



Exploring the importance and value of the relationship between boards and executive management teams:

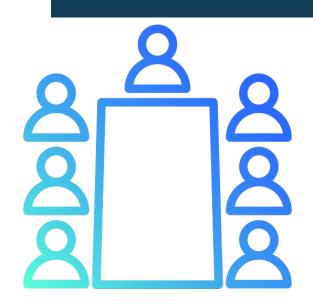
A collaborative learning event





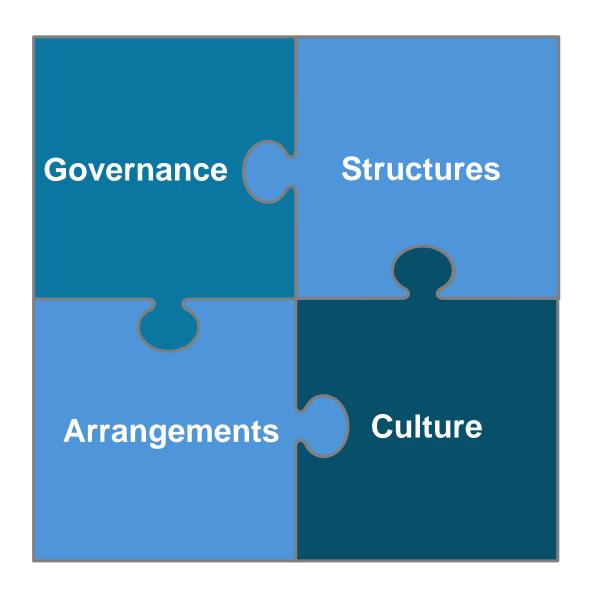
# Bernard O'Regan Assistant National Director – National Disability Team

# Assessing good governance and the relationships between boards and executives



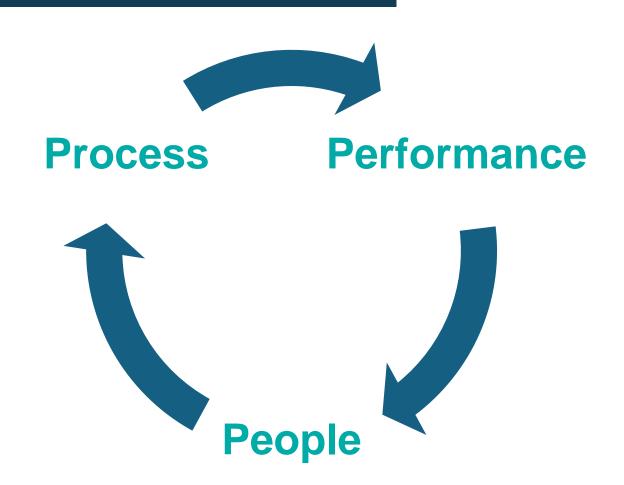
**Aidan Horan** 





#### The Board / Committee

- Effectiveness Reviews
- Performance Reviews
- Evaluations



## Governance reviews topic areas

- Roles and responsibilities clarity and execution
- Leadership
- Strategy planning and implementation
- Performance monitoring and reporting (KPIs)
- Risk management system
- Performance accountability arrangements
- Internal controls systems
- Board and sub-board structure / committee / working group effectiveness
- Values and their visibility



## Governance reviews topic areas (continued)

- Capacity and capability of governance and leadership team and individuals
- Compliance with legal, regulatory and governance obligations
- Stakeholder relationships, engagement and management
- Ethics, conduct, behaviour
- Financial governance, management controls and reporting
- Audit and assurance arrangements
- Oversight and scrutiny of governance obligations in relation to joint ventures, third party arrangements, funding agreements etc

## Board and executive relationships - reflections

- Board-led or executive-led organisations?
- Clarity
  - Purpose
  - Roles and Responsibilities
  - Accountability
  - Conduct and behaviours
- Trust
- Respect



#### Within your folder for today



- HIQA Collaborative Learning Event, 26
   March 2024 An example of a board / governing body effectiveness survey
- HIQA Collaborative Learning Event, 26
   March 2024 An example of a committee effectiveness survey (audit and risk)

#### Mentimeter

**Question:** What are the three most significant opportunities facing your organisation?

**Question:** What are the three most significant threats facing your organisation?





Join at menti.com

Use code: 8121 5108

The Printworks, Dublin Castle

# Leadership, ethics and culture







### RehabGroup

Investing in People, Changing Perspectives

- Shona Logan-King, Director of Quality and Governance
- Dr Ailis Quinlan, Board Director

#### Rehab Group - Governance

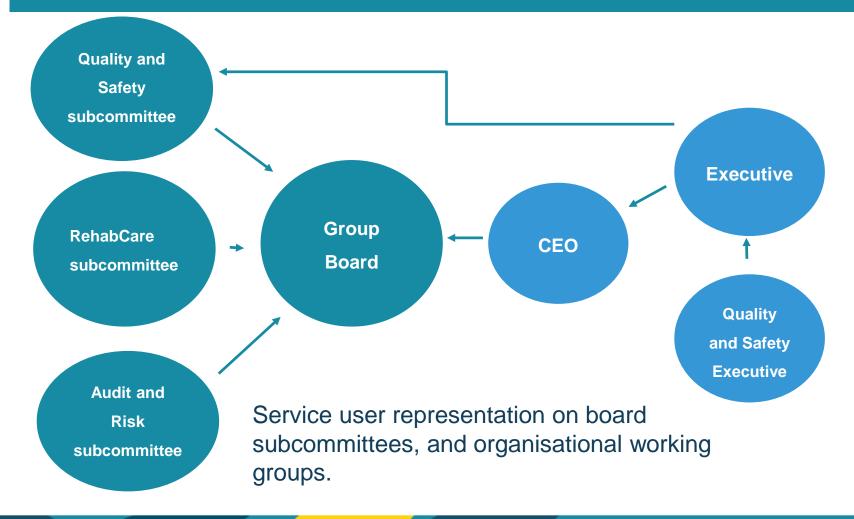


"To pursue opportunities, to be more independent, participate in and contribute to society living the life of their choosing"

# RehabCare 68 Resource centres = 1,827 Service Users 64 Residential services / Supported Accommodation = 240 users 15 Respite = 620 Service Users 13 Outreach services = 989 users 11 Care Link/PA services = 578 clients



#### **Group Governance Structure - Quality and Safety**





#### What culture do we want to achieve?

Person centred

Outcomes focused



Transparent and open

Learning and continuous improvement

Human rights-based service delivery

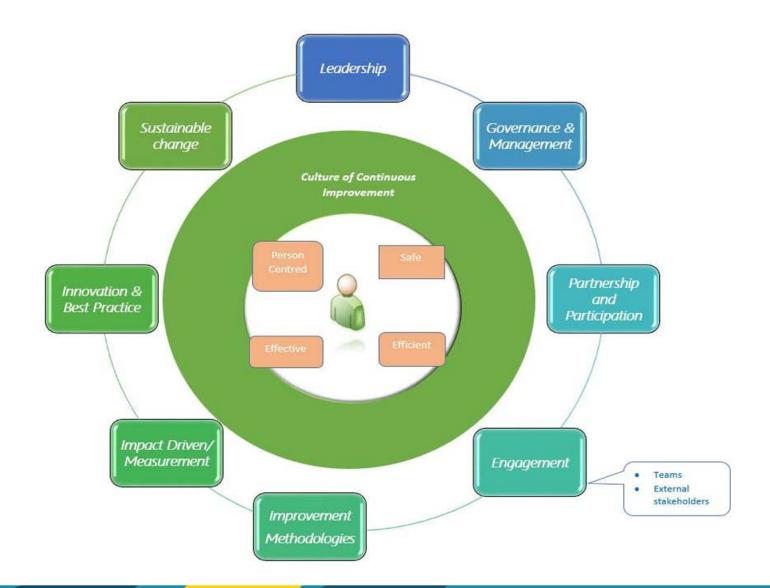
What works well? What could be improved? What is not working?



#### How do we achieve this?



#### Quality Improvement Framework





#### How do we achieve this - ethics

- Living and believing in our organisational values
- Ethical decision making, with service users at the core
- Transparency and integrity in all aspects of governance
- Making safeguarding personal
- Health, safety and wellbeing: staff and service users
- Compliance with regulatory bodies, and Charities Code
- Staff training and practice





#### Relationship between Board and Executive

- To deliver high-quality services
- Develop and foster relationship of mutual trust and respect between the executive and the board
- Competent board and executive. Appropriate skills-mix, knowledge and experience of both
- Clear definition of roles
- Mutual understanding of what information board needs / wants to be assured
- Support and induction / education of board members around regulations
- Balance of the board specific skills / expertise (for example legal, accountancy, HR, health and social care) and experience in the sector





# Relationship between Board and Executive – residential services



- Constructive challenges and support from Board
- HIQA reports are discussed at Quality and Safety
   Committee and Group Board
- Transparency the Board is made aware of every provider assurance report
- Board members are also members of Housing Association
   Board
- Service teams present to the Board with regard to learning from challenges
- Board members conduct site visits
- Regular and consistent reporting





Thank you!





Evaluating governance arrangements: one organisation's evolving perspective

James Forbes





#### A brief word about ChildVision

(and a briefer word about me!)





'the system by which companies are directed and controlled'

Cadbury, 1992



#### **Cadbury definition**

- Reductive
  - doesn't capture the complexity of what modern governance is being asked to deliver
- Disconnected
  - doesn't reflect the need for a very intimate, nuanced understanding of the organisation
- Groupthink
  - doesn't protect against perhaps the most insidious threat of all



## ChildVision's HIQA journey:

#### From 12 years ago to now













# Creating a culture that connects governance with practice

A Quality and Assurance subcommittee of the board

- ▶ the importance of terms of reference
- the necessity of external expertise





# What our Board has already committed to:

- the Quality and Assurance subcommittee as generative of a close engagement with services and the young people using our services
- a person-centred practice
- ▶ a 'no blame' culture
- a human rights focus
- our young people on interview panels





# What our Board needs to commit to:

- ▶ a rigorous self-evaluation process, inclusive of skills mix
- a commitment to specific training
- identifying regulatory excellence as a strategic goal
- ▶ a move from Cadbury to a more transparent ethic





# ChildVision's governance ambition

A learning culture that engages with regulation not as something to be wary of or merely tolerated but as an important spur to driving necessary, value enhancing change, promoting an ever enlarging understanding of quality and the ways to embed quality







# A move, perhaps, from Cadbury to Lily O'Brien's?







\* other luxury chocolate brands are available

# hank you!







# Internal compliance and accountability

Disability Services, Community Healthcare Cavan, Donegal, Leitrim, Monaghan, Sligo (CH CDLMS)

Dermot Monaghan, Chief Officer, CH CDLMS
Una Tomany, Regional Director of Nursing, Disability Services CH CDLMS

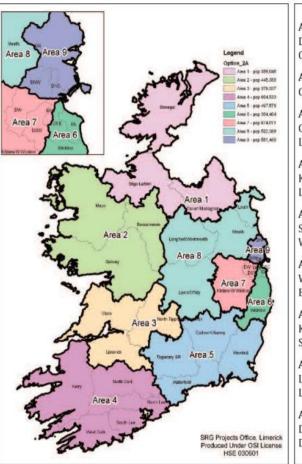




- The nine community healthcare organisations (CHOs) became operational in 2017
- Since 2017 the number of HSE CH CDLMS Disability Services designated centres has increased from 61 to 96



#### The nine Community Healthcare Organisations are outlined below:



#### Area 1 - Population 389,048

Donegal LHO, Sligo/Leitrim/West Cavan LHO and Cavan/Monaghan LHO.

#### Area 2 - Population 445,356

Galway, Roscommon and Mayo LHOs

#### Area 3 - Population 379,327

Clare LHO, Limerick LHO and North Tipperary/East Limerick LHO

#### Area 4 - Population 664,533

Kerry LHO, North Cork LHO, North Lee LHO, South Lee LHO and West Cork LHO

#### Area 5 - Population 497,578

South Tipperary LHO, Carlow/Kilkenny LHO, Waterford LHO and Wexford LHO

#### Area 6- Population 364,464

Wicklow LHO, Dun Laoghaire LHO and Dublin South East LHO

#### Area 7 - Population 674,071

Kildare/West Wicklow LHO, Dublin West LHO, Dublin South City LHO and Dublin South West LHO

#### Area 8 - Population 592,388

Laois/Offaly LHO, Longford/Westmeath LHO, Louth LHO and Meath LHO

#### Area 9 - Population 581,486

Dublin North LHO, Dublin North Central LHO and Dublin North West LHO



#### **CH CDLMS Executive Management Team**

Chief Officer



#### **CH CDLMS Governance for Quality Structure**

#### **CH CDLMS**

Chief Officer & Executive Management Team

#### CH CDLMS

Head of Service Quality, Safety & Service Improvement (QSSI)

QSSI

Health & Safety

OSSI

QPS Lead

OSSI

AMR Pharmacist OSSI

Safeguarding & Protection

OSSI

IPC AMR

Consumer Services

OSSI

## HE

#### **CH CDLMS Governance for Quality Structure**

- CH CDLMS Head of Service (HOS) for Quality, Safety & Service Improvement (QSSI), appointed in 2021 reports to the Chief Officer and is a member of the Executive Management Team
- Dedicated Quality Patient Safety (QPS) Lead for Disability Services, appointed in 2022 reports to the HOS QSSI
- Function of Performance Monitoring at a high level;
  - Monthly Disability Compliance Report
  - Quarterly QPS Quality Profile
  - Risk management processes
  - Consumer Services
- Quarterly Governance for Quality Management Meeting attended by the following Heads of Services and chaired by the Chief Officer – performance report review

	Disability Services	Primary Care Services	Older Persons Services	Mental Health Services	Health and Wellbeing	Human Resources
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#### Disability Services Senior Management Structure

- Head of Service Strategic & Operational Updates
- General Managers
   Operational Updates
   from Governance &
   Oversight
   Committees
- QPS Highlight Report
- Safeguarding Highlight Report
- HR Highlight Report
- Finance Report
- IPC/AMR Report

Disability
Services
Governance
for Quality



Relationship & Sharing of Information & Response

**CH CDLMS** 

Governance

for Quality

Disability
Services
Senior
Management
Team

- Information sharing new developments, policies, guidelines etc.
- HIQA Standards for Residential Services for Children and Adults with Disabilities
- Safeguarding Notifications, Responses
- National Standards, Guidelines, Policies, Audit and Report Recommendations
- Risk Management
   Processes/Risk
   Register/Incidents & SRE Trend
   Reports.
- Prevention and Control of Health Care Acquired Infection.
- Quality Improvement Initiatives



#### Internal Compliance and Accountability

- 2017 developed a database of designated centres.
- Established a baseline on the status of each centre.
- New centres included once registered.
- Self-assessment and the development of a quality improvement plan for each centre.
- Self-Assessment comprised of:



- Outcomes of assessments undertaken are populated on a standard QIP across the CHO
- QIPs are monitored at the centre, services & General Manager level
- Weekly Standards & Regulation meetings take place across the CHO. It is chaired by the General Manager with the Head of Service chairing once monthly
- QIPs are a weekly agenda item
- This supports the escalation of centres of concern for enhanced weekly monitoring at GM level



#### **Evolving Processes to Support Performance Monitoring**

CH CDLMS Disability Services have reviewed and evolved their monitoring approach since 2017.

Outcomes

Regulation

Further development of database to include all areas inspected allowing for analysis, trending and sharing of information to improve quality of services

- Reviewed mechanisms to support triangulation from an additional number of sources
- Audits included HSA, IPC, Maintenance, Estates, thematic inspection selfassessments and outcomes
- Development of an Early Warning System
- 2021 Development of Disability Services Training Matrix and Catalogue
- Compliance reporting monthly to the Chief Officer
- 2023 Sustainability Plan reporting



#### **PROCESSES**

#### Management Team Structures:

- CHO
- HOS
- **GM**
- Operational Area
- Service Area
- Centre

#### Governance for Quality Structures:

- CHO
- HOS
- GM
- Operational Area

#### **ENABLERS**



#### **GOALS**

Improving resident experience

Improving resident autonomy

Ensuring resident safety



## Building Better Futures:

The role of good governance in enhancing lives