Tuesday 8 July [Paper min/Jul/08]

08.88.1 The Board **APPROVED** the minutes of the meeting of the Board meeting held on 8 July 2008.

08.89 Matters arising from minutes

08.78.2 Appointments and Remuneration Committee business

08.89.1 The Chairman advised the Board that he had forwarded the recommendations for the Senior Executive pay awards to the CSA and to the Pay and Employment Unit the DHSSPS, but had not yet received a response. He **AGREED** to follow up on this matter.

08.80.2 Regulation of Dental Practices

08.89.2 The Chairman noted that the General Dental Council would be holding its next meeting in Northern Ireland and that he would have an opportunity to discuss with the President and officers of the Council the implications of future changes to regulation of dental practices in Northern Ireland.

08.79.12 Review of GP Appraisal Arrangements in Northern Ireland

08.89.3 A Board member asked if the Northern Ireland Medical and Dental Training Agency (NIMDTA) had responded to the Authority regarding the Action Plan arising from the Review. The Director of Operations advised that no response had been received as yet but he would follow this up.

08.76.8 Complaints Review Group

08.89.4 A Board member asked if the terms of reference for a Complaints Review Group had been developed and if they would be approved by the Board. The Director of Quality Assurance advised that she had commenced work on preparing the terms of reference and these would be brought to the Board as part of the annual review of Standing Orders.

Resolved Action

- **Chairman to follow up with DHSSPS correspondence regarding Senior Executive Pay Awards**
- **The Director of Quality Assurance to prepare terms of reference for the Complaints Review Panel**

08.90 Chairman's report [Paper B/05/08]

08.90.1 The Chairman presented his Report to the Board and noted that he had forwarded the records of the appraisal meetings to the Public Appointments Unit at the DHSSPS.

08.90.2 The Chairman advised Board members that he had met recently with the Permanent Secretary and that the meeting had been useful. He added that the proposed Ministerial visit to RQIA had been cancelled but would be rearranged shortly.

08.90.3 The Chairman referred to the successful launch of the Unannounced Hygiene Inspection Reports, and noted the extensive media interest which had raised the profile of RQIA.

08.90.4 The Chairman confirmed to Board members that an appointment had been made of a new Director of Corporate Services following the

resignation of John Stewart and that the successful candidate would take up post on 1 October.

The Board **NOTED** the Chairman's Report.

08.91 Corporate Risk Register - Director of Operations [Paper C/05/08]

08.91.1 The Director of Operations presented the updated Corporate Risk Register to the Board and noted that two of the risks had been eliminated and an additional risk added. This additional risk concerned the recent DHSSPS circular regarding disclosure checks.

08.91.2 The Director of Operations advised Board members that the RQIA was concerned about its capacity to monitor how registered facilities were adhering to the temporary legislation. He added that additional inspections would be done and that an on-line monthly monitoring system had been introduced.

08.91.3 The Chairman asked if the difficulty experienced in recruiting a permanent Chief Executive should be viewed as a risk to the RQIA. The Director of Operations **NOTED** the suggestion.

08.91.4 A Board member asked for clarification on Risk 12 concerning the loss of ICT infrastructure. The Director of Operations explained that the RQIA had been assessing a contingency plan whereby a temporary office could be established off-site in the event of a catastrophe.

The Board **NOTED** the updated Corporate Risk Register.

08.92 Quarterly Report - Director of Operations [Paper E/05/08]

08.92.1 The Director of Operations presented the Quarterly Report to the Board and following an overview of the key developments, invited questions from Board members.

08.92.2 The Chairman asked about the increase in the number of independent clinics and the process for their registration. The Director of Operations explained that there was no concern about the increasing number of clinics being registered but that some clinics were simply not aware of their requirement to be registered.

08.92.3 The Chairman further noted that the RQIA had deregistered an agency based in England. The Director of Operations explained that although the agency was based in England, the staff employed were working within the Northern Ireland Health and Social Care sector and were therefore required to be registered.

08.92.4 A Board member expressed concern that the Children's Team were not showing the same level of performance as the other teams. The Director of Operations explained that there had been significant

improvements made within the Team with the permanent appointment of a Programme Head and he was confident that the recent improvement would continue.

- 08.92.5 A Board member asked if the RQIA had the expertise to monitor the IRMER Regulations as this was normally done by the Health Promotion Agency. The Director of Service Improvement explained that discussions had already taken place with the DHSSPS and that the RQIA would obtain the necessary specialist expertise.
- 08.92.6 Board members raised questions about the number of deaths in nursing homes and asked if trend data was available. The Director of Operations advised that the RQIA was introducing a new notification system which would pick up on any trends. He also **AGREED** that in future Quarterly Reports, comparative information from previous quarters would be made available.
- 08.92.7 A Board member noted that there had been an increase in the RQIA's short term sickness. The Director of Operations advised that the RQIA had introduced a system to improve monitoring of staff sickness and that the issue was being addressed.
- 08.92.8 A Board member asked if future Quarterly Reports could contain a breakdown of the complaints against the RQIA.
- 08.92.9 A Board member asked if the Board could receive a schedule of the planned joint hospital visits being undertaken with the Mental Health Commission. It was **AGREED** that the Committee Services Manager would forward this to the Board members.

The Board **NOTED** the Quarterly Report.

Resolved Action

- **Committee Services Manager to forward to Board members the schedule of joint hospital visits**

- 08.93 Clinical and Social Care Governance Review Reports - Director of Operations [Paper F/05/08]**
- 08.93.1 The Director of Operations presented the Clinical and Social Care Governance Review Reports to the Board. He advised that the Reports were for each of the five Health and Social Care Trusts and the Northern Ireland Ambulance Service. He added that the Reports had been written, based on the final three Quality Standards but that the RQIA was considering whether this process should continue to be used in the preparation of future Review Reports.
- 08.93.2 A Board member noted that the Reports contained many recurring themes and suggested that areas of good practice should also be contained in the Reports. The Director of Operations noted that these

would be contained in the composite Report which would be presented at the next Board meeting.

- 08.93.3 A Board member suggested that the Review process could have more credibility if Reviewers were appointed from outside Northern Ireland. The Director of Operations conceded this point but noted that this would create difficulties in terms of reviewers' time and issues about remuneration.
- 08.93.4 Board members who had attended Reviews praised the work of the Review teams and the thorough preparation that was done before each visit, but expressed concern that the final output did not reflect the hard work put into the preparatory stage. The Director of Operations noted the concerns and explained that Board members' comments had been taken into consideration at recent workshops. He added that there had been discussion about the validity of the Reviews assessing against the standards set down by the DHSSPS and if the Reports were having an impact. It was **AGREED** that the issue of assessing standards would be included in the composite report.
- 08.93.5 The Chairman added that there was a responsibility on the Boards of the HSC organisations to ensure that the recommendations in the Reports were being implemented and to seek assurance from their Senior Management Teams that this was the case.
- 08.93.6 The Director of Operations clarified that the Reports were currently with the Trusts for factual accuracy checking and that the composite Report was currently being prepared.
- 08.93.7 The Director of Service Improvement advised the Board that he had attended a meeting with the DHSSPS to discuss the use of the controls assurance standards in future Reviews. He added that he had outlined to the DHSSPS the approach used in Wales for Reviews.
- 08.93.8 The Director of Operations outlined the next steps. He explained that the Trusts would prepare Quality Improvement Plans and share these with the RQIA and Action Plans would be developed which the RQIA could monitor in future Review visits.

The Board **NOTED** the Clinical and Social Care Governance Review Reports.

08.94 Review of Consultant Appraisal Across HSC Trusts - Director of Operations [Paper G/05/08]

- 08.94.1 The Director of Operations presented the Review of Consultant Appraisal to the Board and advised that the Review had been a "desktop" exercise and thus there were shortfalls in the methodology used. He added that the Review had not yet been issued to Trusts for

factual accuracy checking.

- 08.94.2 The Director of Operation outlined the key findings of the Review which found that a significantly low number of consultants had been appraised across the HSC Trusts. He conceded that the amalgamation of the Trusts had resulted in a lack of clarity in terms of the management responsibility for conducting appraisals and that the information provided had not been validated.
- 08.94.3 The Chairman noted that the Review needed to send out a strong message highlighting the importance of appraisal and that it is a contractual obligation for consultants and other grades of doctors to be appraised.
- 08.94.4 The Director of Service Improvement added that within the independent sector, there is a requirement for hospitals to demonstrate there is a system for recording the number of consultants who have had an appraisal.
- 08.94.5 A Board member asked what enforcement action the RQIA could undertake if Trusts did not comply with the 30 November deadline for returning an action plan. The Director of Operations advised that the RQIA did not have any enforcement powers in this case but that the DHSSPS would be made aware of the RQIA's concerns.
- 08.94.6 The Director of Service Improvement noted that appraisal risked being perceived as another "target" to achieve and added that the General Medical Council were considering piloting Northern Ireland when looking at the secondary care aspects of revalidation of medical appraisal.
- 08.94.7 The Director of Service Improvement reiterated that the RQIA had reservations about the methodology used in the Report and the accuracy of the information.
- 08.94.8 Board members expressed their appreciation of the work that Hall Graham had done in preparing the Report.

The Board **NOTED** the Report.

08.95 Review of actions taken in relation to the recommendations of a critical incident review - Maternity Services, Altnagelvin Hospital [Paper H/05/08]

- 08.95.1 The Director of Operations introduced the Review Report and advised that the RQIA had been asked to undertake the Review by the DHSSPS as a previous Review, conducted by the Western Health and Social Care Trust, had not specifically addressed the required terms of reference.

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08.95.2 The Director of Operations highlighted the recommendations contained within the Report and noted that there was key learning for the Western Trust and for the RQIA, as terms of reference are currently being drafted for a province-wide Maternity Services Review.

08.95.3 Board members made recommendations regarding the format of the Report. It was **AGREED** that a timeline of events was needed as this was unclear within the Report and that the Report needed to clarify that the critical incident had contributed to the death of the babies concerned. It was also suggested that recommendations 5, 6 and 7 include more specific timeframes.

08.95.4 The Director of Operations advised the Board that the Report had been forwarded to the Western HSC Trust for factual accuracy checking and that the Report would be available on the RQIA website.

The Board **NOTED** the Report.

Resolved Action

- **Director of Operations to make amendments to Review Report as per Board members' comments**


08.96 Any other business

08.96.1 With there being no other business the Chairman drew the meeting to a close at 3:55pm.

Date of next meeting:

11 November 2008, Board Room, Riverside Tower

Signed



Dr Ian Carson
Chairman

Date

11/11/08

