**National cancer registry board meeting**

**7th March 2019**

1. ***Register of Attendance/ Apologies***

Present: Dr. Jerome Coffey (JC)

Dr. Anna Gavin (AG)

Dr. Fenton Howell (FH)

Dr. Cathy Kelly (CK)

Apologies: Dr. Orla Dolan

Mr John McCormick

Present: Prof. Kerri Clough (KC)

Dr. Conan Donnelly (CD)

1. **Minutes of previous meeting**

The previous meeting took place in Cork in November that included a detailed legal presentation. The following items were discussed.

Section 7 Page 3 of minutes – FH advised that Mazars Disaster recovery action had been resolved and is in place.

AG – requested a full copy of the risk register be made available rather than the high risk items only. FH confirmed this is available.

AG requested a UKAICR meeting in Cork 2020. KC advised that due to current workload it would not be possible in the current year.

AG invited a NCRI for a visit to Belfast and extended of a formal invitation to the NCRI board and staff to the launch of the Life After Prostate Cancer Diagnosis Final Report on March 29th 2019

1. **Finance Report**

KC advised that no budget allocation has been provided for NCR as of 7th March 2019, this is likely to impact on the achievement of the Scally Recommendations with progress delayed already. The Board will write to the Department to advise of concern that the NCRI will be unable to deliver on the Scally Recommendations and request a meeting with the Department of Health. FH advised that this letter to focus on the current year’s budget.

**Action: Letter from Board to the Department**

FH advised the Audit Committee were satisfied with the 2018 accounts. It was a recommendation from the Audit Committee that Research and Core funding should be in separate accounts.

JC requested the Board consider signing off on the accounts. The Board confirmed that they are satisfied the accounts have been signed off.

The internal auditors advised that the internal control mechanisms in place are satisfactory and the Audit Committee is satisfied of these.

1. **Directors Report**

***Recruitment***

KC advised that CDR recruitment delays represent a significant challenge to the core business. She reported having written to the Department with a business case to review the nursing grade requirement. AG advised that NICR do not have a nursing requirement in Northern Ireland.

The Board confirmed their support of this change and will support with a letter from the Board if required.

AG suggested increasing flexibility through floating staff, KC advised that this will be achieved through the establishment of remote access arrangements which is currently underway.

KC advised that positions for Research Project Manager and an Information Technology Manager

AG enquired as to the status of strengthening public health. KC advised that a number of approaches will be applied including a proposal to employ a specialist in Public Health and the development of public health training role of the NCRI in partnership with the NCCP. AG highlighted the importance of making opportunities attractive to Public Health trainees

AG enquired as to use of annual performance review. KC advised that a programme is currently being re-established

***Data registration and GDPR***

KC advised that internal DPO will be in post on April 1st

KC advised the process of setting up Data Sharing Agreements with all hospitals

AG asked re the roll out of the cancer registration system where radiotherapy processing

***Cancer Intelligence and Research***

Department has requested a report from NCRI on research which will be provided for next Board meeting

The Board thanked the NCRI for their research output over the year

A lay summary of the registry reports was suggested by AG. This suggestion was welcomed and agreed by the Board.

1. **Audit Committee Report**

FH advised the committee met the previous week and summarised main recommendations on audit, reporting on risks, internal reporting on data and registration.

SM has moved to a new role but has been requested to remain on the Audit Committee as he has been invaluable to the Audit Committee.

1. **Cervical Check Review Implementation Plan**

KC has advised there has been no official start to work on Scally recommendations and work planned to commence on Q1 has been delayed until Q2. She advised the HSE NCRI collaborative effort has also been established

JC enquired as to the potential of timeliness improvement. CD advised that timeliness could be advanced between 3 and 6 months without reviewing data architecture

JC advised that IARC have been invited to undertake peer-review of NCR. AG advised of the value of patient and funder involvement as part of the peer-review team.

**Action: AG agreed to circulate the NICR peer review report published in 2018**

KC advised that the task of establishing a National Screening Registry is a complex challenge which will be taken forward by the HSE / NCRI collaboration.

JC advised that he attended a meeting on the relationship between state bodies and aegis bodies and highlighted some very useful recommendations particularly on training. These will be shared in due course.

1. **Data Quality**

A paper will come before the Board at the next meeting on data quality

AG advised that the performance indicators developed by the UKAICR should be a key part of the quality programme and it has been very useful at the NICR and that even sharing for a previous year would be very useful

Letter of engagement – co

1. **Charging policy**

CD introduced the charging policy, explained the requirement for this and requested approval.

AG advised that the 3rd party funded research should not be given the expectation of being excluded from charging. The Board agreed. The charging policy has been approved subject to this amendment.

1. **Risk register**

The risk register was reviewed and JC advised that funding of scally recommendations reflects the greatest risk to the organisation. JC also highlighted the risks around integration between NCRI and new cancer database systems and asked if NCRI staff were involved in the development of the MEDLIS system.

**Action:** **KC will write to Medlis committee seeking membership of the committee**

FH advised that the full risk register should be shared with the Department and JC requested full report is shared with the Board at each meeting

**Action:** **NCRI to regularly share the risk register with both Department and Board**

1. **Performance Delivery Agreement / Oversight Agreement**

KC advised objectives for NCRI should be aligned with the legislation of the NCRI and that it should be updated for 2019 and should be signed early in the year

The Board agreed the agreement should be signed by both the Director and NCRI Chair and AG advised that the signatory names should be printed for clarity.

FH advised there was no indication of the obligations of DOH in a performance delivery agreement regarding budget and would request that the Performance Delivery Agreement would be amended to reflect their respective responsibilities.

AG advised there needs to be consistency between the NCRI, strategy and Scally Report. The Board agreed that this approach should be applied.

**Action: KC to revised draft agreements for next Board meeting. NCRI Board to review agreements accordingly with the DOH.**

1. **Publication Plan**

JC welcomed the development of a three year publication plan and the Board approved the plan.

1. **Policy on conflict of interest**

JC advised this should be retained and is a useful and valuable policy document

Board agreed to confirm no conflict of interest in advance of all future meetings

1. **Policy on Social Media**

This policy was requested by the Board. KC advised that it would be updated accordingly

JC advised that the policies should be updated in scheduled manner. KC advised that all policies were currently under review and an agreed schedule of review will be followed.

1. **Update on Board membership**

JC advised that Board recruitment is underway and further information will be available in due course.

1. **CSO / NCRI Memorandum of Understanding**

AG advised that signatory should be printed under the signature.

AG also advised of the importance and value of ISO27001 security standards in terms of data security and control.

1. **AOB**

JC and the Board congratulated to CK who is now a medical Director of clinical trials and has won funding from ICS for protected time to undertake her research.

***Organisational structure***

Organisational restructure, previously decoupled from the job evaluation (in Crowe Report), is approved and to be implemented as part of new NCRI strategy. KC advised that DOH / DPER will not sanction any upgrade process for positions at the NCRI. Board advised that there is no further potential for progress in this issue. No changes will be implemented.

***National Cancer Registry Strategy***

JC requested comments, the following comments were provided

KC advised that the strategy received positive input and feedback from the DOH but that the DOH advised that the Strategy should not refer to plans on Board composition is this responsibility lies with DOH

AG highlighted that consistency with other corporate agreements and documents should be ensured.

JC – suggested screening may require a specific reference on the schematic of NCRIs role in the Cancer Control particularly in Figure 3.3.

FH – does it specifically state NCR role in reporting in private hospitals as well as state bodies. He suggested that this should be included in the background section.

AG suggested values should include respect for patient confidentiality

AG – registries are increasingly required to capture molecular data / emphasise increased incidence and suggested this may be highlighted

FH – requested a full proof read

KC advised the Strategy will be amended accordingly and advised that it will not be circulated to staff until Minister’s approval

JC – suggested a request for comments, a final pdf will be prepared and submitted to Minister for announcing and welcoming the strategy and any associated launch.

**Action: NCRI Board to write to all hospitals with a copy of the report, JC to communicate to NCRI staff, NCRI will prepare an associated press release.**

***Entertainment Policy***

An Entertainment Policy has been submitted in Board papers but has not been reviewed by the management team by NCRI. This will be resubmitted to the Board following management review.

***Induction for new board members***

JC suggested an induction pack be prepared for the new board members. It was agreed that this would include Corporate Strategy document.

Action: KC to review to prepare an induction pack for next Board Meeting.

**Date of next meeting**

Next meeting in cork 13:30 23 May 2019 in Cork