RQIA
Corporate Performance Report

Quarter 4 - 2017-18

Table of Contents

Introduction

The Corporate Performance Report summarises our performance for the last financial year. In a change from previous Corporate Performance Reports this paper will focus on providing evidence on how well RQIA is delivering the actions identified within the annual Business Plan, linked to its strategic objectives and priorities as described in the Corporate Strategy 2017-21.

Traffic Light Rating System

RQIA has adopted a Traffic Light Rating System to demonstrate how well the business actions are performing or have been delivered. The Traffic Light rating operates as follows:

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.

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.

action forecast to be completed by the completion date

action delivered

Summary of Traffic Light Rating System (Period Ending March 2018)

Traffic Light	March 2018	Actions that require exception reports
🔴	15% (3)	**Action 1.1** Guidelines and Audit programme delivered on target with the exception of one audit which is deferred until June 2018.
🟠	0	Review programme delivered on target with the exception of one review which is due to be published in Quarter 1 2018-19.
🟢	0	**Action 1.4** A working Group commenced in Quarter 1 2018-19 to produce an Annual Summary of the Quality of Services inspected by RQIA and will be produced in Quarter 2.
🔵	85% (17)	**Action 4.4** Zero based budgeting is deferred until RQIA's restructure is completed in 2018-19.

Summary of Achievements

- 100% of planned inspections of regulated services were completed.
- 100% of planned Healthcare Inspections were completed.
- 100% of planned inspections of MHLD Wards were completed.
- 27 actions from the Information Action Plan that were due to be implemented by the year end were achieved.
- A pilot Risk Adjusted, Dynamic and Responsive RADaR inspection framework was developed, which will be tested and refined during 2018-19.
- The Mental Health and Learning Disability Information System Outline Business Case was approved by the Department of Health. A formal project was initiated in Quarter 4.
- RQIA's Communications and Engagement Strategy 2018-2021 was approved by RQIA's Board.
- Inspections involving lay assessor involvement increased in 2017-18 by 26%.
- 100% of service providers have signed up to exchange draft reports and Quality Improvement Plans (QIPs) electronically via RQIA's Web Portal.
- RQIA successfully achieved Investor in People (IiP) status using the new standard "Generation 6".
- RQIA achieved ISO9001:2015 certification.

The following table details the performance and delivery of the actions within the RQIA Business Plan 2017-18.

STRATEGIC THEME 1							
Encourage quality improvement in health and social care services							

Action	Measures	Delivery				Performance
		Q1	Q2	Q3	Q4	
Action 1.1 Complete the planned programme of activity for 2017/18 in respect of registration, inspection, reviews and audits	Number of inspections completed versus planned				X	100% of planned inspections of regulated services completed. 100% of planned Healthcare inspections completed. 100% of inspections completed in MHLD in-patient wards. 92% of Guidelines and Audit programme were delivered on target with the exception of one audit (How Current Practice of Prostate Specific Antigen (PSA) Testing Fits with Local and National Guidelines) which is deferred until June 2018.
	Planned Guidelines and Audit and Review activity successfully delivered					Review programme delivered on target with the exception of one review (Governance Arrangements for Child Protection in the HSC in Northern Ireland: Phase 1) which is due to be published in Quarter 1 2018-19.
	Number of Areas for improvement stated once and restated on further occasions					 The number of areas for improvement (Regulation and Nursing and MHLD) stated twice or more in 2017/18 decreased by 13% on last year to 758.
Brag Rating: 🔴 Guidelines & Audit and Review Activity behind target						

STRATEGIC THEME 1					
Encourage quality improvement in health and social care services					
Action	**Measures**	**Delivery**				**Performance**
		Q1	Q2	Q3	Q4	
Action 1.2 Review and evaluate the evidence for an inspection assessment framework in facilitating improvement **Brag Rating:** 🔵 Achieved	Submission of a proposal to the Project Board based on the findings of the review and agreement of a way forward for the inspection methodology		X			Evidence for an inspection assessment framework in facilitating improvement was reviewed and evaluated through a partnership work with Queen's University, Belfast. The project also reviewed the evidence for an inspection assessment framework in facilitating improvement. The project findings will inform the further development of RQIA's inspection methodology framework.
Action 1.3 Develop proposals for the Review Programme post-2018 **Brag Rating:** 🔵 Achieved	Develop proposals for the Review Programme post-2018		X			A proposal for the review programme was submitted to, and approved by, the RQIA Board in September 2017. This included development of a shadow programme of reviews for the time period from September 2018-September 2019.
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) **Brag Rating:** 🔴 Template not produced. Revised date for completion of report is Quarter 2 2018-19.	Approval of a report template and methodology by the RQIA Board and the Department				X	The template report was not completed in 2017/18. A working group commenced in Quarter 1 2018-19 to produce an Annual Summary of the Quality of Services inspected by RQIA. This report will be produced by the end of Quarter 2 2018-19.

STRATEGIC THEME 1

Encourage quality improvement in health and social care services

Action	Measures	Delivery				Performance
		Q1	Q2	Q3	Q4	
Action 1.5 Provide advice and guidance to service providers on quality improvement systems **Brag Rating:** 🔵 Achieved					X	Service providers are provided with comprehensive verbal and written feedback in relation to areas for quality improvement during and after inspections. RQIA has published a range of service provider advice documents which are published on RQIA's website. RQIA dedicates a duty inspector during business hours which is the point of contact to deal with all service provider enquiries. During 2017-18 the children's team and RQIA's statistician worked collaboratively with one trust to pilot the revision of the template for monthly reporting on the operation of their children's homes. All relevant staff from the trust participated in this exercise, which resulted in more timely, effective and efficient reporting by the trust. RQIA's information and intelligence system has been tailored to facilitate analysis of this information to produce improved qualitative and analytical data. The analysis of this information will be shared with providers to enhance their governance and oversight of practice in children's homes and consequently bring about improvements in care provision for children. RQIA will replicate this process with the remaining four trusts during the 2018-19 inspection year.
Action 1.6 Participate as an active partner in the design and development of an Improvement Institute / System for Northern Ireland **Brag Rating:** 🔵 Achieved					X	RQIA is a member of the Critical Friends Group which was established to critically challenge and provide senior guidance and governance oversight to the design process of improvement. RQIA's Medical Director participates in meetings of the Design Collaborative progressing work of the Improvement Institute/System.

STRATEGIC THEME 1
Encourage quality improvement in health and social care services

Action	Measures	Delivery				Performance
		Q1	Q2	Q3	Q4	
Action 1.7 Produce a proposal for the consideration by the RQIA Board regarding the independent evaluation of the Hospital Inspection programme **Brag Rating:** ● Achieved	Proposal to RQIA Board Produced		X			An independent external review of the Hospital Inspection Programme was completed in 2016 by an European Foundation of Quality management (EFQM) assessor in 2016. The review examined the process against 12 key themes and reported that the: • The approach taken by the inspection team was professional and thorough; • The use of a range of skilled health practitioners who peer reviewed colleagues in a structured, sample based approach, was sound and robust; • Team members could benefit from more in-depth preparation pre-inspection; • The approach to sampling evidence appeared sound and reasonable, with both random and judgemental sampling techniques used. • Note taking was methodical, with suggestions to move to an electronic approach making this more effective; and • Detailed and regular meetings were effective in enabling robust decisions to be made. It was agreed during the RQIA Board meeting on 6 July 2017 that a further external review was not required at this time.

STRATEGIC THEME 2

Use sources of information effectively

Action	Measures	Delivery Q1	Q2	Q3	Q4	Performance
Action 2.1 Develop and implement a prioritised Plan aligned to the Information Scoping Exercise completed in 2016/17 **Brag Rating:** ● Achieved	Number of actions fully implemented in the Information Action Plan by target				X	All 27 actions from Information Action Plan that were due to be implemented by the year end were achieved
Action 2.2 Foster strategic alliances with other system regulators and improvement bodies both regionally and nationally **Brag Rating:** ● Achieved	Number of information sharing agreements and Memorandums of Understanding (MoUs) in place				X	RQIA progressed a range of Memoranda of Understanding (MoUs) with a number of partners including the Northern Ireland Public Service Ombudsman, HSC Honest Broker Service and Nursing and Midwifery Council. RQIA has continued to work closely with other system regulators and system bodies and has collaborated in a number of joint events and workshops.
Action 2.3 Review and revise RQIA's Inspection Planning Tool (IPT) in the context of changes in Fees and Frequency of Inspection Regulations **Brag Rating:** ● Achieved					X	The pilot 'Risk Adjusted, Dynamic and Responsive (RADaR) inspection framework was developed in 2017-18. RADaR will be piloted and tested throughout 2018-19 with Nursing and Residential Care Service Providers with the aim of rolling out the new risk assessment framework in 2019-20.

STRATEGIC THEME 2

Use sources of information effectively

Action	Measures	Delivery				Performance
		Q1	Q2	Q3	Q4	
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:** ● Achieved	Evaluation of the effectiveness of engagement activities to capture the voice of service users				X	RQIA has engaged with the Voice of the Young People in Care (VOYPIC) to explore how both organisations could work collaboratively to promote the voice of young people in children's services in Northern Ireland. A workshop will be hosted by RQIA in 2018/19 to develop a three-year participation strategy to secure young people's involvement in all relevant aspects of our work. Posters for display in care homes (residential and nursing) were distributed to all providers to highlight RQIA's role in inspecting these services, and to encourage service users and visitors to tell RQIA about their experience in these homes.
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:** ● Achieved	% of milestones achieved on target from the Integrated MHLD Information System project plan				X	The MHLD Information System Outline Business Case was approved by the Department of Health in November 2017. A PRINCE2 project was initiated in Quarter 4 2017/18.

STRATEGIC THEME 3
Engage and involve service users and stakeholders

Action	Measures	Delivery				Performance
		Q1	Q2	Q3	Q4	
Action 3.1 Develop and implement a Communications and Engagement Strategy taking account of HSC PPI Standards to increase the publics' awareness of the role and function of RQIA **Brag Rating:** 🔵 Achieved					X	RQIA's Communications and Engagement Strategy 2018-2021 was approved by RQIA's Board in March 2018.
Action 3.2 Increase the number of stakeholders and lay assessors actively designing / participating in our programmes of work **Brag Rating:** 🔵 Achieved	Number of inspections completed with Lay Assessor involvement				X	Inspections involving lay assessor involvement in 2017-18 increased by 26% from the previous year.
Action 3.3 Partner with the Innovation Lab (Department of Finance) to explore opportunities to work with our stakeholders to collaboratively redesign our activities **Brag Rating:** 🔵 Achieved					X	The Innovation Lab partnered with RQIA to host a joint workshop with RQIA staff in October 2017. Further Collaborative work is planned in 2018/19.

STRATEGIC THEME 3

Engage and involve service users and stakeholders

Action	Measures	Delivery				Performance
		Q1	Q2	Q3	Q4	
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:** 🔵 Achieved	% increase in the use of the web portal by service providers				X	% of notifications received via web portal in Quarter 4 — 65% % of services signed up to receive their reports and QIPs via web portal — 100% % of services with portal log ins — 100% 100% of service providers have signed up to exchange draft reports and QIPs with 99.8% of service providers with portal log ins by the end of 2017/18.

STRATEGIC THEME 4

Deliver operational excellence

Action	Measures	Delivery				Performance
		Q1	Q2	Q3	Q4	
Action 4.1 Implement the Workforce Plan aligned to the Workforce Review carried out in 2016-17 **Brag Rating:** 🔵 Achieved	% of actions in the Workforce Plan implemented on target				X	RQIA has restructured the organisation into two Directorates: • Quality Improvement • Assurance A Business Unit has been established to provide the support services to the two Directorates.
Action 4.2 Develop and implement an Organisational Development (OD) Plan aligned to the Investors in People (IiP) assessment **Brag Rating:** 🔵 Achieved	Level of IiP accreditation achieved				X	RQIA successfully achieved IiP status using the new standard "Generation 6" during 2017/18. The HSC Leadership Centre has commenced the development of an RQIA Organisational Development Plan.
Action 4.3 Implement a project to prepare for ISO 9001:2015 assessment and achieve accreditation **Brag Rating:** 🔵 Achieved	% of milestones achieved on target from the ISO9001:2015 Project Plan Achieved ISO9001:2015 accreditation			X		All milestones from the ISO9001:2015 Project Plan were implemented on target. RQIA achieved ISO9001:2015 certification in December 2017.

STRATEGIC THEME 4

Deliver operational excellence

Action	Measures	Delivery				Performance
		Q1	Q2	Q3	Q4	
Action 4.4 Achieve financial balance and implement zero based budgeting **Brag Rating:** 🔴 Zero based budgeting deferred until restructure completed	Projected and actual end-of-year financial position / Break-even				X	At year end there was a underspend of £36,825, which fell outside the breakeven target of £20,000. During the year RQIA carried out a Workforce Review which necessitated holding a number of vacant posts unfilled in order to ensure flexibility in restructuring the organisation and achieving the benefits of the review. This coupled with non-pay slippage resulted in RQIA incurring an irregular in-year underspend. Zero based budgeting deferred until RQIA's restructure is completed in 2018-19.