

# Written Ministerial Statement

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## Department of Health

### INDEPENDENT REVIEW INTO RQIA BOARD RESIGNATIONS PUBLISHED

*Published at 12.00 noon on Monday 19 July 2021.*

**Mr Swann (The Minister of Health):** My Department will today publish the report by an Independent Review Panel into the Board resignations in the Regulation and Quality Improvement Authority (RQIA) in June 2020. I commissioned this review in order to establish the facts surrounding the circumstances that gave rise to the RQIA board resignations so that lessons could be learned and recommendations, for my consideration, could be made that would help ensure that this event would not reoccur. The review was carried out by Mr David Nicholl of On Board Training and I wish to thank Mr Nicholl and his team for the detailed work they have put in to carrying out this review.

The report is published in full save for some minor redactions in relation to personal information. I encourage all Members to read it.

The report makes for difficult reading for all concerned – for my Department, for the former Acting Chair and other ex-members of the RQIA board, and for the then Interim Chief Executive of RQIA. It is a story involving inadequate communication, breakdowns in working relationships and deficiencies in governance. At its heart are the severe and unprecedented pressures brought about by the COVID-19 pandemic. The independent review team's report says there is "no doubt that the pandemic, and the speed of decision-making in the midst of the pandemic, was the primary cause of this crisis". As it rightly notes, the pace of decision-making during the period from March to June 2020 was "frenetic".

The independent review team states that, "whilst understandable" the resignations of the RQIA board members "were not necessary or desirable particularly during a time of crisis". I welcome that conclusion. I deeply regret that the Board members did not come to me and say they were on the brink of resigning. I would have taken that very seriously and I believe we could have worked together to resolve the difficulties.

The review team's report states: "Had the Department responded positively to this threat [to resign], and the Review Team believes that it would have, Board Members would have engaged with the Department and set about developing a working relationship which would ensure that communications and decision-making were placed on a secure footing. This process would respect the relative positions of all concerned and be designed to ensure that this would not happen again."

The review team is also clear that the Department of Health cannot escape its share of responsibility for what occurred. It believes that if better governance had been applied between the Department and RQIA this event may have been averted.

The recommendations put forward, therefore, are aimed at providing the necessary clarity on roles and responsibilities and relationships for: a Minister, for his or her officials, and for the department's Arm's Length Body (ALB) Boards along with their Executive teams, in accordance with legislation and best practice.

With regards to the circumstances that occurred leading up to the resignations, the report highlights issues surrounding directions issued by the Department during the pandemic and breakdown of relationships. A number of conclusions are arrived at for each of these areas; which have helped inform the recommendations.

The Departmental directions issued included a temporary scaling back of the RQIA's inspection activity. The independent review states: "The decision to scale back much of the RQIA's inspection

activity and review programme had the effect of aligning the RQIA's regulatory practice with that of other social care regulators in England, Scotland, Wales and the Republic of Ireland.

"The rationale for the decision was reasonable and reflected the scaling back of many ALB activities during the Pandemic. Ex-Board Members, collectively, do not appear to be disputing the merits of the Direction, but rather the lack of consultation and communication around the decision."

This is an important point. The central problem was not the direction itself but the lack of consultation and communication with the Board. This will hopefully address the mistaken impression in some quarters that the Board resignations were due to opposition to the scaling back of inspections.

It is clear within the report that my Department has the right to issue directions to the RQIA; however, as indicated within the report, this should be to the RQIA Board. My Department has acknowledged that communication with the RQIA Board was weak during this period.

The report also highlights the breakdown in relationships between the RQIA Board and its Interim Chief Executive, as well as the Department and the acting Chair of the RQIA Board. I am aware that the Interim Chief Executive, who was appointed in the middle of the pandemic, was inexperienced and had no appropriate induction. This, coupled with the decision to redeploy several senior members of the RQIA's Executive Team, left him with very limited management support and contributed to a lack of knowledge regarding his responsibilities as a Chief Executive and the accountability of this position to the Board of the organisation.

When working to ensure that arising issues with the RQIA Executive team and the RQIA Board were resolved satisfactorily, the lack of a "real relationship" between the Department and the Acting Chair/Board meant that a balanced view of events was not considered. Unfortunately, subsequent communication between the Department and the RQIA Board, in an attempt to improve the situation, further aggravated the situation with the Board and brought matters to a head.

The report's recommendations address a number of the areas of concern highlighted in the report, including the lack of proper working relationships, ensuring that the governance approach is in line with best practice and appropriate communication channels, with clear roles and responsibilities. These are directed at the role of a Minister and the relationship between a Department and its ALB's. The independent review team has concluded that this is an issue that goes well beyond my Department; the report states, "This suggests that these structural governance weaknesses may be more widespread and deep-seated than just the RQIA and the Department of Health."

I am pleased to report that a number of early actions I initiated since becoming Minister in January 2020 go some way to addressing key issues. These include the establishment of regular meetings with the chairs of all ALBs, including RQIA. It is indeed unfortunate that the board resigned when they did, as my first meeting with the ALB chairs was scheduled for and took place on the 17 June 2020.

I have considered all the recommendations and can report that I have accepted them all. Since receiving the independent panel's report in late January, my department has developed an action plan detailing my response. This is published today along with the report. I believe it is important that they are both published together. The process has taken longer than I would have ideally wanted, but pandemic related workload pressures have continued to seriously disrupt Departmental business. I can assure Members that I want to ensure this situation does not happen again, in the RQIA or any other arms-length body of my Department. As the report highlights, there are lessons to be learned across Government.

Non-executive board members have a crucial role on Departmental ALBs.

I want to also take this opportunity to thank all board members across health and social care and NIFRS for the contribution they make to the provision of public services.