

RQIA Corporate Performance Report

Quarter 1: April - June 2017



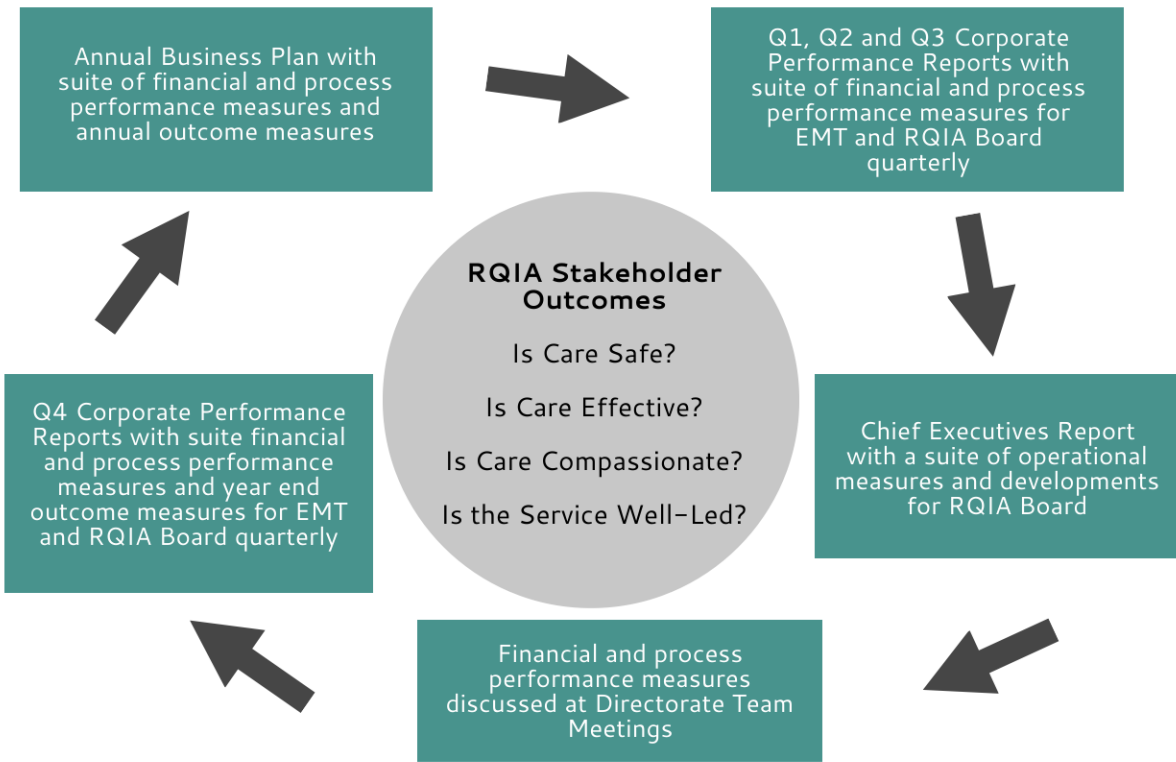
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INTRODUCTION

The purpose of the Corporate Performance Report is to provide evidence to the RQIA Board on how well RQIA is delivering the actions identified within the annual Business Plan, linked to its strategic themes and priorities as described in the Corporate Strategy 2017-21.

RQIA's Strategic Map as detailed in page 17 is a visual representation on one page creating an integrated and coherent picture of the organisation's forward strategy.



This cycle illustrates how we intend to manage and report the progress of the RQIA measures at Directorate, Executive Management Team (EMT) and Board level. The Q1 - Q3 Corporate Performance Reports will cover all the financial and process performance measures. In Q4 the Board will receive a comprehensive operational and strategic performance report which incorporates a suite of outcome measures which are incorporated in the RQIA Business Plan 2017-18. Additionally these measures will be progressed at monthly team meetings throughout the directorates and through the EMT.

TRAFFIC LIGHT SYSTEM

The Traffic Light Rating System is an indication of the level of confidence that Actions identified in the Business Plan will be delivered by the completion date.

R

Action has not been achieved by the completion date. A brief exception report should be produced detailing the remedial action required to ensure achievement of action by year end.

A

Action unlikely to be achieved by the completion date. A brief exception report should be produced detailing the remedial action required to ensure achievement of action by the completion date or by when the action will be achieved.

G

Action forecast to be completed by the completion date.

B

Action Completed

Exception Reporting

A brief report will be structured in terms of providing a reason for the exception, identifying actions to address the situation and highlighting any emerging organisational risk as a consequence of the exception. In addition, it should make clear if the action has been cancelled or if the timeline has been extended.

STRATEGIC THEME 1 - ENCOURAGE QUALITY IMPROVEMENT IN HEALTH AND SOCIAL CARE SERVICES

Number of inspections completed versus planned

Action 1.1 – Complete the planned programme of activity for 2017/18 in respect of registration, inspection, reviews and audits



BRAG Rating



98% of planned Q1 inspection activity achieved in Quarter 1



In response to fire safety compliance in regulated services – we prepared guidance for providers to improve fire safety for all in receipt of HSC services.



RQIA supported regional surgical services for children to prioritise leadership, staffing and care delivery.



In MHLD facilities, RQIA found good practice; including quality improvement projects, use of co-production and compliance with PPI standards. However, gaps in governance arrangements, staffing and care delivery were noted during inspection.

STRATEGIC THEME 1 - ENCOURAGE QUALITY IMPROVEMENT IN HEALTH AND SOCIAL CARE SERVICES

Action 1.1 – Complete the planned programme of activity for 2017/18 in respect of registration, inspection, reviews and audits

Guidelines and Audit

Fieldwork for the DoH commissioned regional audit of implementation of the Policy for the Identification and Labelling of Invasive Lines and Tubes took place during Q1.

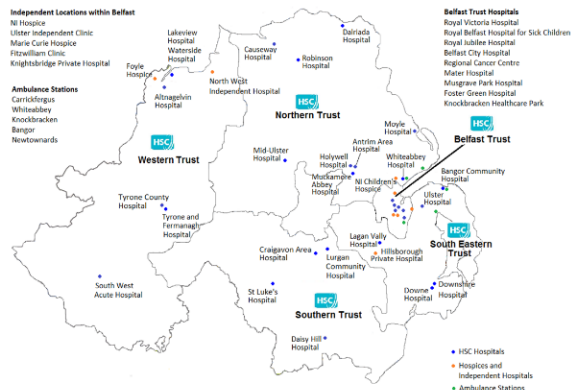
As part of the fieldwork, the RQIA audit team visited 332 wards and ambulance stations across Northern Ireland. Within the large acute hospitals a total of 166 wards were visited across the full range of specialties. Findings and report to be published during Q2.

Work on one planned guideline also commenced in quarter 1.

Review

During Quarter 1, RQIA published the Review of Northern Ireland's Plastic Surgery Service. The review made 10 recommendations to support improvement, which must be underpinned by clear policy direction and strong clinical leadership to take the service forward in the future.

The RQIA review made 10 recommendations focusing on five broad areas for improvement:



BRAG Rating



Measures on target

STRATEGIC THEME 1 - ENCOURAGE QUALITY IMPROVEMENT IN HEALTH AND SOCIAL CARE SERVICES

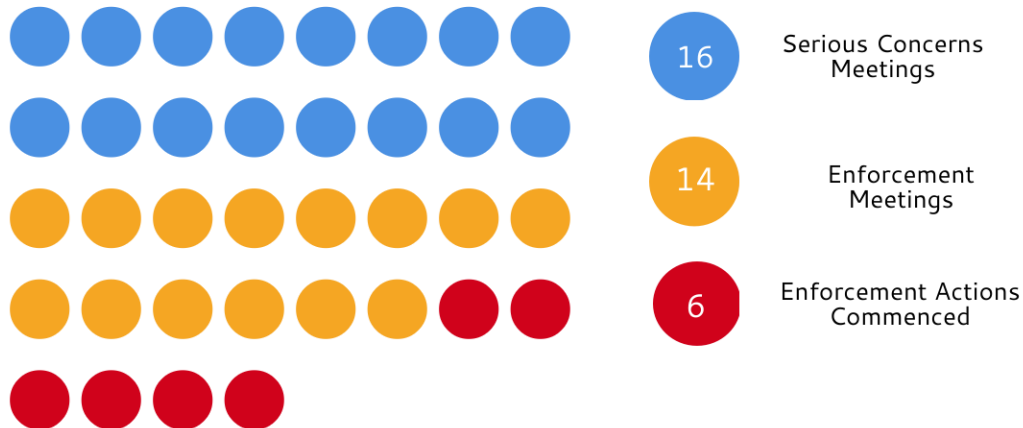
Action 1.1 – Complete the planned programme of activity for 2017/18 in respect of registration, inspection, reviews and audits

BRAG Rating



Enforcement action ongoing

Enforcement Activity



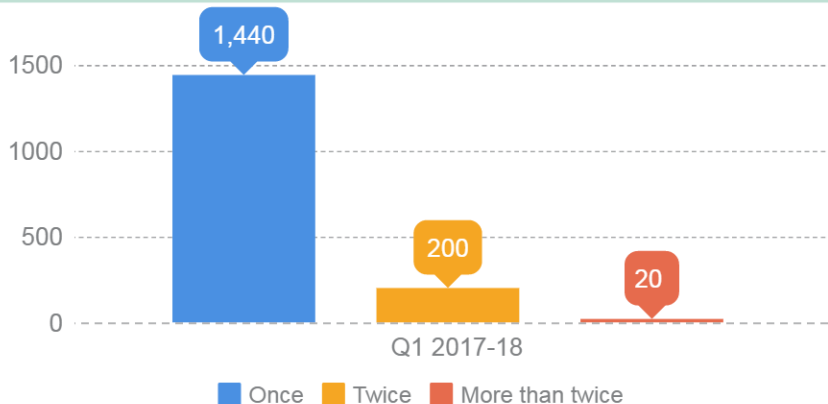
RQIA held serious concerns meetings with 16 providers where we considered a service at risk of formal / escalated enforcement action. In each case, RQIA sought assurances on planned actions to address the identified areas of concern, and no enforcement resulted.

Formal enforcement action was taken on six occasions. Issues included breaches in relation to: management and staffing issues; fire safety; resident's finance.

STRATEGIC THEME 1 - ENCOURAGE QUALITY IMPROVEMENT IN HEALTH AND SOCIAL CARE SERVICES

Action 1.1 – Complete the planned programme of activity for 2017/18 in respect of registration, inspection, reviews and audits

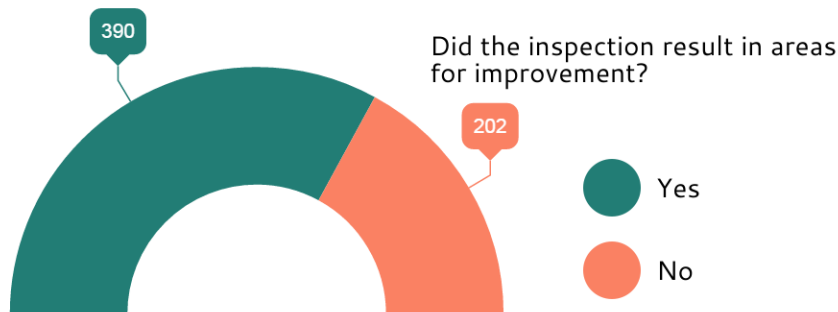
Number and percentage of areas for improvement stated once and restated on further occasions



BRAG Rating



Measure on target



STRATEGIC THEME 1 - ENCOURAGE QUALITY IMPROVEMENT IN HEALTH AND SOCIAL CARE SERVICES

Action 1.1 — Complete the planned programme of activity for 2017/18 in respect of registration, inspection, reviews and audits

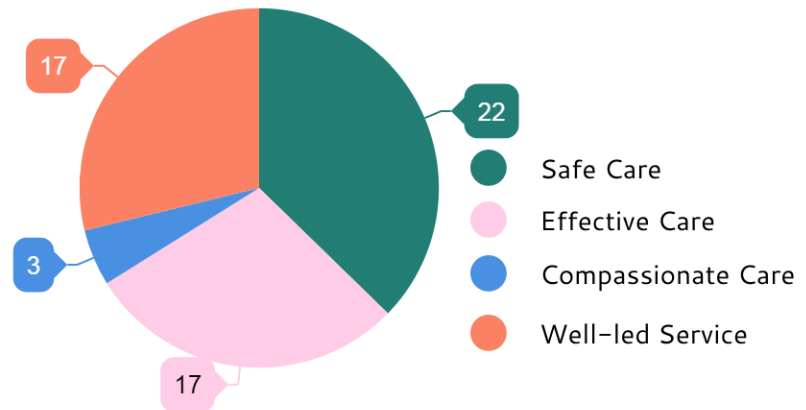
BRAG Rating



Measure on target

Number of areas for improvement identified within each of the domains of safe, effective, compassionate care and well led service

59 areas for improvement were raised by the MHLD team, with 37% against the 'Safe Care' domain



Under the 'Safe Care' Domain, inspectors identified a range of areas which required improvement including:

- Evidence of Policies and Procedures that are either not in place, out dated, or being incorrectly implemented by staff
- Risk assessments that are out of date and need to be reviewed
- Staff training that is out of date including life support, patient handling and infection control.

STRATEGIC THEME 1 – ENCOURAGE QUALITY IMPROVEMENT IN HEALTH AND SOCIAL CARE SERVICES

Action 1.2 – Review and evaluate the evidence for an inspection assessment framework in facilitating improvement

BRAG Rating



Measure on target

Submission of a proposal to the RQIA Board based on the findings of the review and agreement of a way forward for the inspection methodology

The Project Board met on 22 May 2017 and considered the results of the Scoping Exercise being undertaken by Queens University Belfast (QUB).

Results indicated that the effectiveness of specific rating scales for improving quality of care cannot be reliably assessed on the basis of existing evidence because their impact has not been systematically investigated. The scoping review also highlighted much variation in the characteristics of inspection systems, and a lack of clarity around the terminology used to describe the components of inspection frameworks.

The Project Board agreed that QUB should move ahead with a 'mapping exercise' to chart, categorise, and define the range of components used in inspection systems. This is now underway.

Following completion of the mapping exercise, a systematic review will appraise the effectiveness of inspection systems (and their various components) for improving quality of care outcomes in health and social care. This will provide best available evidence to support the design or improvement of healthcare inspection systems. QUB colleagues hope to be in a position to report back to Project Board at its meeting in September 2017.

STRATEGIC THEME 1 – ENCOURAGE QUALITY IMPROVEMENT IN HEALTH AND SOCIAL CARE SERVICES

Action 1.3 – Develop proposals for the Review Programme post 2018

Develop proposals for the Review Programme post-2018

Development of a shadow programme of reviews, audits and guidelines for the time period from September 2018–September 2019 has commenced. The following themes are being considered for inclusion:

- End of Life / Do Not Attempt Resuscitation (Adult and Children’s Services) (DoH Commissioned)
- Deteriorating Patients (across services/settings) (DoH Commissioned)

It is expected that these themes will cut across various healthcare settings such as acute, regulated and mental health and learning disability services, and thus are likely to necessitate a combination of methodologies (to include inspection, audit and review).

BRAG Rating



Measure on target

STRATEGIC THEME 1 – ENCOURAGE QUALITY IMPROVEMENT IN HEALTH AND SOCIAL CARE SERVICES

Action 1.4 –
Develop a
template report to
enable the
publication of an
annual summary
of the quality of
services
inspected,
reviewed and
audited by RQIA
(the first report
will be produced
in relation to
2017-18)

Approval of a report template and methodology by the RQIA Board and the Department of Health

A meeting was held during Q1 between Chief Executive, Medical Director and communications team, to commence the design of a report template.

The approach and format employed by other regulators was sourced and reviewed.

The template and approach used for the 2017-18 Q1 Corporate Performance Report to underpin the annual quality summary.

The first annual quality summary to be produced in relation to 2017-18 (report expected Q1 2018-19).

BRAG Rating



Measure on target

STRATEGIC THEME 1 - ENCOURAGE QUALITY IMPROVEMENT IN HEALTH AND SOCIAL CARE SERVICES

Action 1.5 –
Provide
advice and
guidance to
service
providers on
quality
improvement
systems

Number of service providers who state that their quality improvement systems have been strengthened as a result of our interventions

Discussions held at Executive Management Team meetings during Q1, with outline methodology agreed.

Methodology likely to include:

- Follow-up with service providers 6 to 8 weeks following inspection
- Effect of RQIA interventions likely to be captured through a common impact question
- Specification of a common impact question to be worked up in Q2
- Common impact question likely to issue to service providers via iConnect

BRAG Rating



Measure on target

STRATEGIC THEME 1 - ENCOURAGE QUALITY IMPROVEMENT IN HEALTH AND SOCIAL CARE SERVICES

Action 1.6—
Participate as
an active
partner in the
design and
development
of an
Improvement
Institute /
System for
Northern
Ireland

Summary of RQIA's participation in the Improvement Institute for Northern Ireland and the deliverables from the work of the Institute

RQIA's Chief Executive participated in meetings of the Critical Friends Group, providing transitional governance to the work of the Improvement Institute/System.

RQIA's Medical Director participated in four meetings of the Design Collaborative progressing work of the Improvement Institute/System.

On 16 June 2017, RQIA representatives also participated and led discussions during a full day design workshop/event. This work continues to build the foundations for the quality improvement and innovation approach for health and social care in Northern Ireland.



A series of learning conversations with improvement experts in UK and Ireland, hosted by RQIA's Medical Director, are also planned. The key themes emerging from these conversations will inform work of the Improvement Institute/System and improvement work within RQIA.

BRAG Rating

G

Measure on target

STRATEGIC THEME 1 - ENCOURAGE QUALITY IMPROVEMENT IN HEALTH AND SOCIAL CARE SERVICES

Proposal to RQIA Board Produced

This proposal is to be addressed at an RQIA Board meeting during Q2 of 2017-18.



RQIA Acute Hospital Inspection Programme – Phase 1 Summary Report



BRAG Rating

G

Measure on target

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

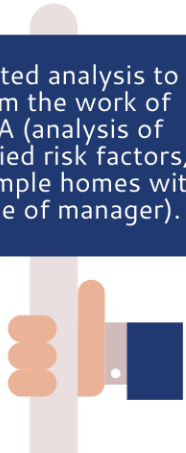
STRATEGIC THEME 2 - USE SOURCES OF INFORMATION EFFECTIVELY

Number of actions fully implemented in the Information Action Plan by target date


Arising from our review of Intelligence and information systems that there was clear potential to increase the use of clearly defined and targeted analysis to inform the work of the RQIA.

In response we have developed an Information Action Plan incorporating 30 actions.


In advance of final approval three actions have been successfully implemented:



Targeted analysis to inform the work of RQIA (analysis of identified risk factors, for example homes with change of manager).



Project group re-instated to increase use of web portal.



A web portal task sheet has been developed with actions to increase web portal usage pending approval.

BRAG Rating

G

3 actions implemented in advance of the date for final approval

27 actions on target for completion

STRATEGIC THEME 2 - USE SOURCES OF INFORMATION EFFECTIVELY

Action 2.2—
Foster strategic
alliances with
other system
regulators and
improvement
bodies both
regionally and
nationally

Number of information sharing agreements and Memorandums of Understanding (MoUs) in place

MoU activity includes:

- Northern Ireland Public Services Ombudsman was signed off
- A review and revision of General Dental Council was initiated

Number of collaborations with system regulators and improvement bodies undertaken

In Quarter 1 RQIA was involved in the following events:

- * Quality Improvement Celebration event Belfast Trust;
- * Regional SAI learning event;
- * Regional review of children's secure facilities;
- * Southern Trust Adult Safeguarding adults workshop;
- * Royal College of Psychiatrists and NI Medical & Dental Training Agency;
- * HMIP and University of Bristol regarding the systems for recording ill treatment in Detention;
- * Hospital caterer's association conference presentation
- * Inspection assessment framework with QUB
- * DoH co-ordinated Daisy Hill summit
- * Elective Care Centres data and analysis task & finish group

BRAG Rating

G

Planned MoU and
collaboration activity
on target



STRATEGIC THEME 2 - USE SOURCES OF INFORMATION EFFECTIVELY

Action 2.3—
Review and
revise RQIA's
Inspection
Planning Tool
(IPT) in the
context of
changes in Fees
and Frequency
of Inspection
Regulations

% of Inspection Planning Tool (IPT) project milestones achieved

- ✓ Fees and Frequency project has commenced.
- ✓ Project Initiation Documentation (PID) prepared and project team established.
- ✓ Meetings commenced and currently in line with milestones.

BRAG Rating

G

Fees and Frequency
project has
commenced with all
milestones and
objectives on target

STRATEGIC THEME 2 - USE SOURCES OF INFORMATION EFFECTIVELY

Action 2.4—
Strengthen
arrangements to
capture the
voice of service
users and their
families/carers,
to include
stakeholder
reference group,
lay assessors
and through
engagement
during
inspections

BRAG Rating



Workstream initiated
to evaluate the
effectiveness of
engagement activities

Evaluation of the effectiveness of engagement activities to capture the voice of service users

A work stream has been initiated and have and continue to meet regularly.

The aim of the work stream was to ensure that the voice of the service user is heard, reported and acted upon.

A key objective was to streamline and standardise this process across the organisation.

A paper has been developed and awaits approval from the Executive Management Team.

STRATEGIC THEME 2 - USE SOURCES OF INFORMATION EFFECTIVELY

% of milestones achieved on target from the Integrated MHLD Information System project plan

DoH provided detailed comments on the new MHLD Information System Outline Business Case (OBC), in May 2017.

A revised OBC and a response to DoH comments were prepared and submitted to DoH in June 2017.

DoH did not accept the capitalisation of recurring support and maintenance costs, these costs will have to be absorbed from within RQIA's revenue budget.

Further comments on the OBC were received from DoH in June 2017.

Action 2.5—
Commence implementation of a project to develop and implement an integrated MHLD information system to replace the existing legacy systems following approval of the Outline Business Case from DoH

BRAG Rating

G

Business Case progressed during Q1, and on target with plan.

STRATEGIC THEME 3 - ENGAGE AND INVOLVE SERVICE USERS AND STAKEHOLDERS

Communications and Engagement

During Q1 of 2017-18, the RQIA website received around 22,000 individual visits, a 10% increase from the same period of 2016-17.

The number of clicks required to find the relevant information on the website reflects the impact of the improved design and streamlining of the new RQIA website, and an improved user experience.

The @RQIANews Twitter account continued to attract new followers.



Action 3.1—
Develop and
implement a
Communications
and Engagement
Strategy taking
account of HSC
PPI Standards
to increase the
public's
awareness of
the role and
function of
RQIA

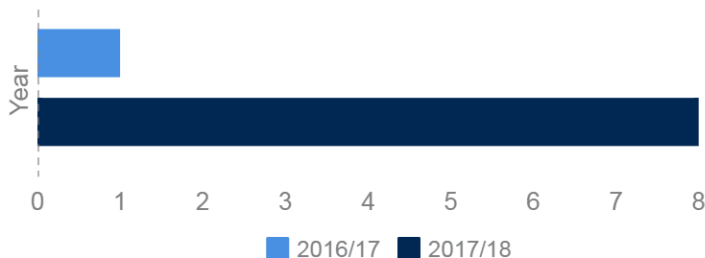
BRAG Rating



Increasing web traffic
and social media
engagement during
Q1.

STRATEGIC THEME 3 - ENGAGE AND INVOLVE SERVICE USERS AND STAKEHOLDERS

Number of inspections completed with Lay Assessor Involvement



In Quarter 1 of 2016/17 – one inspection was conducted within the Healthcare Inspection Team which involved a team of lay assessors

In Quarter 1 of 2017/18 – Five within the Residential care homes team, one within the Nursing homes team, one in the MHLD team and one within the Healthcare Inspection Team.

The target for 2017/18 is 58 inspections and within Quarter 1 eight of these inspections have been carried out.

Number of opportunities for stakeholders to be engaged in the design of our work

Due to delivery of work undertaken by Innovation Lab on delivering together, collaboration with RQIA was deferred to later in the year. Other opportunities to collaborate will be considered by the Executive Management Team.

Action 3.2— Increase the number of stakeholders and lay assessors actively designing / participating in our programmes of work

BRAG Rating

G

Lay assessor involvement increased considerably from Quarter 1 of 2016–17.

Both measures on target

STRATEGIC THEME 3 - ENGAGE AND INVOLVE SERVICE USERS AND STAKEHOLDERS

Action 3.3—
Partner with the
Innovation Lab
(Department of
Finance) to
explore
opportunities to
work with our
stakeholders to
collaboratively
redesign our
activities

Number of prototypes designed and commenced

Planned meeting deferred. Meeting planned for August 2017 with anticipated workshop in October 2017.

Number of RQIA processes refreshed through collaboration with our stakeholders and facilitated by the Innovation Lab

Planned meeting deferred. Meeting planned for August with anticipated workshop in October 2017.

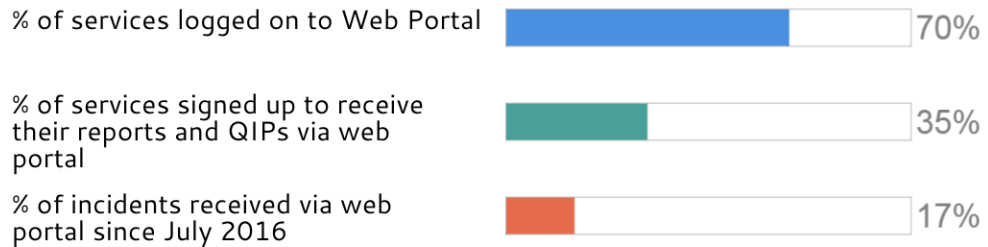
BRAG Rating

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Measures on target

STRATEGIC THEME 3 - ENGAGE AND INVOLVE SERVICE USERS AND STAKEHOLDERS

% increase in the use of the web portal by service providers



Evaluation of the impact of the increased use of E-questionnaires

A work stream has been initiated to consider the usefulness of e-questionnaires and have concluded that this would be a much more effective manner to collect information from service users, relatives and staff.

A University of Ulster student, through his I.T degree, successfully demonstrated that the use of an application on a smart phone or device is achievable. The work stream recommended that consideration should be given, by EMT, to the purchasing of smart phones or devices to undertake this work effectively.

A hard copy standardised questionnaire has been developed for approval by EMT.

Action 3.4—
Examine and explore opportunities to use technology to facilitate feedback from service providers, service users and their families / carers e.g. pilot the use of e-questionnaires

BRAG Rating

G

Web portal usage continues to increase in Quarter 1 and workstream commenced to evaluate the use of E-questionnaires

STRATEGIC THEME 4 - DELIVER OPERATIONAL EXCELLENCE

Action 4.1—
Implement
the
Workforce
Plan aligned
to the
Workforce
Review
carried out in
2016–17

% of actions in the Workforce Plan implemented on target

The workforce Review was completed in April 2017 with preliminary findings shared with EMT, and will be presented to the Board in July 2017.

A workshop with Executive and Senior Managers was convened to consider the report and findings were accepted.



BRAG Rating

G

Measure on target

STRATEGIC THEME 4 - DELIVER OPERATIONAL EXCELLENCE

Action 4.2—
Develop and
implement an
Organisational
Development
(OD) Plan
aligned to the
Investors in
People (IiP)
assessment

IiP staff survey results

The IiP site visit took place on 20, 21 and 22 June 2017

22 staff were interviewed

The IiP online staff survey was circulated and completed in May 2017. 75% of staff responded, when a 50% response rate was required.

Level of IiP accreditation achieved

Confirmation of the level of IiP accreditation achieved will be received in July 2017 containing recommendations and the results of the IiP the staff survey results.

% of actions in the Organisational Development Plan implemented on target

An Organisational Development Plan will be developed following receipt of the IiP report.

BRAG Rating



On target – the result
of the IiP assessment
is due in Quarter 2

STRATEGIC THEME 4 - DELIVER OPERATIONAL EXCELLENCE

Action 4.3—
Implement a
project to
prepare for
ISO
9001:2015
assessment
and achieve
accreditation

% of milestones achieved on target from the ISO9001:2015 Project Plan

The ISO9001:2015 Project Board continues to meet regularly to maintain pace in this project.

A two day gap analysis will commence on 3 July 2017. ISO 9001:2015 Internal Auditor Training is arranged for 3 August 2017.

Following training the ISO project team will begin internal audits across each directorate as per programme.

Achieved ISO9001:2015 accreditation

On target for achievement by year end.

BRAG Rating



On target to achieve
ISO9001:2015
accreditation by year
end

STRATEGIC THEME 4 - DELIVER OPERATIONAL EXCELLENCE

Action 4.4—
Achieve
financial
balance and
implement
zero based
budgeting

Savings Plan developed and approved by the RQIA Board and DoH

RQIA awaits confirmed of the indicative allocation for 2017-18.

RQIA has prepared a draft financial scenario plan to deliver a 2/5/10/15% reduction to our budget. These proposals have been prioritised on the basis of those that minimise the impact on service delivery and are practically capable of being delivered in 2017-18.

Projected and actual end-of-year financial position / Break-even

A zero-based approach to building a budget for 2017-18 has been adopted which aligns to RQIA's financial allocation and income.

It takes into account the need to achieve RQIA's savings target and absorb cost pressures in order to break-even at year-end.

BRAG Rating

G

Saving plan has been developed and a zero based approach to building the 2017/18 budgets has been adopted

RQIA Strategy Map 2017-21



Vision and Purpose

To be a driving force for improvement in the quality of health and social care in Northern Ireland

To provide assurance about the quality of care, challenge poor practice, promote improvement, safeguard the rights of service users and inform the public through the publication of our reports

Strategic Themes

Encourage Quality Improvement in health and social care services	Use sources of information effectively	Engage and involve service users and stakeholders	Deliver Operational Excellence
RQIA will use its powers under the 2003 Order to encourage quality improvement in health and social care services, support service providers and assure quality	RQIA will deliver independent scrutiny of health and social care services, targeted on the basis of assessed risk and prioritised need	RQIA is committed to a human rights based approach to our work to ensure that people remain at the heart of our activities and are involved in supporting us to improve the effectiveness of what we do	RQIA is committed to developing our staff and using our resources effectively and efficiently to sustain an organisational culture of learning and continuous improvement

Core Activities

Regulation	Reviews	MHLD
Registering and inspecting a wide range of independent and statutory health and social care services to maintain and promote quality improvement	Working to assure the quality of services provided by the HSC Board, HSC trusts and agencies through our programme of reviews, audit guideline development and healthcare inspections	Identifying any ill treatment, highlighting gaps in care and treatment ensuring no-one is detained inappropriately

Values

Independence	Inclusiveness	Integrity
Accountability	Professionalism	Effectiveness