

**MINUTES OF A MEETING OF THE
NATIONAL CANCER REGISTRY BOARD (NCRI)**

HELD ON

15 APRIL 2025 AT 1.00 PM

AT

BUILDING 6800, CORK AIRPORT BUSINESS PARK, KINSALE ROAD, CORK / MICROSOFT TEAMS

1. Register of Attendance

1.1 Present:

Name	Details	Initials
Dr Robert O'Connor	Chairperson	ROC
Ms Mary Bourke	Board Member	MB
Mr Niall Murphy (Online)	Board Member	NM
Prof Mark Lawlor	Board Member	ML
Ms Cathy Enright (Online)	Board Member	CE
Ms Ellen Farrell	Board Member	EF

In Attendance:

Name	Details	Initials
Prof Deirdre Murray	NCRI Director	DM
Ms Rose O'Connor	NCRI Corporate Operations Manager	COM
Ms Catherine McGovern	NCRI Business & Planning Manager	CMcG
Ms Grace Grogan	Head of Cancer Registration	GG(for part thereof)
Ms Deirdre MacDonald	Data Manager	DMD (for part thereof)

1.2. Quorum.

IT WAS NOTED THAT there was a quorum of board members present at the meeting.

1.3. Condolences.

ROC passed on condolences to Deirdre on behalf of himself and the Board on the recent death of her father, Mr Dan Murray.

2. Declaration of Conflicts of Interest.

The board members confirmed that they had no conflict of interest in the matters to be discussed at the meeting.

3. Director's Report.

3.1. DM reported to the board on the NCRI's strategic and operational goals, during which the following points were noted and discussed:

3.2. Improvements in onsite & remote access.

3.2.1. The importance of access to data from all locations.

3.2.2. NCRI recognises the need to engage & inform, including in relation to our statutory role, particularly when new personnel take up relevant roles in the hospitals.

3.2.3. The board commended the Registry re increased access and are available to support if needed in relation to further improving access.

3.3. Business Continuity.

3.3.1. The actions taken to prevent an abrupt shutdown re Storm Éowyn were outlined, including that the managed shutdown & managed restart went well.

3.3.2. Cybersecurity: Because of the nature of the organisation, despite taking all necessary mitigating actions, Cybersecurity remains a medium Risk on our RR.

3.3.3. EF noted that at a recent IPA training highlighted that the organisation could consider carrying out a tabletop test run re business continuity which would include Board involvement.

3.3.4. DM noted that the HSE have comprehensive processes re Emergency Management & she will explore this further.

3.3.5. COM noted that an Internal Audit (IA) in relation to Cybersecurity is in the plan for Q3 2025 with Mazars & the possibility of planning a tabletop test for 2026 can be explored with them.

3.3.6. The executive will continue to provide reports to the Board in relation to the monitoring and management of cyber threats.

3.4. Research & Analysis.

3.4.1. There is now a team in place, leading to increased activity & increased levels of collaboration.

3.5. Electronic Data

3.5.1. The increase in electronic data capture was noted, which was delivered from additional hospitals sending HL7 messages, additional access, and additional electronic radiotherapy data.

3.5.2. The update re MedLIS is that it is scheduled to go live in 2 sites later this year.

3.6. Stakeholder Engagement.

3.6.1. There is substantial ongoing engagement with NSS and NCCP to ensure that the databases are aligned & increased confidence in the outcomes. The Board commended NCR on the strengthened relationship

3.6.2 Other cross border and international collaborations were noted, including CancerWatch JA Project. This is the largest single investment by the EU in Cancer Registries; its primary objective is to improve the level of harmonisation across European Registries.

3.6.3 DM mentioned the need to look at revamping and restarting of the advisory council. It was agreed that the Council needed new members, and it was hoped that with the new governance appointee starting they would be a significant enabler to this.

3.7. HR, Finance and Risk Reports.

3.7.1. A summary HR, Finance and Risk reports were noted as being included in the Board Pack.

3.8. The Board commended the Directors report, welcoming the inclusion of the infographics which presented the complex information in a visually appealing way, making it easier to understand.

4. Board Recruitment Update.

- 4.1. ROC confirmed that 'State Boards' recently completed a competition with interview process in relation to the vacant board position, resulting in a candidate being identified. It is expected that the appointment will be completed in due course.
- 4.2. ROC emphasised the need to make sure that the Board has the appropriate mix of competencies.
- 4.3. It was noted that the term of 2 Board Members is up on the 14/07/2025, with ML indicating that he would be retiring from the Board and MB indicating her willingness to be reappointed.
- 4.4. ROC received a letter confirming his reappointment as Chairperson until 14/02/2029.

ACTION: Engage with DoH re ensuring that reappointments and the refilling of vacancies are processed on a timely basis.

5. Strategic Plan: Year 2 Implementation Plan.

- 5.1. CMcG presented the Strategic Plan: Year 2 Implementation Plan.
The Board reviewed the planned activities & 2025 deliverables under each of the five objectives, noting that the Health Information Bill (HIB) was not as far advanced as had been envisaged when the Strategic plan was being developed. It was further noted that the European Health Data Space Regulation recently entered into force, marking the beginning of the transition period which will take approximately 5 years to roll out – this may inform the HIB.
In addition, the revised timeline for the MedLIS roll out was noted.
- 5.2. The Board welcomed the proposed development of secure trusted research environment & members will forward on relevant contacts from the NI & UK Registries who may have experience of this. The discussion covered the level of accreditation, training and access that researchers may expect. The Board noted the uncertainty around research projects that currently exists in the USA and confirmed that NCRI is not in receipt of any US funding.
- 5.3. NM raised the need to build in consideration of the utilisation of AI into current and future activities. The Board members agreed that given there is now an AI Act, there are added governance obligations, so there is a need to assess to ensure that AI issues are brought up in discussions around ongoing & new processes. Further it was agreed that NCRI will incorporate the consideration & utilisation of AI into the next Strategic Plan.

ACTION: The senior management team to consider the applications of the use of AI as an action & update the Implementation Plan accordingly.

6. Strategic Plan: Service Plan Dashboard.

- 6.1. CMcG presented the service plan dashboard to the meeting and explained to the meeting how the dashboard measures the NCRI's progress against its strategic objectives each quarter.
- 6.2. The Board reviewed the Q1 service plan dashboard and the status of each of the 2025 goals was noted by the Board. It was noted that MedLIS rollout is delayed, causing NCRI plans to be delayed & NCRI migrating to Tableau to cloud trending slightly behind planned due to a focus on getting Tableau working optimally for the new website.

7. Deep Dive: Data Integration.

- 7.1. DMD joined the meeting to provide the Board with a presentation in relation to Data Integration, covering the areas of histopathology laboratories, electronic pathology processing, pathology, projects, future developments, key challenges, and milestones.
- 7.2. The Board thanked DMD for the excellent presentation
- 7.3. There followed a discussion re capacity to meet increasing demand, noting that the implementation of the Individual Health Identifier (IHI) will be a help but there is also a need to increase the staffing compliment. It was noted that AI may bring process efficiencies in the future, however the lack of standardisation in pathology reports creates a challenge for using AI to interpret the content. DM noted that NCRI is engaging with the Faculty of Pathology. CE noted that there is currently a project in St. James' Hospital related to extracting cancer molecular diagnostics & it may be useful for NCRI personnel to join this project as observers.

ACTION: CE to follow-up on how the NCRI are added to this project.

8. Deep Dive: Registration.

- 8.1. GG joined the meeting to provide the Board with a presentation in relation to Registration, covering the areas of Registration department structure & staffing levels; annual levels of tumour registrations; milestones in backlog reduction; pending projects; and European Network of Cancer Registries (ENCR) recommendations in relation to recurrence, progression and transformation.
- 8.2. The Board thanked GG for her excellent presentation. They enquired about Registration being required to capture more information and if there is anything that can be dropped. GG responded that there was no proposal to reduce the data capture but that it is hoped that much of the extra information will be captured through pathology reports.
- 8.3. It was noted that applying AI to Registration would require a natural language processing (NLP) model which is not yet developed for and to the performance level required for health data. Pathology & radiotherapy are the main areas where AI may be applied with each needing high performing NLP models. DM informed the Board that the upcoming CancerWatch JA project does have an AI element.

9. Annual ARC Report.

- EF presented the Annual Report to the Board, outlining the context that this is in line with a recommendation of the Code of Practice for the Governance of State Bodies. The Annual ARC Report gives comfort to the wider Board that the Statement of Internal Controls (SIC) are where they are supposed to be.
- 9.1. EF went through the detail of the Annual Report from the ARC and the Board noted same.
 - 9.2. ROC welcomed the report and thanked the ARC members for their work on behalf of the Board.

10. ARC Report to the Board – Draft Minutes.

10.1. EF presented the draft minutes of the ARC meeting of the 1st April by way of providing a written report to Board. EF highlighted the following:

10.1.1. **Financial Statements 2024:** The 2024 Financial Statements were reviewed by the ARC and following careful consideration, the ARC formally recommends that the 2024 Financial Statements be approved by the Board.

10.1.2. **Letter of Representation:** A draft letter of representation to be issued to the C&AG (the “**Letter of Representation**”) in respect of their audit of the financial statements for the year ended 31 December 2024 (the “**2024 Financial Statements**”) was reviewed by the ARC; the ARC formally recommends that the Letter of Representation be approved by the Board and signed by the Director and Chairperson.

10.1.3. **Financials:** Management accounts as at 31 Jan 2025 and 28 Feb were reviewed by the ARC.

10.1.4. **Conflict of Interest:** It is recommended that additional examples are included when this policy is next up for review.

10.1.5 EF encourage board members to read the conflict of interest policy.

11. Letter of Representation.

11.1. **IT WAS NOTED THAT** a copy of the draft Letter of Representation had been circulated to the Board for review prior to the meeting.

11.2. Having considered the Letter of Representation and having regard to the ARC’s recommendations in relation thereto, **IT WAS RESOLVED THAT:**

11.2.1. the Letter of Representation be approved in substantially the form circulated to the Board; and

11.2.2. once finalised, the Chairperson and Director be empowered, directed, authorised and appointed to execute the Letter of Representation on behalf of the NCRI.

12. Financial Statements for the Y/E 31 December 2024 & Annual Report.

12.1. **IT WAS NOTED THAT** a copy of the draft 2024 Financial Statements had been circulated to the Board for review prior to the meeting.

12.2. COM informed the Board that she had received written confirmation from the Office of the Comptroller and Auditor General (OCAG) that the Financial Statements for NCRI 2024 have been cleared by the office, subject to non-material updates agreed with the OCAG, including updating the “Review of Effectiveness Note” to read “I confirm that the Board conducted an annual review of the effectiveness of the internal controls for 2024. This was considered by the Board on 15 April 2025.”

12.3. **IT WAS NOTED THAT** a copy of the draft 2024 Annual Report had been circulated to the Board prior to the meeting.

12.4. Following a discussion in relation to the Annual Report and the 2024 Financial Statements and having regard to the ARC's recommendations in relation thereto, **IT WAS RESOLVED THAT:**

- 12.4.1. Subject to the inclusion of the updates agreed with the OCAG, the 2024 Financial Statements be approved; and
- 12.4.2. the Chairperson and chairperson of the ARC be empowered, directed, authorised and appointed to execute the Annual Report and 2024 Financial Statements on behalf of the NCRI and to execute such other documents and take such other steps on behalf of the Board as may be deemed necessary or desirable in connection with or arising out of the foregoing resolutions and the transactions thereby contemplated.

13. Letter of Allocation.

13.1. **IT WAS NOTED THAT** a copy of the Letter of Allocation 2025 had been circulated to the Board for review prior to the meeting & that the allocation of €5.4 million was as per the Budget approved by the Board at the January Meeting.

13.2. COM informed the Board that the Business /Service Plan has been submitted to the Department based on the allocation and Year 2 Strategic Plan Implementation at (5) above.

14. Code of Business Conduct.

14.1. **IT WAS NOTED THAT** a copy of the Code of Business Conduct had been circulated to the Board prior to the meeting.

15. IT WAS AGREED THAT the Code of Business Conduct be reviewed and incorporated as an appendix to the Governance Framework.

16. Board Evaluation: External & Internal.

16.1. CMcG presented the main results of the Internal Evaluation, being the need to have a more concise Board pack. At a recent IPA Governance Forum meeting, attendees discussed the use of this forum for Board training and the overall feedback was very positive.

16.2. CMcG clarified that there is a process in place to agree the meeting agendas with the Chairperson in advance of the preparation of the pack.

16.3. CMcG contextualised the carrying out of an External Evaluation as being a requirement of the state bodies. To this end, the procurement exercise has been completed with O'Brien Governance (OBG) being the selected vendor.

16.4. CMcG outlined next steps as:

- 16.4.1. Engagement, consisting of a survey, interview & workshop. ROC emphasised the importance of Board members maintaining that engagement
- 16.4.2. There will be a short briefing at the outset, to include the 2 external ARC members.
- 16.4.3. OBG will include the DPER checklist for the purpose of ARC element of the evaluation.
- 16.4.4. Draft report expected by Q3 .
- 16.4.5. New Board member may be included in evaluation on the advice of OBG.

ACTION: CMcG will set up the initial briefing meeting.

17. Chairperson's Comprehensive Report to the Minister.

17.1. The meeting was reminded that the Code of Practice requires the Chairperson to furnish a comprehensive report covering the NCRI to the Minister for Health in conjunction with the Annual Report and 2024 Financial Statements (the "**Chairperson's Report**").

17.2. **IT WAS NOTED THAT** a draft copy of the Chairperson's Report had been circulated to the Board for review prior to the meeting.

17.3. Following consideration of the Chairperson's Report, **IT WAS RESOLVED THAT:**

17.3.1. the Chairperson's Report be approved.

17.3.2. the Chairperson be empowered, directed, authorised and appointed to execute the Chairperson's Report; and

17.3.3. arrangements be made for the submission of the Chairperson's Report to the Minister for Health.

ACTION: NCRI to include a 1 pager briefing with the SP & Annual Report.

18. Form A: Statement of Compliance with the Code of Practice for the Governance of State Bodies.

18.1. The meeting was reminded that, in addition to the Chairperson's Report, the Code of Practice requires the Chairperson and Director to complete and sign a Form A: Statement of Compliance with the Code of Practice ("**Form A**").

18.2. Following discussion in relation thereto, **IT WAS RESOLVED THAT** the Chairperson and the Director be authorised to sign a Form A confirming the Board's compliance with the Code of Practice for submission to the Department of Health.

19. Minutes of Previous Meetings.

19.1. The draft minutes of previous Board meeting held on 28 January 2025 (the "**Previous Minutes**") were produced to the meeting and reviewed by the Board.

19.2. Following a discussion in relation to the foregoing, **IT WAS RESOLVED THAT:**

19.2.1. the Previous Minutes be approved in the form produced to the meeting; and

19.2.2. the Chairperson be authorised to sign the Previous Minutes in his capacity as Chairperson of the current meeting.

20. Matters Arising / Actions from Prior Meetings.

20.1. All actions were included as Agenda items and there were no additional matters arising.

21. AOB.

21.1.EF passed on her congratulations to Finance Dept for the great result in the IA for the second year in a row.

21.2.ROC enquired about the possibility of setting up a site only available to Board members as it would aid in document management.

ACTION: CMcG will discuss with the IT department.

22. Executive Session.

The Board met, without Management present, to discuss any matters deemed relevant.

23. Close.

There being no further business, the Chairperson declared the meeting closed.

Chairperson

Date: 15th of July 2025