The **Regulation** and **Quality Improvement Authority**

# ANNUAL REPORT AND ACCOUNTS

## 1 APRIL 2018 TO 31 MARCH 2019

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

The Regulation and Quality Improvement Authority, Copyright 2019

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# The Regulation and Quality Improvement Authority

# Annual Report and Accounts for the Year Ended 31 March 2019

Laid before the Northern Ireland Assembly under Article 3 (2) and Schedule 1, paragraph 12 (5) of The Health and Personal Social Services (Quality, Improvement and Regulation)(Northern Ireland) Order 2003 by the Department of Health on 25 July 2019.

The Regulation and Quality Improvement Authority (RQIA) was established under The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003.

**Our Vision**

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

**Our Purpose**

The Regulation and Quality Improvement Authority (RQIA) is the independent health and social care regulator in Northern Ireland. We 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.

**Our Values**

RQIA has four core values that underpin how we work. In all that we do we will be FAIR – fair and accountable and act with integrity and respect. We live these values in how we do behave with service users, providers, carer and the general public and in how we act with each other.

**RQIA Annual Report and Accounts for the Year Ended 31 March 2019**


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## FOREWORD

The Regulation and Quality Improvement Authority (RQIA), as Northern Ireland's independent regulator of health and social care services, has a clear vision for how we support and ensure care is safe, effective, compassionate and well-led. We believe that people in Northern Ireland should experience a better quality of services as a result of our inspections, audits and reviews.

We are committed to working closely with providers of health and social care services so that they can deliver improved care. We also are dedicated to hearing and acting on the experiences of patients, clients, families and carers. It is only by working in partnership with users and providers of care that we can encourage and influence improvement.

As a regulator, our role is challenging. In our work, we must balance supporting providers to deliver a quality service, which safeguards all those in receipt of these services, against taking decisions to pursue enforcement actions - which may ultimately lead to the closure of a service.

We ensure transparency in our work by publishing reports of our findings from around 2,500 inspections and reviews. Our reports highlight areas of good practice and issues that require improvement in the services we regulate, and across Northern Ireland's health and social care trusts. We are in the process of piloting a new evidence-based approach to inspections.

We value the involvement of the public in our work, and during the year we worked to increase lay involvement in our inspections and reviews, bringing a fresh perspective to these activities. We also established our Membership Scheme, which we will develop further in the coming year, in recognition of the importance of ensuring we listen to service users, carers and families about their experiences of care services.

Our Corporate Strategy 2017-2021 takes account of the Department of Health's direction and priorities for health and social care as detailed in Systems, Not Structures - Changing Health and Social Care, 2016 (The Bengoa Report) and Health and Wellbeing 2026: Delivering Together.

The recommendations from external inquiries including those into hyponatraemia related deaths, led by Sir John O'Hara, and the Commissioner for Older People's report on care at Dunmurry Manor continue to have a significant impact on health and social care across Northern Ireland. We will work to oversee the sustainable implementation of these recommendations to ensure improved services are delivered.

During the year, our programme of internal transformation and reform continued, with the establishment of our Assurance and Improvement directorates, supported by our Business Support team to ensure we are best placed to respond to the changing external environment.

In the year ahead we continue to focus on further developing our leadership, people, customer relations and processes, to make it easier to do business with and within RQIA.

Finally, I thank RQIA's Board for its effective governance oversight of RQIA, and on their behalf I commend our staff, led by Chief Executive Olive Macleod, for their ongoing commitment and dedication to meeting RQIA's objectives.

RQIA Annual Report and Accounts 2018-19 provides an overview of our work and achievements during this period. On behalf of RQIA's Board, I am pleased to present this report to you.

**Professor Mary McColgan OBE**
**Acting Chair**
**4 July 2019**

# SECTION 1

# PERFORMANCE REPORT

# OVERVIEW

## Statement from the Chief Executive

The Regulation and Quality Improvement Authority's Annual Report and Accounts provides an overview of our activities and performance from 1 April 2018 to 31 March 2019.

During this time, RQIA's key achievements include:

- A total of 2,572 inspections were completed during 2018-19, which represents over 100% of year's scheduled inspections completed.
- 78 inspections were completed with lay assessor involvement.
- Our risk-adjusted, dynamic and responsive (RADaR) framework to identify, quantify and respond to regulatory risks more robustly developed in partnership with Ulster University is currently being piloted by the Care Homes Team. Work is ongoing on the development of the dynamic intelligence led model.
- The RQIA Membership Scheme was launched in June 2018. The inaugural meeting was held in March 2019.
- An easy read report template has been developed and will be implemented across Domiciliary Care Agencies and Day Care Setting in April 2019.
- The information request database has been built on a Microsoft Access platform and was rolled out to the information team in late June 2018.
- The Mental Health module of iConnect was launched in January 2019.
- During 2018-19, 24 (19.67%) members of staff left RQIA (including voluntarily, VES and retirement).
- During 2018-19, there was an average of 7.78% staff absence. The absence target for 2018-19 is 7.11%.

**Olive Macleod**
**Chief Executive**

**4 July 2019**

## Purpose and Activities of the Regulation and Quality Improvement Authority

RQIA, as Northern Ireland's independent health and social care (HSC) regulator, aims to assure public confidence in health and social care through independent, proportionate and responsible regulation.

We monitor and inspect the availability and quality of health and social care services and encourage improvements in their quality through our programme of inspection, investigation and review.

We make an independent assessment of these services, to determine if the care being delivered is safe, effective and compassionate. We also consider whether these services are well led, and meet the required standards.

In our work with health and social care organisations throughout Northern Ireland, including the HSC Board, trusts and agencies, we encourage the delivery of high quality services through our ongoing and planned programme of governance, service and thematic reviews.

We have a range of responsibilities for people with mental ill health and those with a learning disability under mental health legislation.

We also inspect services providing radiological procedures including x-rays and radiotherapy under ionising radiation (medical exposure) regulations to protect service users from inappropriate or unnecessary exposure to ionising radiation.

RQIA is also a prescribed organisation under public interest disclosure legislation that provides protection to people wishing to whistleblow about concerns or wrongdoings in their own workplace. Every disclosure is taken seriously, and we work to ensure that any risks to service users are addressed by the relevant organisation.

We also inspect hospitals as part of an ongoing programme, which aim to drive improvements for all those using these services. These include: acute hospital inspections, which examine in detail the quality of care and leadership within specific wards or clinical areas; infection prevention/hygiene inspections at a range of health and social care facilities, primarily hospitals; and augmented care inspections where we examine clinical areas where patients are at a higher risk of developing an infection. We publish the findings from our inspections, highlighting areas of good practice and issues of concern.

RQIA is also responsible for the oversight of health and social care in places of detention. These include children's secure accommodation, mental health and learning disabled facilities, and prisons. In addition, as one of four organisations in Northern Ireland designated by the United Kingdom government as a national preventive mechanism (NPM), we work to protect the rights of all those in places of detention.

We are committed to listening to and responding to the views and opinions of the public. We listen to the views of those who use Northern Ireland's health and social care services and use this information in our assessments of the quality of these services.

## Key Sectoral Issues and Risks Affecting the Achievement of RQIA's Objectives

RQIA's Board is responsible for ensuring that it has effective systems in place for governance, essential for the achievements of its organisational objectives. Our corporate risk assurance framework provides the structure by which our board's responsibilities are delivered.

The corporate risk assurance framework identifies potential risks to the achievement of our organisational objectives and describes key controls through which these risks are managed and details the assurance on their effectiveness. This framework provides our Board with confidence that the systems, policies and people are operating effectively, are subject to appropriate scrutiny and demonstrates that it is informed about key organisational risks.

Throughout the year, our corporate risk assurance framework was regularly reviewed and scrutinised by our Board, audit committee and executive management team. At 31 March 2019 there were 12 identified areas of risk.

This framework also sets out the organisation's arrangements to mitigate each identified potential risk and is available at www.rqia.org.uk.

## Risks Which Could Affect the Going Concern Principle

RQIA's financial statements are prepared on the basis that its business will continue to operate in the foreseeable future without the need or intention on the part of management to significantly curtail its operational activities. Therefore, it is assumed that RQIA will continue to settle its obligations in the normal course of business.

The outlook for 2019-20 remains constrained, particularly in respect of resource funding. The Northern Ireland budget for 2019-20 provides the clarity needed to allow departments to plan for the incoming financial year.

The purpose of this statement was to provide clarity to departments as to the basis for its allocations in the absence of an Executive, so that permanent secretaries can plan and prepare to take more detailed decisions in that light. The departmental allocations set out by the Secretary of State provide the basis on which departments are now planning for 2019-20.

RQIA has completed a robust assessment of the principal risks facing the organisation, including those that would threaten the delivery of its statutory functions, through the continuous review and scrutiny of the corporate risk assurance framework. The corporate risk assurance framework provides an explanation of how these principal risks have been managed and mitigated.

Having considered the potential risks to the organisation, and the mitigating actions that it has in place, RQIA considers that there is limited risk to its ability to continue as a going concern during 2019-2020.

**Performance Overview**

This annual report comes at the end of the third year of RQIA's Corporate Strategy 2017-21, which identifies four strategic themes:

1. Encourage Quality Improvement in Health and Social Care
2. Use sources of information effectively
3. Engage and involve service users and stakeholders
4. Deliver Operational Excellence

During the year, we reported corporate performance against our Business Plan targets to the RQIA Board on a quarterly basis. See Appendix 1 for details.

# PERFORMANCE ANALYSIS

RQIA is an arm's length body of the Department of Health. We are operationally independent, but are accountable to the Department. As the scrutiny and improvement body for health and social care in Northern Ireland, we have a clear vision for how we support and ensure care is safe, effective, compassionate and well-led. We believe that people should experience a better quality of services as a result of our inspections, audits and reviews.

We are committed to working closely with providers of health and social care services so that they can deliver improved care. We also are dedicated to hearing and acting on the experiences of patients, clients, families and carers. It is only by working in partnership with both the public and providers that we can encourage and influence improvements in the delivery of health and social care services.

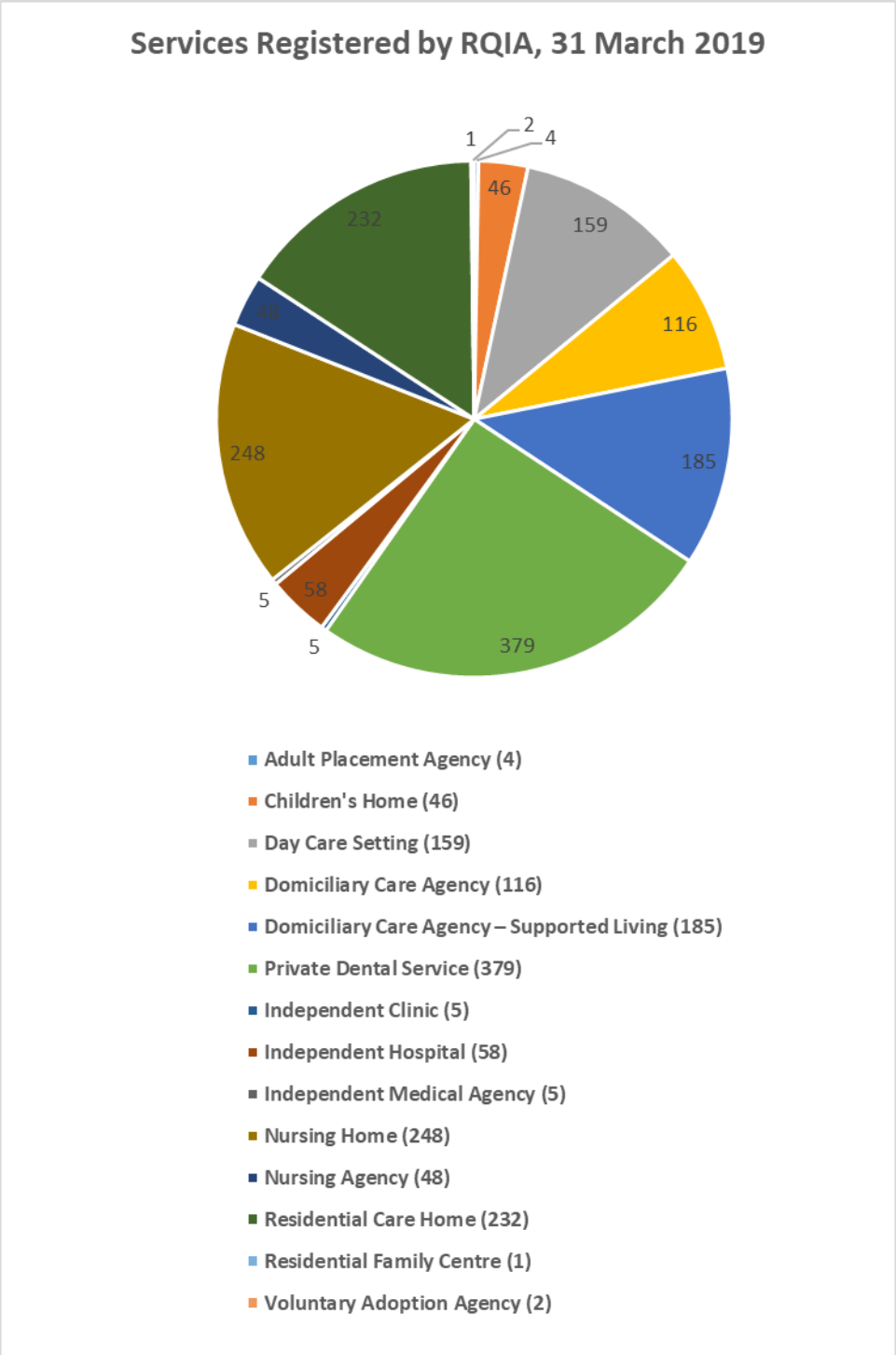
## INSPECTION

RQIA is responsible for the inspection of health and social care services under a range of powers. We register and inspect care homes; children's homes; domiciliary care and nursing agencies; residential family centres; adult day care services; private dental clinics; hospices; and independent hospitals and clinics. These are known as regulated services. At 31 March 2019, 1,488 services were registered with RQIA, an increase of 40 from the previous year.

### Number of Registered Services by HSC Trust at 31 March 2019

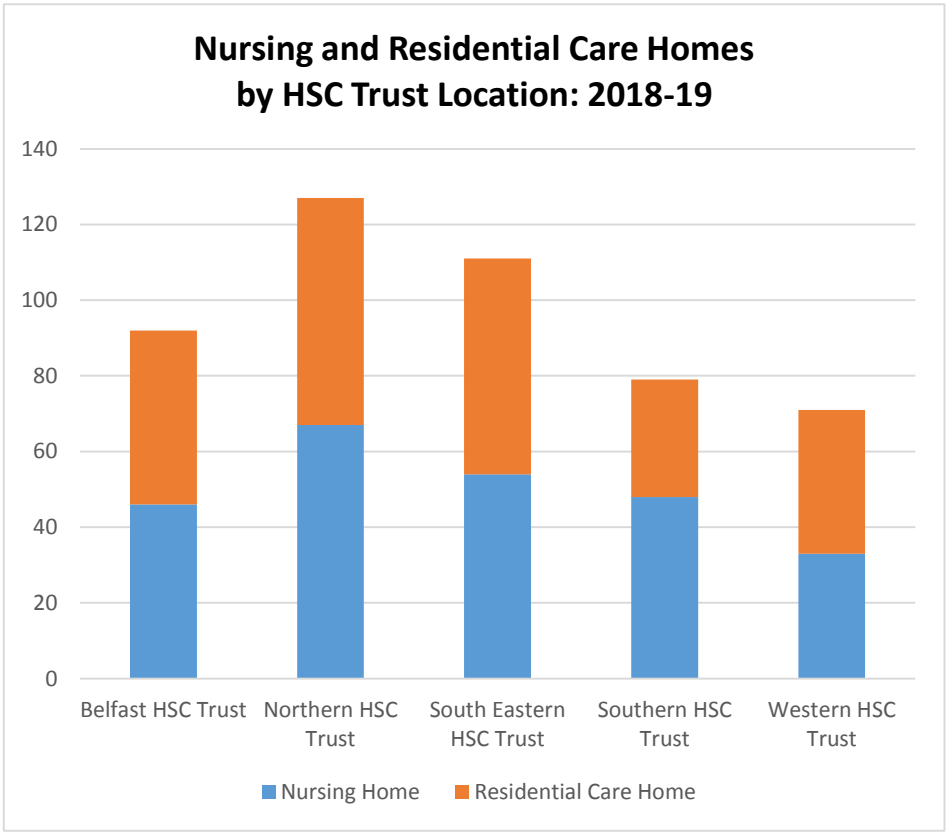
| Service Type | BHSCT | NHSCT | SEHSCT | SHSCT | WHSCT | Total |
|---|---|---|---|---|---|---|
| **Adult Placement Agencies** | | | | | | **4** |
| **Children's Homes** | 12 | 8 | 10 | 8 | 8 | **46** |
| **Day Care Settings** | 29 | 25 | 21 | 29 | 55 | **159** |
| **Domiciliary Care Agencies** | | | | | | **116** |
| **Domiciliary Care Agencies –Supported Living Services** | | | | | | **185** |
| **Dental** | 95 | 86 | 67 | 73 | 58 | **379** |
| **Independent Clinics** | 3 | | 1 | 1 | | **5** |
| **Independent Hospitals** | 24 | 9 | 9 | 8 | 8 | **58** |
| **Independent Medical Agencies** | | | | | | **5** |
| **Nursing Homes** | 46 | 67 | 54 | 48 | 33 | **248** |
| **Nursing Agencies** | | | | | | **48** |
| **Residential Care Homes** | 46 | 60 | 57 | 31 | 38 | **232** |
| **Residential Family Centres** | 1 | | | | | **1** |
| **Voluntary Adoption Agencies** | | | | | | **2** |
| **Total** | **256** | **255** | **219** | **198** | **200** | **1,488** |

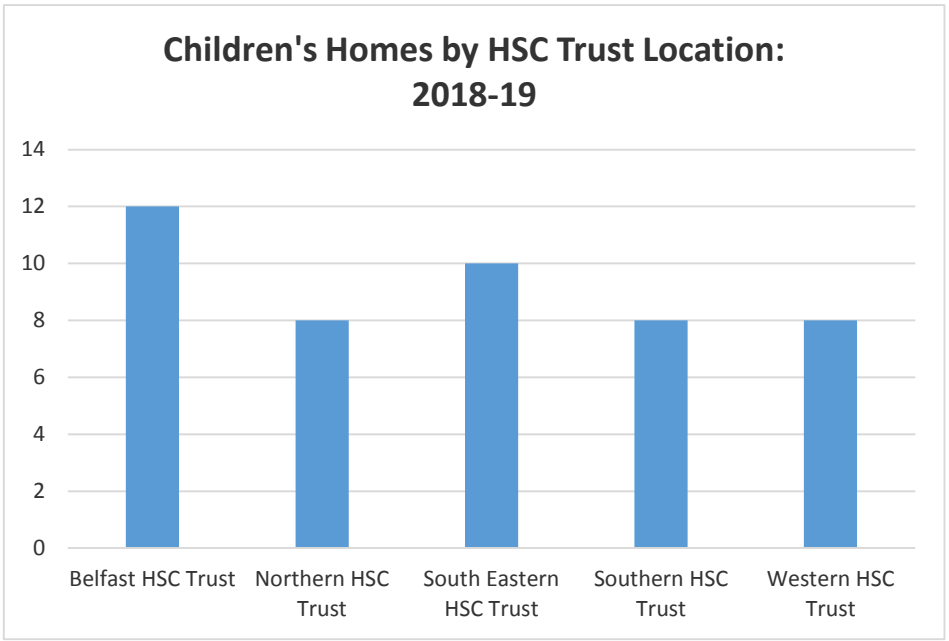
We also inspect 24 young adult supported housing services and 6 school boarding departments, however, these services are not required to register with RQIA.




Under a range of separate powers we also carry out inspections of hospitals; mental health and learning disability wards; and prisons, assessing arrangements to ensure the delivery of high quality care.

The following charts show the distribution of care homes for adults and children across Northern Ireland, by their (HSC trust) location

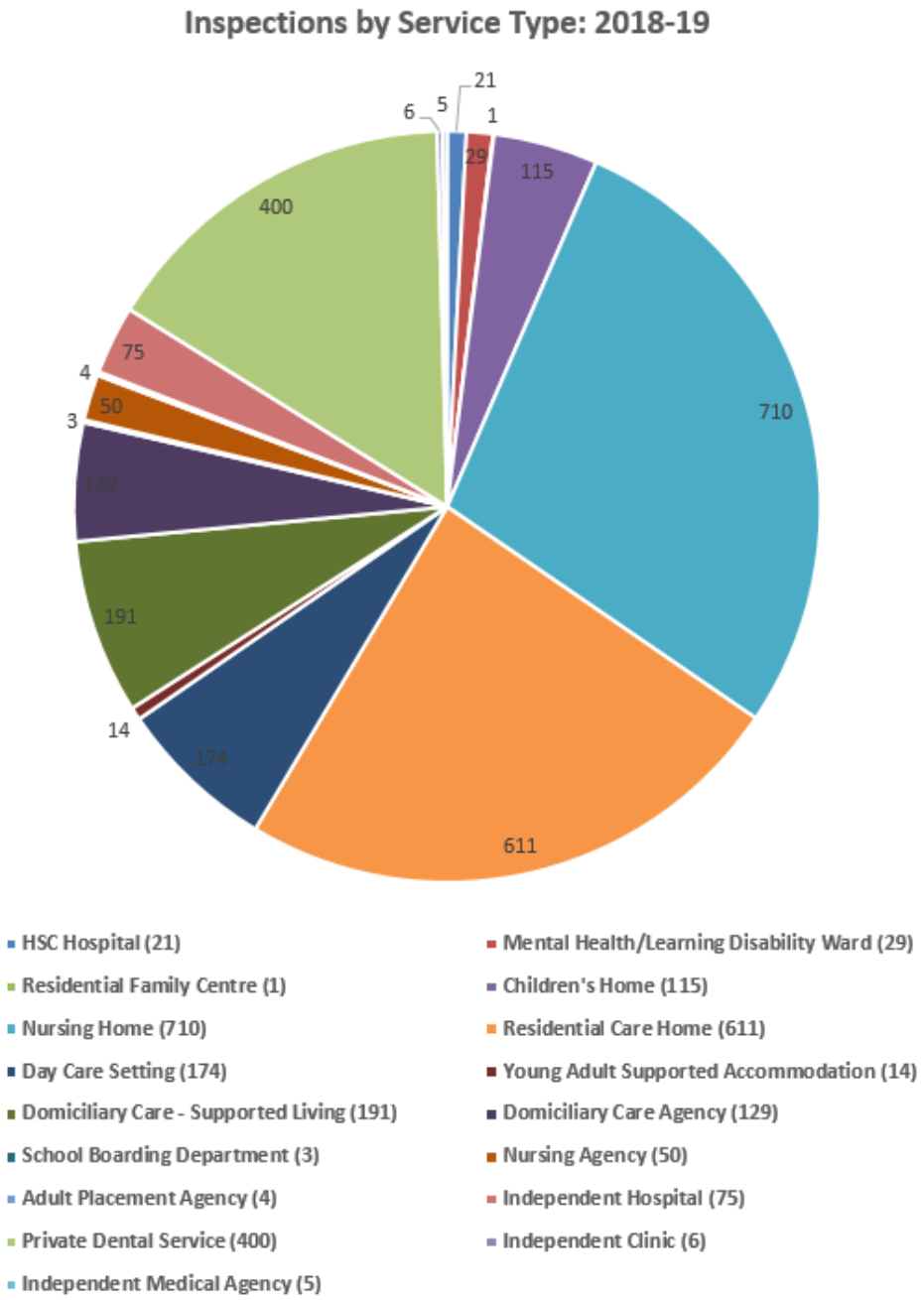


## How We Inspect

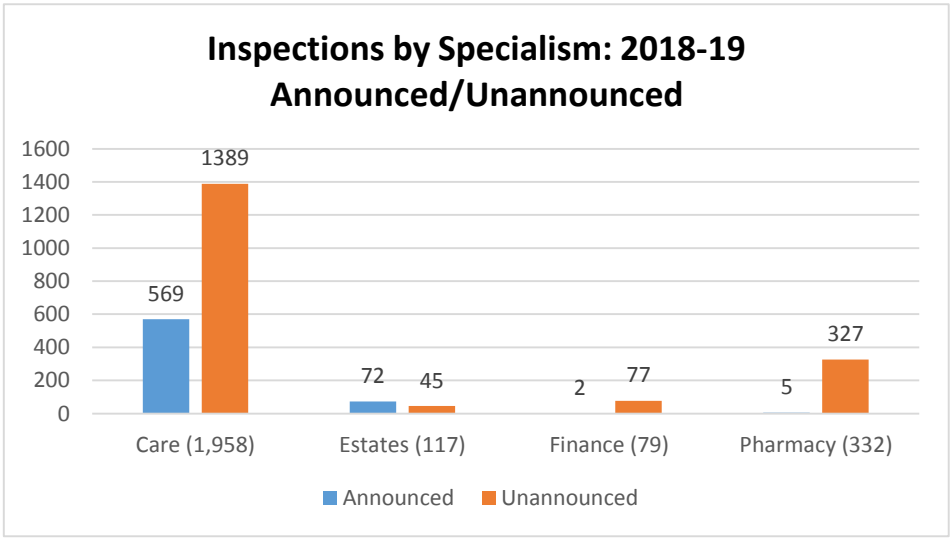
We have a team of experienced nurses, social workers, pharmacists, estates and finance officers, who examine care, medicines management, estates issues, and arrangements for safeguarding service users' finances.

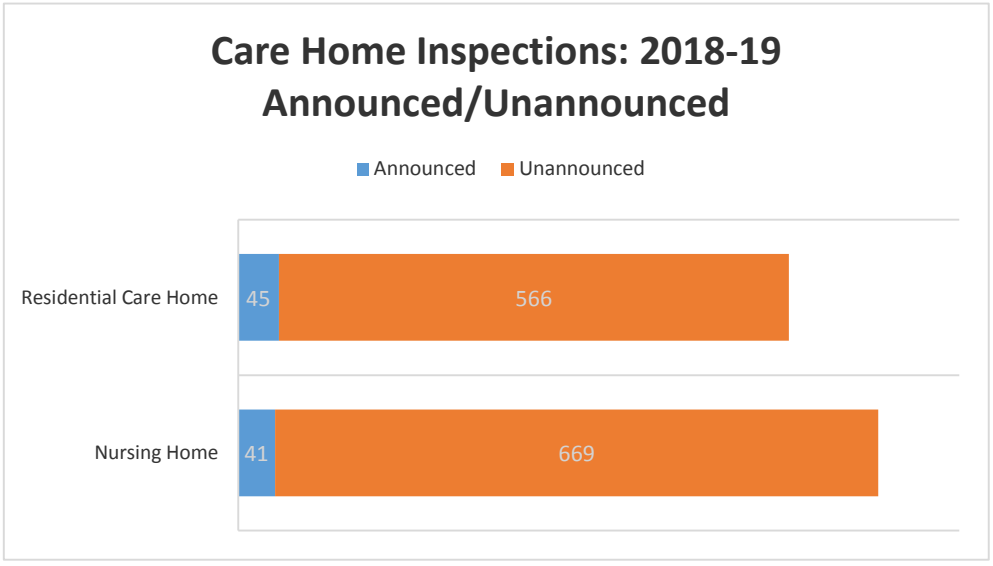
The majority of our care inspections are unannounced, taking place with no advance notice to the provider, with over 93% of all care home inspections unannounced.




In our inspections we examine compliance with regulations and care standards, and assess: is care safe, effective and compassionate. We also consider whether the service is well managed.

Given the importance of the manager's role, we will only register a new service where a permanent manager has been registered by RQIA.

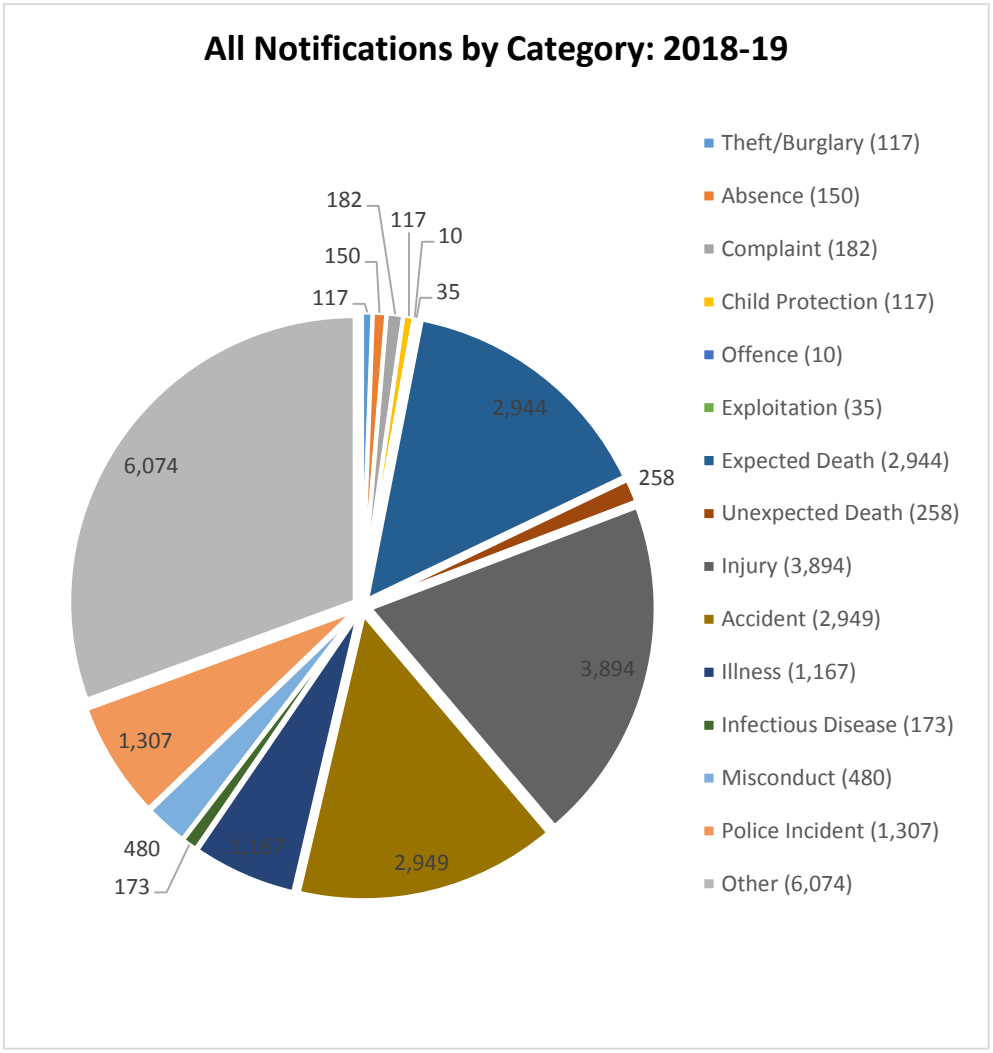


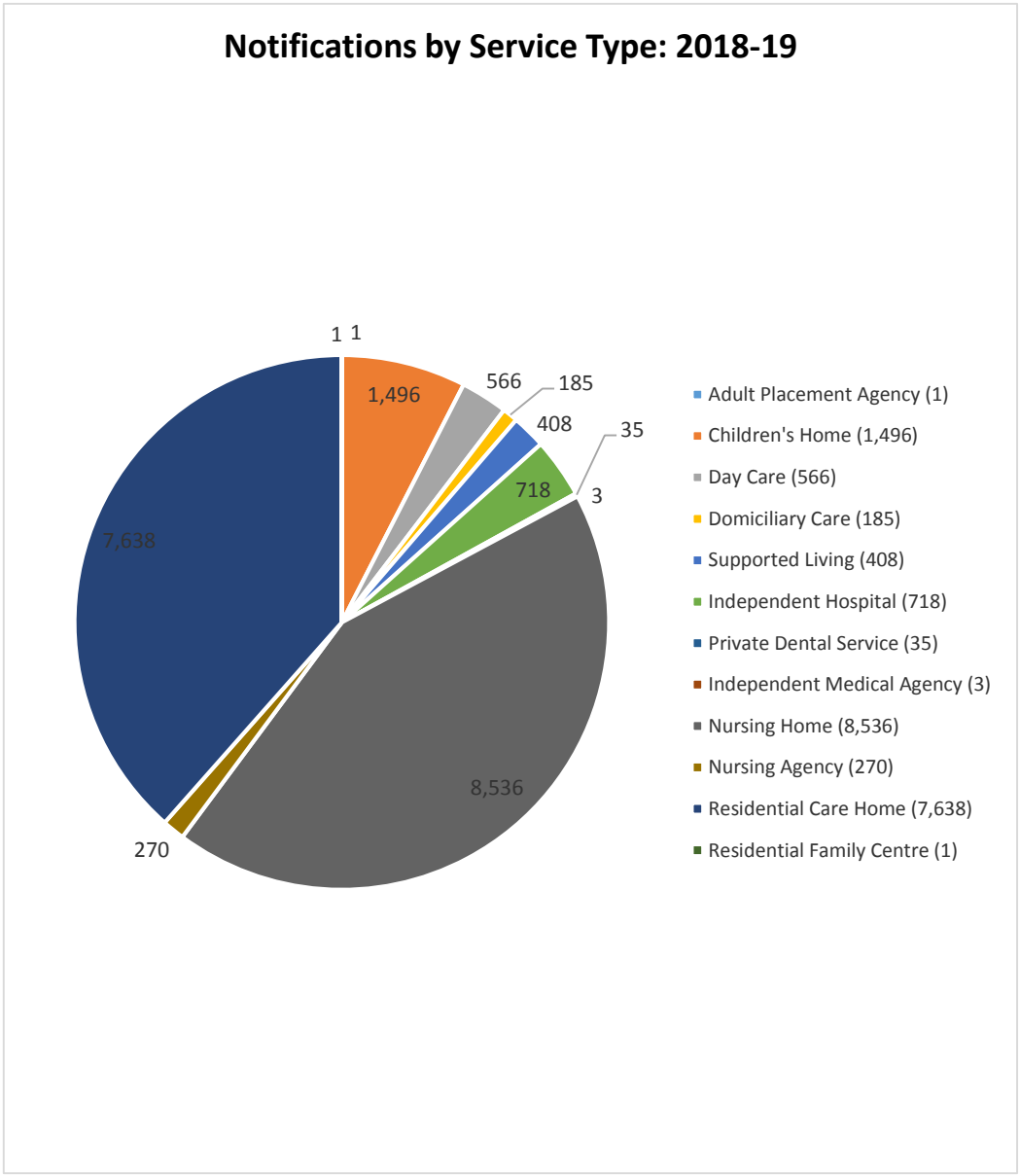

While most of our inspections at regulated services are conducted by individual inspectors, our hospital and prison inspections involve multidisciplinary teams, including peer and lay involvement. This year we have extended this approach to mental health settings, where our teams inspect hospital sites rather than individual wards. This allows us to assess governance arrangements for the provision of care across a hospital, identifying both areas of good practice and issues that require attention by the HSC trust.

## What Information We Use

When preparing for an inspection, our inspectors review information about the service held on RQIA's i-Connect information system. This includes details of the regulatory history of the service - such as inspections and enforcement; intelligence about the service including complaints or compliments from the public, whistleblowing from staff members; and statutory notifications from the service relating to incidents at the service.




All service providers are required to communicate with RQIA via a secure online web-based portal, for issues relating to our inspections and incident notifications. There are currently over 2,500 registered users on this system – including service providers and managers, and each day around 100 users connect and communicate with RQIA via this portal.




## What We Are Looking For

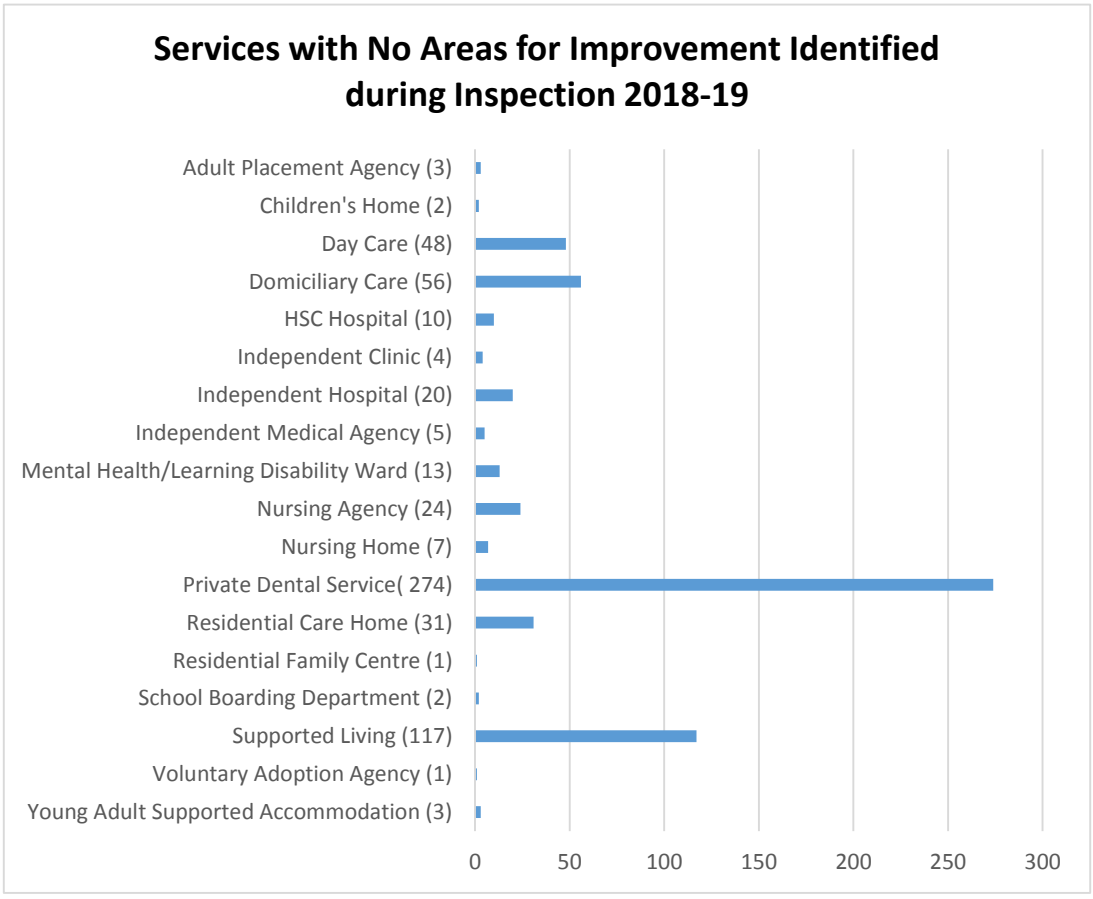
During an inspection we assess performance against standards, guidelines and regulations. In our assessment of the service we observe practice and review records of care. To get a fully rounded view of the service, we talk to management, staff and visiting health care staff such as GPs, tissue viability nurses, social workers and care managers to hear their views and experience of working at the service. The most important people in any service are those in receipt of care, and we also talk to service users, carers, and friend and relatives to give a voice to their views of the care provided.

At the conclusion of our inspection we provide verbal feedback to the management of the service, highlighting both areas of good practice and issues that require attention. This is followed up with a formal written report, which details our findings and where necessary includes an action plan of areas for improvement.

## Outcome of Inspections

We publish the findings of all our inspections (excluding those for children's homes) on our website www.rqia.org.uk/inspections, and our individual inspection reports should also be available on request from each of service we inspect.

During 2018-19, 621 services (42% of all services) were operating in line with relevant legislation and standards, with no areas for improvement highlighted by our inspectors. This is welcome increase from 37% of all services inspected in 2017-18.

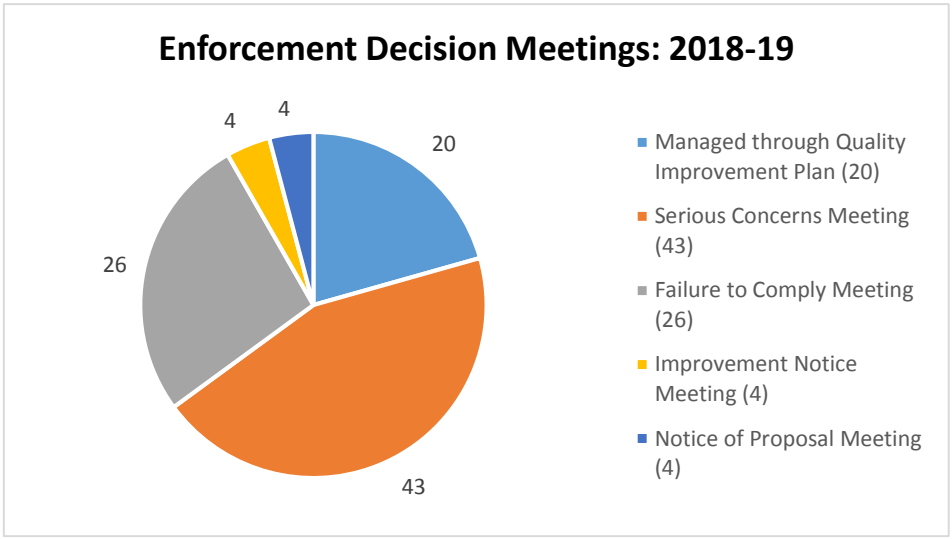


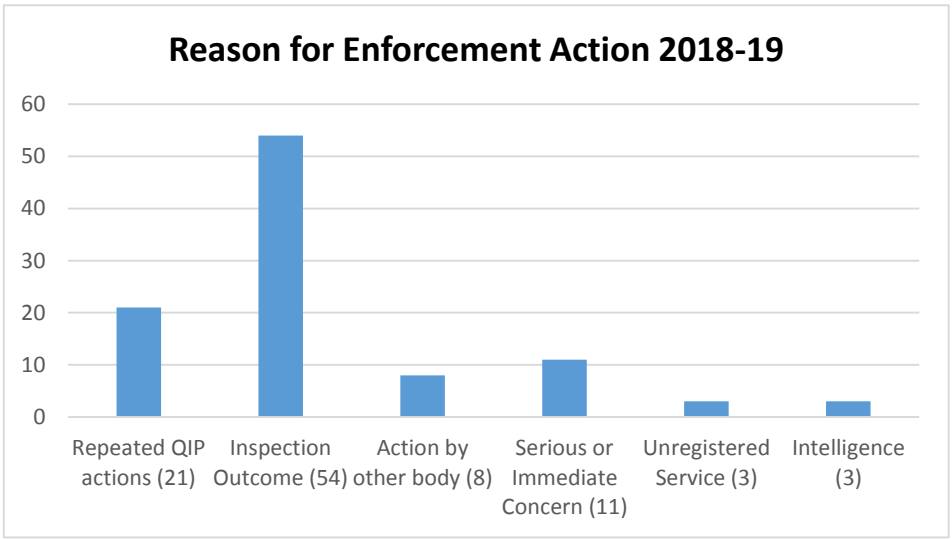

## Enforcement

In our work, the ongoing safety and wellbeing of service users is our primary concern. Where we identify concerns during an inspection, we will consider what action we may take to address the deficits in care or service provision. In order to decide on the appropriate action we hold an Enforcement Decision Meeting where our inspector presents their evidence to senior inspectors and assistant directors.

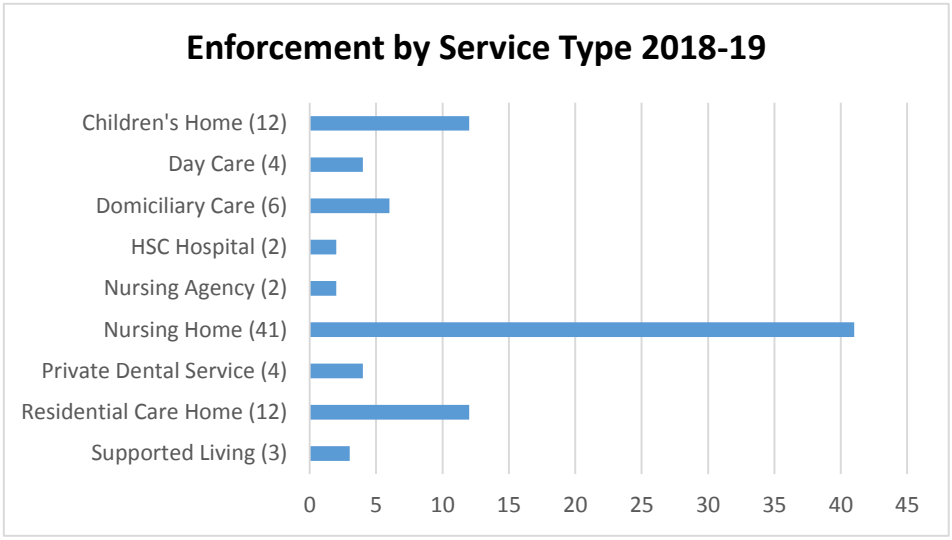
Based on the evidence presented we may hold a serious concerns meeting with the service provider, where we discuss our concerns and the actions required to respond to these.

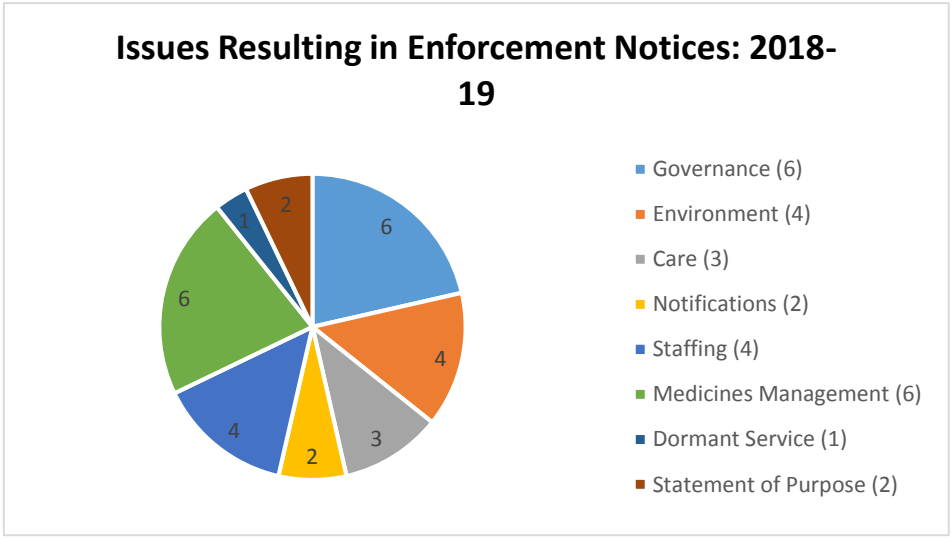
Providing we are satisfied with the action plan proposed we will assess these at a planned unannounced inspection. Where we have more serious concerns we invite the provider to attend an enforcement meeting where we discuss our concerns, and detail our proposed course of action.




Where we receive appropriate assurances from the provider we may decide not to take formal enforcement action at that time, and closely monitor the performance of the service. However, if we are not assured we may issue an improvement notice, failure to comply notice or move to place conditions on the registration of the service



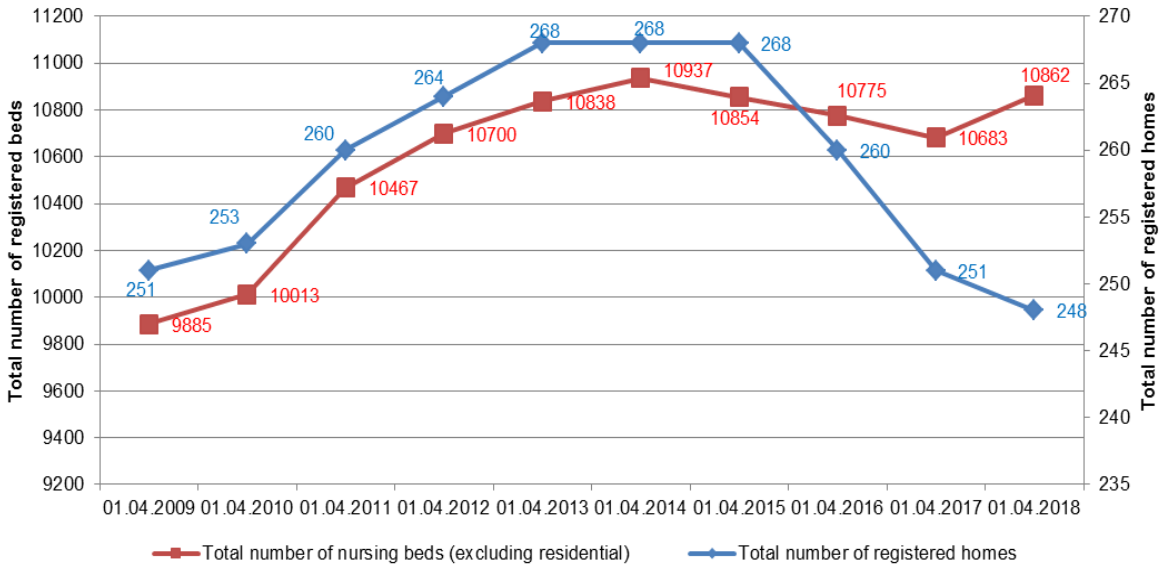

Full details of RQIA's enforcement actions during 2018-19 are included at Appendix 2 and 3.

**Changes in the Care Home Sector: 2008-2018**

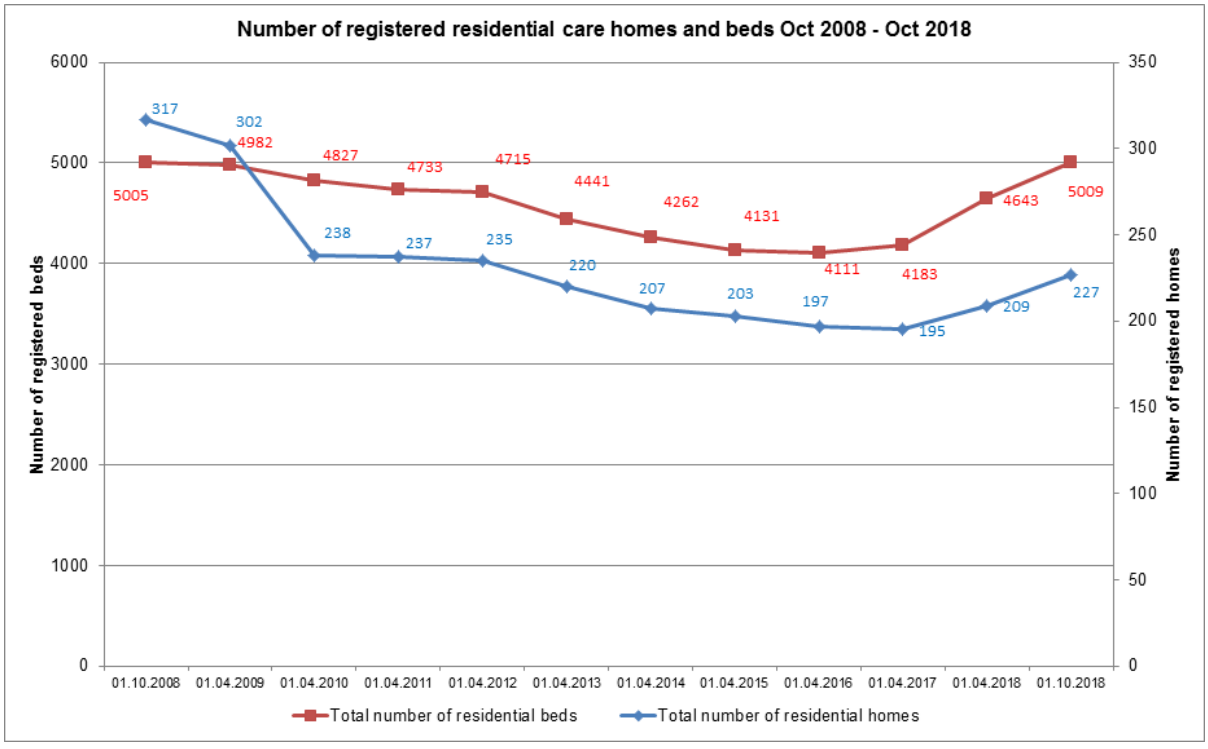
Over the past decade there have been considerable changes in the care homes sector. The number of nursing home beds has increased by 10%, while over the same period there has been a 6% decline in the number of residential care home beds. In October 2018, there were 16,007 registered nursing and residential care beds across Northern Ireland. Much of this change can be attributed to an increasing focus on the provision of domiciliary care in people's own homes.

However, while the total population of Northern Ireland has increased by around 4%, during this period, the population of over 65 years has increased by over 20%, placing an increased demand on this sector.

## Registered Nursing Homes and Beds: 2009 - 2018



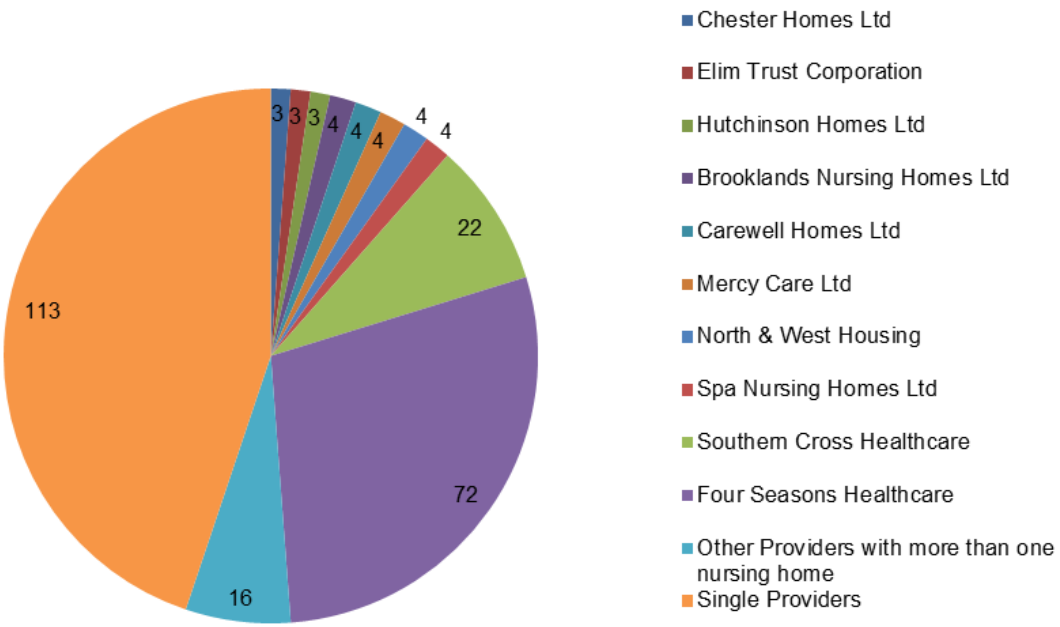

## Registered Residential Care Homes and Beds: 2009 – 2018



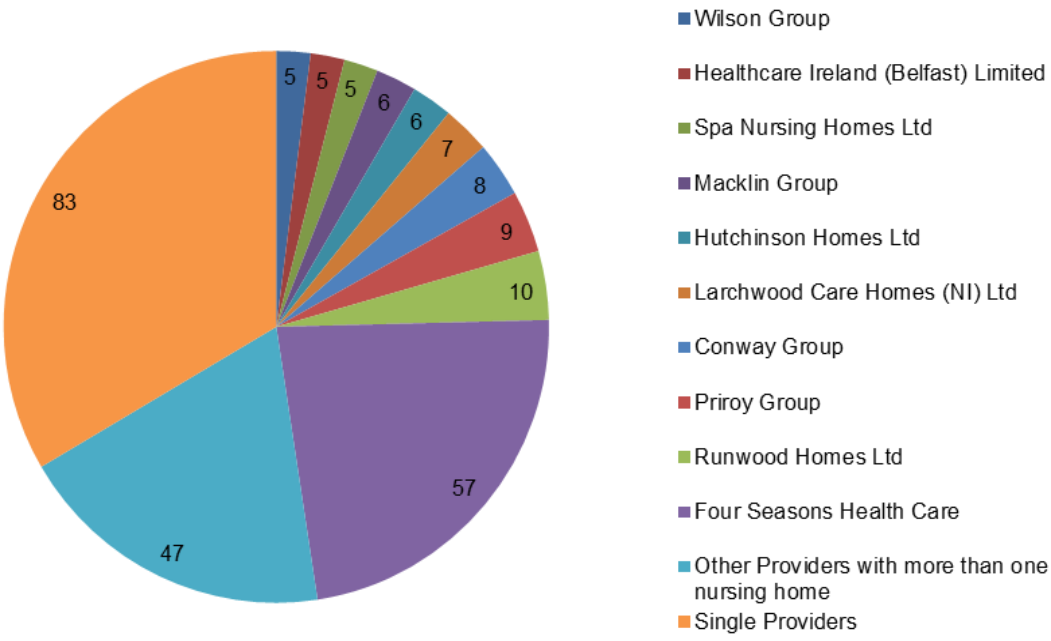

The number of homes registered to provide dementia care has increased significantly, with 49% of care homes now registered to care for people living with dementia.

The profile of the sector has also changed significantly over the decade, with a reduction in single home providers from 113 in 2008 to 83 in 2018.
The largest nursing home provider, Four Seasons Health Care, has reduced its portfolio by 15 homes; while the second largest in 2008, Southern Cross, ceased operating in 2011; and there are now 10 providers operating between five and 10 homes.

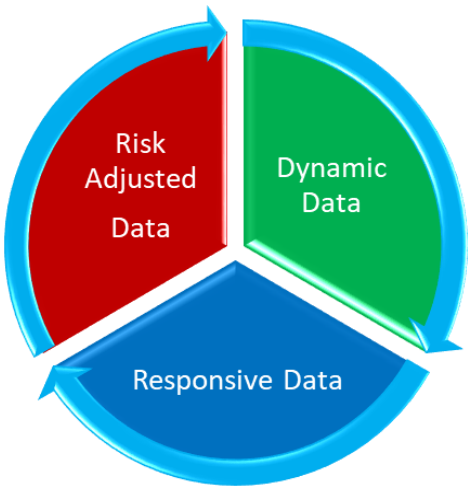
**Registered Nursing Homes by Provider: 2008**




**Registered Nursing Homes by Provider: 2018**



**Developments in our Inspection Approach**




During 2018-19, in partnership with Ulster University, we continued to progress the development of our risk-adjusted, dynamic and responsive (RADaR) framework to identify, quantify and respond to regulatory risks more robustly. This approach brings together intelligence - including incident notifications, and complaints and whistleblowing information – and the inspector's knowledge of the service to help determine the frequency and urgency of inspection.

Through this approach we aim to identify services where the quality of care is poor or changing and may require additional inspection.

This will enable us to focus our resources on services with the highest regulatory risk and to focus our inspection programme appropriately.

In April 2018, we began piloting this approach in nursing and residential care home inspections, which will be tested and refined prior to its development for use across all RQIA's inspection programmes.

In January 2019, we launched a new module for mental health and learning disability services to iConnect - RQIA's inspection information management system. This additional functionality now support our inspectors in monitoring and assessing all activity relating to patients within a mental health/learning disability hospital, including detention details and associated forms, warrants, guardianship, electro-convulsive therapy episodes, patient finances, second opinions, patient experience reviews and notifications of patients under 18 admitted to adult wards.

**HUMAN RIGHTS**

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.

In our activities, we place a clear focus on human rights principles in order to highlight the strong link between quality practice, patient experience and outcomes.

This year we supported our staff in delivering on these duties, through bespoke human rights training. In addition, we worked in partnership with the Independent Home Care Providers (IHCP) who represent many care home, domiciliary care and day care providers to ensure their members had access to best practice training in this area.

RQIA has been designated by the UK government as a national preventive mechanism (NPM) under the United Nations Optional Protocol to the Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment (OPCAT).

Left: Theresa Nixon, RQIA Director of Assurance with members of the UK NPM Mental Health Sub Group
Right: Joint RQIA and Independent Health Care Providers (IHCP) support Human Rights Training for IHCP members

This protocol aims to strengthen protections for people deprived of their liberty. As part of these duties, we inspect places of detention to monitor the treatment of and conditions for detainees and to make recommendations regarding the prevention of ill-treatment.

In taking forward these responsibilities, we inspect a range of services including mental health hospitals, children in secure accommodation, and prisons.

## SUPPORT FOR SERVICE USERS AND THEIR FAMILIES

### Hearing the Voice of the Public

As the majority of our inspections are unannounced, we want to ensure we capture the first hand views of service users and families, who may not be aware that an inspection is taking place.

During the year we distributed posters for permanent display in every care home highlighting RQIA's role in inspecting the service, and providing our contact details to allow service users, their families and staff to speak to our inspector for the home.

We also introduced calling cards, which our inspectors leave in bedrooms and day rooms, inviting service users and their families to tell us about their personal experiences at the home.

This feedback provides RQIA with a unique insight into the care provision and helps us to present a fully rounded view of a service in our inspection reports.

Did you know … poster on display in a care home; RQIA Have we missed you? calling cards

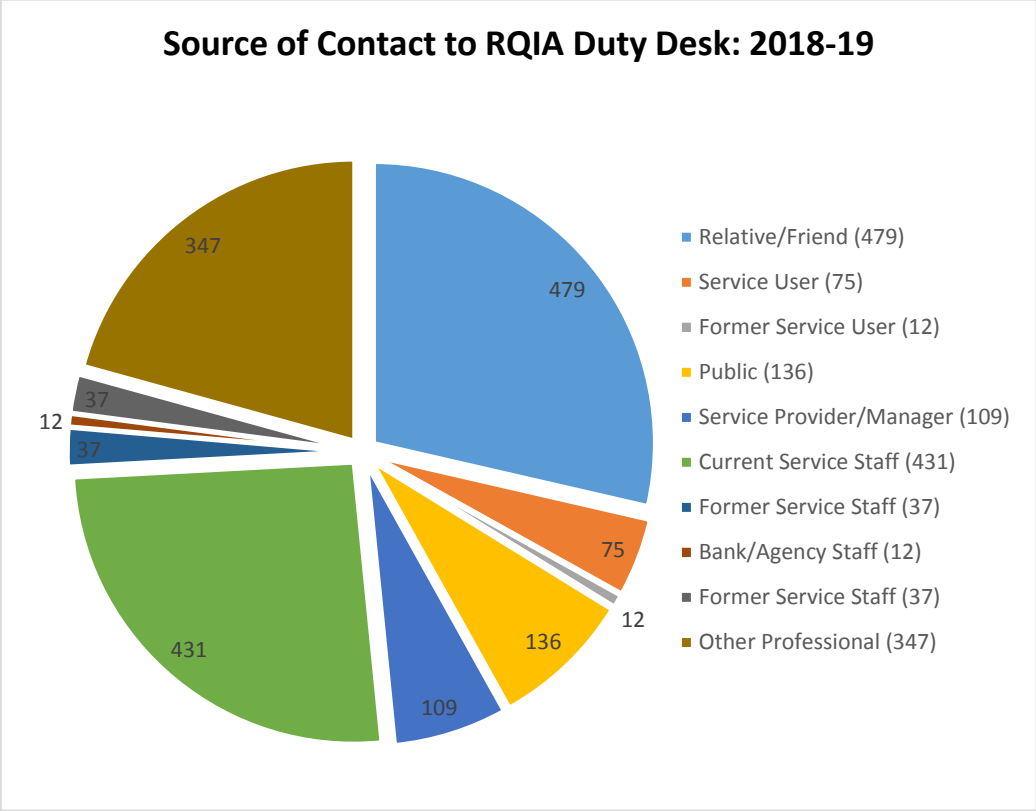
Our inspectors also distributed leaflets to support people wishing to raise concerns about a service, explaining the roles and responsibilities of RQIA, HSC trusts and the service provider in simple terms. These new approaches have received positive feedback from the public.

Geraldine Milligan on RQIA's YouTube channel

To help support people choosing a care service, we interviewed Geraldine Milligan, a member of the public, who spoke about her personal experiences of choosing a care home for her husband. You can watch Geraldine's Story on RQIA's website: www.rqia.org.uk, or on our YouTube channel.

## RQIA's Duty Desk

Each day we have an inspector on duty responding to calls from service providers and the public. During the year we received over 1,600 calls – around 700 from members of the public raising queries or concerns about care service.




In each case we listen to the caller, provide advice and record details of the call on our i-Connect information system. Where specific concerns are raised we assess the information provided and determine how best to respond. This may include following up the issues raised with management of the service; conducting an unannounced inspection to validate the concerns and where necessary taking enforcement action.

## COMPLAINTS AND WHISTLEBLOWING

### Complaints about Health and Social Care Services

While RQIA does not have legal powers to investigate complaints about health and social care services, we take each concern brought to our attention seriously.

If a concern is raised with us about a health and social care service, we use this information to inform our inspection or review work. We share the information received with our inspectors for the service, to determine whether there are any issues that require the immediate attention of RQIA. Through our inspections we also ensure that each provider has a complaints and investigations procedure in place.

We also provide advice and guidance to support the public in raising a complaint about a service, providing useful contacts for organisations that can help - including local health and social care trusts and the Patient and Client Council.

RQIA Complaints guidance leaflets

Where a complainant is dissatisfied with the service's response to their complaint, they may raise this matter with the Northern Ireland Public Service Ombudsman

**Whistleblowing**

Anyone wishing to raise concerns about wrongdoing in their workplace can bring these to the attention of RQIA under public interest disclosure legislation. During 2018-19, we were contacted by telephone, email and in writing by almost 130 staff, from a range of statutory and independent health and social care settings, who wished to raise concerns about the services being provided in their workplace. These included: concerns around the quality of care provision, issues relating to staffing, and how services were being managed and general care concerns. While some wished to remain anonymous, many staff provided their name and contact details, allowing us to seek further information on their concerns.

This provides RQIA with valuable intelligence and insight into services, and in each case we considered the information carefully to determine what action was required. Where necessary, we conducted unannounced inspections, to follow up on concerns about the quality and safety of care. In a number of cases this led to formal enforcement action to address the concerns identified and drive improvements in the quality for those using these services. In other cases we found no evidence to substantiate the allegations.

## RQIA'S REVIEW ACTIVITY

Each year RQIA undertakes reviews of services, in response to current events, or to examine the emerging and developing needs of our wide range of stakeholders. These include those initiated by RQIA and others commissioned by the Department of Health. In planning and reporting on the findings of our reviews, we focus on whether care is safe, effective and compassionate; and the quality of leadership within a service. The findings from each review are submitted to the Department of Health for their attention and consideration.

Our review recommendations aim to support and drive quality improvements across Northern Ireland for those in receipt of these services. In addition, our recommendations also aim to influence policy in a range of areas across health and social care.

### Governance Arrangements for Child Protection in the HSC

In May 2018, we published the findings of our Review of the Governance Arrangements for Child Protection in the HSC in Northern Ireland. We review the implementation of the 28 recommendations from our previous child protection review to assess the effectiveness of the current arrangements in Northern Ireland.

We found significant progress had been made to support improvement in outcomes for vulnerable children and their families in Northern Ireland. We also found evidence of strong leadership and a committed workforce, and noted some concerns in relation to workload, which includes often complex cases, and the management of unallocated cases. The review team made 14 recommendations to support further improvement in child protection arrangements across the HSC.

### Neurology

In May 2018, in response to the recall of patients at the Belfast Trust who were part of the caseload of a specific neurologist, the Department of Health tasked RQIA to undertake a review of governance of outpatient services in the Belfast Trust with a particular focus on neurology and other high volume specialties.

As part of this review, we visited outpatients units across the Belfast Trust and met with senior management and frontline staff. We also wished to engage with people using outpatients services at the Belfast Trust.

In addition to face-to-face meetings, we invited service users to provide details of their experiences through an online survey. Feedback from this engagement has helped inform the findings of our review team. We will submit our review report to the Department of Health in early 2019-20, prior to its publication.

We have also been asked to commission a parallel piece of work to ensure that the records of all patients or former patients of this neurologist who have died over the past ten years are subject to expert review. Preparation for this highly sensitive review commenced in late 2018, and it is anticipated that our review will commence in early 2019-20, following the announcement of our terms of reference and review team membership.

**Inquiry into Hyponatraemia Related Deaths**

Following the publication of Justice O'Hara's Inquiry into Hyponatraemia Related Deaths (IHRD), RQIA was tasked with leading and facilitating the regional IHRD Assurance Working Group, which is part of the DoH-led programme on implementation of IHRD Recommendations. As part of this work, chaired by Olive Macleod, RQIA's Chief Executive, with support from Dr Lourda Geoghegan, Director of Improvement Medical Director, we provide independent assurance on progress of the eight workstreams arising from the IRHD. During the year, six of these workstreams presented details of their workplan to address the inquiry's recommendations to the assurance group.

**Ongoing Review Work**

During 2018-19 work continued on the following reviews:

- Review of Governance (Corporate and Clinical) relating to Health Services delivered by Independent Sector Hospitals in Northern Ireland
- Review of Serious Adverse Incidents (SAIs)
- Review of Out-of-Hours (OOH) General Practitioner (GP) Service
- Review of Implementation of Clinical Guideline CG174 Intravenous Fluid Therapy in Adults in Hospital
- Review of Renal Services
- Review of how Trusts Commission Services from the Independent Sector
- Review of Developing Eyecare Partnerships
- Review of General Paediatric Surgery
- Review of Acute Emergency Mental Health
- Review of Use of Restraint and Seclusion

**RQIA Clinical Audit Programme**

To promote leadership in safety and quality in health and social care, each year, we invite applications from the HSC community for funding to undertake regional clinical audit, guidelines and quality improvement (QI) projects. Outcomes for patients, clients and carers are improved through the development and integration of audit, guidelines and QI projects, and their implementation. During 2018-19 projects included: asthma; NICE clinical guidelines; and the performance of ultrasound imaging systems within Northern Ireland audits. QI projects included: reducing the delays in medication administration; an app for physical health monitoring in patients with mental health conditions; and development of guidelines on planning birth at home.

## PUBLIC CONFIDENCE IN HEALTH AND SOCIAL CARE

During 2018-19, a number of high profile reports were published examining care provision in a number of settings. In June 2018, the Commissioner for Older People published his report into care at Dunmurry Manor Care Home. In his report he highlighted shortcomings in care and made a series of recommendations for health and social care organisations. RQIA submitted its actions to address the recommendations to the Department of Health who coordinated a response on behalf of all HSC organisations. RQIA's Executive Management Team and Board is monitoring progress of our action plan to ensure learning from this investigation report.

In December 2018, findings from a review of safeguarding failures at the Belfast Trust's Muckamore Abbey Hospital, were published, highlighting degrading and inhumane treatment of patients by nurses and health care workers.

In February 2019 RQIA conducted an unannounced inspection at Muckamore Abbey Hospital, over three days, to assess the safety and quality of care delivered across the hospital site. During this inspection, RQIA's inspection team met with patients, service users and a wide range of staff at Muckamore. Family members and carers also had an opportunity to meet with us to discuss their experiences at the hospital.

Following this inspection RQIA met with senior management from the Belfast Trust to request an action plan to address concerns identified in relation to staffing; safeguarding and restrictive practices; physical health care; and governance issues. RQIA will continue to monitor and assess the safety and quality of care at Muckamore to ensure the ongoing safety and wellbeing of patients at this hospital.

## PARTNERSHIP WORKING

RQIA has strong and effective partnerships with its peer organisations including health and social care systems regulators, inspectorates and professional regulatory bodies across the UK and Ireland. Through this engagement we share best practice in regulation, and we benchmark our work with peer organisations.

At a local level, we continue to develop positive relationships with our sponsor body – the Department of Health, and other health and social care organisations including: the HSC Board, HSC trusts, the Public Health Agency; Northern Ireland Social Care Council; Patient and Client Council; NI Guardian Ad Litem Agency; NI Practice and Education Council for Nursing and Midwifery and Northern Ireland Medical and Dental Training Agency. We participate in regular one-to-one liaison meetings to share learning and to discuss areas of common interest and issues of concern.

Left. Olive Macleod, RQIA Chief Executive and Eamonn Donaghy, Chief Executive Age Sector Platform.
Right. Audrey Murphy, RQIA Assistant Director addresses social care staff at NISCC workshop on learning from complaints.

We also work in partnership with other stakeholders including: Criminal Justice Inspection Northern Ireland; Education and Training Inspectorate; Her Majesty's Inspectorate of Prisons: Northern Ireland Commissioner for Children and Young People (NICCY); Age Sector Platform; the Commissioner for Older People for Northern Ireland; and The Prisoner Ombudsman for Northern Ireland.

During the year we also continued constructive engagement with a range of stakeholder representative organisations, including: the Independent Health and Care Providers; UK Homecare Association; British Dental Association; and the Association for Real Change.

We have memoranda of understanding with a range of partner organisations which support information sharing and cooperation in joint working. In early 2019, we signed a new memoranda of understanding with NICCY to support openness and transparency when working on areas of mutual interest.

**Working in partnership: Support and guidance for care providers**

As the regulator for health and social care services we are part of a wider system for ensuring the safety and wellbeing of those in receipt of care.

In support of those delivering front-line services, during 2018-19, RQIA held a number of events providing advice and guidance to service providers.

RQIA's Winter Pressures Workshops for care home providers held in Omagh and Belfast

Every year we read reports of winter pressures on health and social care services. To help ease these pressures and support effective preparation for the winter season, we published a short information leaflet for care homes and domiciliary care services.

We also held a series of workshops across Northern Ireland in partnership with the Royal College of Nursing, Public Health Agency, Northern Ireland Ambulance Service and the regional emergency preparedness group.

Here we provided information on recognising and responding to the deteriorating patient; managing flu like illnesses; and business continuity. This was supported by online resources, including videos of the presentations and other useful information.

In order to highlight the importance of medicines management in care settings, we held joint information sessions with the National Institute for Health and Care Excellence for care home and domiciliary care providers.

We also worked in partnership with the Northern Ireland Social Care Council and the Public Health Agency, providing training seminars on medicines management and frailty for domiciliary care workers.

In the area of mental health, in June, in partnership with The Royal College of Psychiatrists and British Psychological Society we held a workshop to discuss confidentiality and information sharing in acute mental health assessments.

We also held our seventh annual workshop with the Royal College of Psychiatrists, where we discussed our new approach to inspections for mental health services and an audit of the use of electro convulsive therapy (ECT). Colleagues from across Northern Ireland showcased improvement projects, including Towards Zero Suicide – A Mental Health Collaborative.

Left: RQIA, Royal College of Psychiatrists and British Psychological Society members meet in Belfast to discuss confidentiality and information sharing, June 2018
Right: Seventh joint Royal College of Psychiatrists/ RQIA Workshop, January 2019

In early 2018, new Ionising Radiation (Medical Exposure) Regulations were introduced, which aim to protect service users against the dangers of ionising radiation in medical settings such as hospitals, dental practices and chiropractic services.

To support those using x-ray and scanning equipment, in November, we held a joint workshop with Regional Medical Physics and Public Health England, highlighting the implications of the new regulations for services.

Joint IR(ME)R workshop with RQIA Regional Medical Physics and Public Health England, November 2018

**Sharing Best Practice: Engagement with Other Organisations**

In June, we held Building Sustainable Partnerships, a workshop to support improvements in communication and information sharing between health and social care organisations.

The event was attended by representatives from the Department of Health, Health and Social Care Board and the five local HSC trusts, and provided an opportunity for those present to clarify organisational roles and responsibilities around safeguarding, and emphasised the importance of information sharing in order to keep people safe. At the workshop we were joined by Marie Paterson, Head of Quality and Improvement at the Care Inspectorate, who provided examples of best practice from a Scottish perspective.

In November, colleagues from Healthcare Inspectorate Wales visited our offices to meet with RQIA's information team to share learning.

Left: Marie Paterson, Care Inspectorate Scotland addresses delegates at RQIA's Building Sustainable Partnerships workshop, Bellaghy, June 2018
Right: RQIA and Healthcare Inspectorate Wales Information teams sharing best practice, November 2018

Here we discussed team structures; our use of technology (including our i-Connect information system) to support the assessment of risk in services, and how this links with the development of our new RADaR approach to focusing inspections where they are most needed.

## Poster Presentation

Alan Guthrie, RQIA Inspector, mental health and learning disability services, May 2018, with his poster presentation

In May, Alan Guthrie presented a poster on dementia care improvement at a conference, Dementia: Transforming the Journey – Prevention, Treatment and Quality of Life, highlighting learning from RQIA's inspections, the value of lay assessors in inspection, and innovative practice from local HSC trusts.

In October, Theresa Nixon addressed the Royal College of Midwives Annual Conference in Manchester on the findings and recommendations from RQIA's review of perinatal mental health services, which continue to attract significant public interest.

## International Visitors

During 2018-19 we welcomed Stephen Caruana, OPCAT Implementation Manager in Western Australia to discuss our experiences and learning from inspecting places of detention.

Left Stephen Caruana, OPCAT Manager, Australia, meets RQIA Directors Dr Lourda Geoghegan and Theresa Nixon, April 2018
Right: Jenna Hoare, Social Services Inspector, Belize, meets staff at RQIA, November 2018

We also welcomed Jenna Hoare, an inspector of Social Services institutions in Belize, where we shared our experiences of driving improvements in social care through effective regulation

## ENGAGEMENT AND COMMUNICATION

### Public Involvement in our Work

RQIA is committed to effective engagement with the public and stakeholders to achieve improvements in the safety and quality of services.

During inspections and reviews, working in partnership with RQIA staff, our lay assessors observe the care provided and talk to patients, their relatives or carers about their experience of the service. This brings a fresh insight and public focus to our assessment of services.

During the year, our lay assessors joined us in around 80 inspections at a care homes, mental health and learning disability services; and as part of our Review of Governance Arrangements in Outpatients Services in the Belfast Trust.

### RQIA Membership Scheme

In 2018 we launched our Membership Scheme, inviting the public to join with us to help design and deliver the best ways of sharing the information we gather. We want to ensure that our inspections and reviews help with the choices service users might have to make and the questions that they should be asking when they receive care.

In March 2019 we held our inaugural Membership Forum where we discussed how we can improve how we involve the public in our work, and improve the accessibility of our information to ensure this can help to support the public when making choices about health and social care services.

Feedback from attendees was very positive, and we are currently considering next steps which will include involving membership focus groups to help shape our inspection reports and improvements to our website.

Attendees at RQIA's inaugural Membership Scheme Forum, March 2019

## Engaging with the Public

RQIA continues to explore platforms to engage with key stakeholders. During the year we attended 10 Pensioners Parliament events across Northern Ireland.

Here, we had the opportunity to engage directly with over 1,000 older people, discussing our role and providing information and advice on how our work supports improvements in health and social care services.

RQIA's Communication Team attending Pensioners Parliaments across Northern Ireland

## Political Engagement

RQIA continued its engagement with representatives from the main political parties, through meetings with representatives, including their health and social care spokespersons, to discuss the role of RQIA and specific areas of interest.

In partnership with the GMC, Pharmaceutical Society of Northern Ireland, NISCC, Patient and Client Council, and Northern Ireland Confederation for Health and Social Care, RQIA continued its attendance at the main political party conferences. These provide us with an opportunity to engage directly with party members, local councillors, MLAs and MPs on our ongoing work, and to highlight RQIA's relationships with other systems and professional regulatory bodies.

## Public Awareness of RQIA

During 2017-18 RQIA participated in the Department of Health's Northern Ireland Health Survey for the first time. Around 3,350 people were interviewed over the course of the year, and the results will form a benchmark for future surveys.

Of those surveyed, around one in three people were aware of RQIA.

Awareness of RQIA's main functions was as follows:

- 27% - registration and inspection of HSC services
- 22% - mental ill health or learning disability responsibilities
- 24% - reviews of HSC services

Awareness levels among those surveyed was:

- highest in the 55-64 age group
- slightly higher among women than men
- highest in the Western Trust area

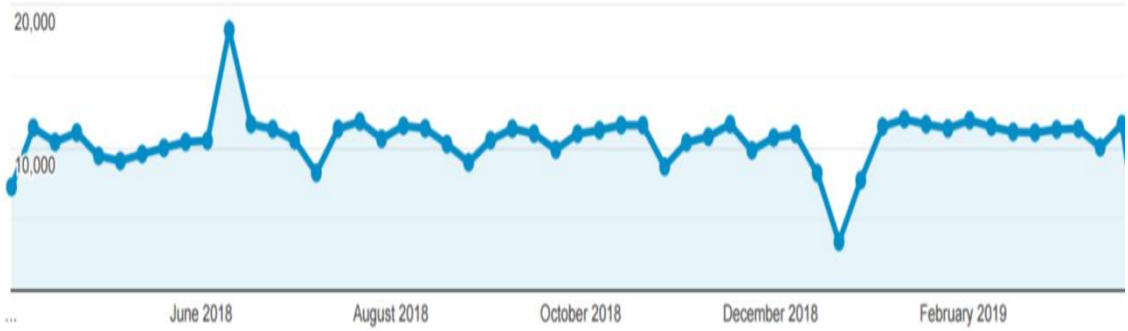
Around 2% of those surveyed had previously contacted RQIA, of those around half had contacted us in person, and 78% were satisfied or very satisfied with this contact.

**Digital Communication**

Throughout the year we continued to add new content to our website to support service providers and the public alike. During 2018-19, traffic continued to increase, with around 185,000 unique visitors to www.rqia.org.uk, a 12% increase on the previous year, resulting in over 550,000 webpage views.

We have published over 11,000 inspection reports for care services which are available through our interactive map, or directly through the search function. These continue to be the most visited part of our website, with around 220,000 page views during the year.

**Web Traffic: April 2018-March 2019**




We also direct traffic to our website via @RQIANews, our Twitter account, where we highlight new content added.

Each month we publish a list of recent inspection reports made available online over the previous month. These lists were accessed over 8,500 times during 2018-19, an increase of almost 50 per cent on the previous year.

Left: @RQIANews Twitter account. Right: RQIA's Online inspection report directory

**Media engagement**

Throughout the year, there was considerable media interest in all aspects of the work of RQIA, with significant coverage of regulation, review and mental health and learning disability activities in print, broadcast and online outlets.

Through our engagement with the media, we aim to provide assurance to those in receipt of health and social care across Northern Ireland to ensure we present honest and open information on RQIA's role and actions to a wider audience.

A number of issues drew particular media attention, including our management of concerns arising from the Commissioner for Older People's inquiry into care at Dunmurry Manor Care Home.

We provide journalists with open and detailed briefings to describe the nature and complexity of our activities, and the powers available to us through legislation.

## CORPORATE ISSUES

### RQIA's Board and Staff

RQIA has an independent 11 member board, with each member appointed by the Department of Health/Health Minister for a four-year term, which may be extended for a second term. Our Board members hold corporate responsibility for ensuring the aims and objectives for RQIA, set by the Department of Health and approved by the minister, are fulfilled. They also promote the efficient economic and effective use of resources, including our staff.

At 31 March 2019, we had nine board members, including acting chair Professor Mary McColgan, OBE, and two vacant positions.

RQIA's Board Members: Robin Mullan, Dr Norman Morrow OBE, Lindsey Smith, Professor Mary McColgan OBE (Acting Chair), Sarah Havlin, Denis Power, Gerry McCurdy, Seamus Magee. (not pictured Patricia O'Callaghan)

A short profile of each board member is included at Appendix 4.

**RQIA Senior Management Team**

Olive Macleod, as Chief Executive and Accounting Officer, is responsible for the day to day operation and management of RQIA, and is accountable to the Permanent Secretary of the Department of Health. She is also personally responsible for safeguarding the public funds for which she has charge and for ensuring propriety and regularity in handling these funds.

During 2018-19, we implemented a new organisational structure following a workforce review, placing a clear focus on assurance and quality improvement. We wish to make it easier to do business with RQIA, and we also wish to ensure we are able to respond effectively to the changing external environment.

Dr Lourda Geoghegan, Director of Improvement and Medical Director, and Theresa Nixon, Director of Assurance, manage the activities of their directorates. These directorates are supported in their work through RQIA's Business Support Unit, led by Jennifer Lamont.

Details of senior employees' remuneration are included within the remuneration report. RQIA does not make any payments in relation to staff benefits.

Members of RQIA's Senior Management Team, including: Senior Inspector Kate Maguire, Communications Manager Malachy Finnegan, Assistant Director of Improvement Lynn Long, Chief Executive Olive Macleod, Director of Improvement and Medical Director Dr Lourda Geoghegan, Head of Business Support Unit Jennifer Lamont, Senior Inspector Frances Gault, Director of Assurance Theresa Nixon, and Deputy Director of Assurance Dermot Parsons.

## Our Staff

RQIA has a staffing complement of 122 people (111.28 whole time equivalent), excluding board members, bank and agency, responsible for the effective delivery of our work programme and the achievement of our corporate objectives. The staff composition, by headcount, is 76% female and 24% male.

During 2018-19, 24 members of staff left RQIA through retirement, the voluntary exit scheme (VES) and taking up new opportunities.

In June 2018 we advertised for qualified nurses, social workers and allied health professionals to join RQIA as inspectors. This attracted a high level of interest, with over 120 applicants. During the year, we recruited a cohort of new inspectors - to join our teams inspecting care homes, independent health care, hospitals and mental health and learning disability wards.

## Staff Training

We ensure our staff have access to training to support us in achieving our business objectives. During the year, in addition to job-specific training, staff undertook mandatory training on information governance; fraud awareness; risk management; fire safety, IT security; and diversity and equality. In November, we held our annual learning week for all staff to support them in their daily work. This included sessions on: a patient's perspective of health and social care; child and adolescent mental health; children's rights; child sexual exploitation; learning disability; gender identity; nutrition and hydration; the deteriorating patient and early warning systems; falls management; preventing pressure damage; and safeguarding.

## Complaints about RQIA

During 2018-19, we received six complaints or expressions of dissatisfaction relating to the RQIA, including one anonymous complaint, which were managed in line with our complaints policy and procedure. Two were addressed at the early resolution stage; one is subject to an ongoing Stage 1 investigation; two progressed to a review by the Stage 2 complaints panel; while the issues raised in the anonymous complaint were examined to determine whether any further action was required by RQIA. Complainants were advised that if they remained dissatisfied with the outcome at Stage 2, they may wish to refer their complaint to the Northern Ireland Public Services Ombudsman, in writing, within six months of RQIA's final response. To ensure learning from complaints, we disseminate any lessons from complaints to relevant staff.

## Freedom of Information and Data Protection

As a public body, we are required to respond to requests for information under data protection and freedom of information legislation. During 2018-19, we received 28 freedom of information requests, with 24 responded to within 20 working days. We also received four subject access requests, and we responded to three within 40 calendar days. There were no reportable personal data related incidents during the year.

## Business Continuity Planning

To ensure continuity of service in an unplanned emergency situation, RQIA has a business continuity plan which is tested on an annual basis. To reflect learning from these tests, RQIA produces an action plan and revises the plan as necessary.

## UK Exit from the European Union (Brexit)

During 2018-19 RQIA prepared its business and staff for the potential impact and implications of the UK's exit from the European Union, in partnership with colleagues from the Department of Health, who provided advice and leadership on emerging issues.

## Equality

In September 2018, we submitted our annual progress report on the implementation of our equality and disability action plans to the Equality Commission, following approval by our Board.

RQIA has a range of human resources policies in place, which promote equality of opportunity across all Section 75 groupings. RQIA is committed to ensuring full and fair consideration is given to applicants with a disability, having regard to their abilities and aptitudes. During the year we participated in the joint disability placement scheme in partnership with a range of HSC organisations, where two people with a disability worked in RQIA for a 26 week period, gaining valuable experience in the workplace and contributing significantly to our work.

## Annual Quality Report 2017-18

In partnership with other HSC organisations in Northern Ireland, we published RQIA's Annual Quality Report, on World Quality Day in November, highlighting our key achievements in quality improvement during the previous year.

Our report is available on our website, www.rqia.org.uk.

## Strategic Performance Management

RQIA's Corporate Strategy 2017-21 sets out our vision, core values and strategic objectives. It was developed in the context of the Northern Ireland Executive's Draft Programme for Government Framework 2016–21, Health and Wellbeing 2026: Delivering Together (Department of Health, 2016), ongoing financial constraints and HSC reform. Four key themes are identified within our strategy:

- **Encourage quality improvement in health and social care services** - 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.
- **Use sources of information effectively** - RQIA will deliver independent scrutiny of health and social care services, targeted on the basis of assessed risk and prioritised need.
- **Engage and involve service users** - 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.
- **Deliver operational excellence** - RQIA is committed to developing our staff and using our resources effectively and efficiently to sustain an organisational culture of learning and continuous improvement

Our corporate strategy is supported by an annual Business Plan, which includes detailed specific actions, timescales and associated resources to deliver these objectives. We present quarterly corporate performance reports to RQIA's Board, providing progress on the delivery of the actions identified within the annual business plan. At 31 March 2019, we reported 88% of our 34 business plan actions assessed as complete, with four actions to be addressed throughout 2019-20

RQIA's Risk Management Strategy 2018-19 sets out our approach to ensuring the effective identification and management of risks to deliver RQIA's corporate objectives. During the year, risks were monitored and managed by RQIA's Board through consideration of the Corporate Risk Assurance Framework Report.

**Financial Summary**

RQIA has an annual budget of £7,531,486, which comprises £6,663,111 funding from DoH, and £868,375 fee income. During 2018-19 staff costs were £6,040,649 and other expenditure costs were £1,500,635. At year end there was an underspend of £2,403. This surplus fell within the breakeven target of £20,000.

During 2018-19, RQIA incurred pay slippage £340,000, non-pay overspend £148,000 and an under receipt of other income of £34,000. A non-recurring easement £180,000 was approved by DoH in October 2018, and a further easement of £127,000 was approved in January 2019. Both easements relate to posts remaining unfilled. RQIA received a total of £308,000 in VES and a total of £89,000 in relation to the 2018-19 pay award.

**Social, Community and Environmental Matters**

Throughout the year, RQIA continued its focus on energy reduction, recycling office waste, promotion of healthy lifestyles and use of public transport.

On a monthly basis we organised collections for a range of health-related charities, including a coffee morning for MacMillan Cancer Support Northern Ireland. We also held awareness events for staff with a focus on autism and multiple sclerosis in partnership with Autism NI and the MS Society.

Left: Paula McLarnon from the MS Society Northern Ireland; and Right: Christine English from Autism NI presenting to RQIA staff

# SECTION 2

# ACCOUNTABILITY REPORT

## GOVERNANCE REPORT

## STATEMENT OF ACCOUNTING OFFICER RESPONSIBILITIES

Under the Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, the Department of Health directed RQIA to prepare for each financial year a statement of accounts in the form and on the basis set out in the Accounts Direction. The financial statements are prepared on an accruals basis and must provide a true and fair view of the state of affairs of the RQIA of its income and expenditure, changes in taxpayers equity and cash flows for the financial year.

In preparing the financial statements the Accounting Officer is required to comply with the requirements of Government Financial Reporting Manual (FReM) and in particular to :

- observe the Accounts Direction issued by the Department of Health including relevant accounting and disclosure requirements, and apply suitable accounting policies on a consistent basis.
- make judgements and estimates on a reasonable basis.
- state whether applicable accounting standards as set out in FReM have been followed, and disclose and explain any material departures in the financial statements.
- prepare the financial statements on the going concern basis, unless it is inappropriate to presume that the RQIA will continue in operation.
- keep proper accounting records which disclose with reasonable accuracy at any time the financial position of the RQIA.
- pursue and demonstrate value for money in the services the RQIA provides and in its use of public assets and the resources it controls.

The Permanent Secretary of the Department of Health as Principal Accounting Officer for Health and Social Care Resources in Northern Ireland has designated Olive Macleod of RQIA as the Accounting Officer for the HSC Body. The responsibilities of an Accounting Officer, including responsibility for the propriety and regularity of the public finances for which the Accounting Officer is answerable, for keeping proper records and for safeguarding the RQIA's assets, are set out in the Accountable Officer Memorandum, issued by the Department of Health.

## GOVERNANCE STATEMENT

### 1. Introduction / Scope of Responsibility

The Board of RQIA is accountable for internal control. As Accounting Officer and Chief Executive of RQIA, I have responsibility for maintaining a sound system of internal governance that supports the achievement of the organisation's strategic priorities, statutory obligations and business objectives, whilst safeguarding the public funds and assets for which I am responsible, in accordance with the responsibilities assigned to me by the Department of Health (DoH).

As Chief Executive I am accountable to RQIA's Board for the day-to-day operations and management of RQIA and as the designated Accounting Officer I am accountable to the Permanent Secretary of DoH.

I am personally responsible for safeguarding the public funds for which I am responsible and for ensuring propriety and regularity in the handling of those funds. As Chief Executive and Accounting Officer, I establish, in agreement with the Department and RQIA's Board, the corporate strategy and business plan in the context of the Department's wider strategic aims, Departmental Requirements and current Public Sector Agreement (PSA) objectives and targets.

The Chief Executive provides a formal report to RQIA's Board covering matters of strategic importance, including updates on key targets and business objectives, information on enforcement actions, progress in respect of planned and commissioned reviews, serious incidents, complaints and whistleblowing. Board meetings are held at least six times a year.

The Chief Executive chairs a weekly meeting of the Executive Management Team which provides strategic oversight of all operational issues impacting on the day to day management of the organisation.

RQIA is Northern Ireland's independent regulator of health and social care services. Our ongoing work programme aims to provide assurance about the safety, quality and availability of these services through: our planned programme of announced and unannounced inspections of regulated services, mental health and learning disability wards, hospitals, and places of detention across Northern Ireland; and our reviews of both health and social care services and independent establishments and agencies. In carrying out its role RQIA has developed strong and effective partnerships with other health and social care systems regulators, inspectorates, professional regulatory bodies, arm-length bodies, trusts and HSC Board.

The Chair and Chief Executive attend bi-annual accountability reviews with the Permanent Secretary. The Chief Executive and Directors attend quarterly liaison meetings with DoH to discuss matters of strategic importance relating to regulation and quality improvement across health and social care.

## 2. Compliance with Corporate Governance in Central Government Departments: Code of Good Practice NI 2013

RQIA applies the principles of good practice in corporate governance and continues to further strengthen its governance arrangements. RQIA does this by undertaking continuous assessment of its compliance with corporate governance best practice by the RQIA Board's assessment against the Board Governance Self-Assessment Tool and by ensuring that it has proper and independent assurances on the soundness and effectiveness of the systems and processes in place for meeting its objectives and delivering appropriate outcomes.

The Board of RQIA exercises strategic control over the operation of the organisation through a system of corporate governance which includes:

- a schedule of matters reserved for Board decisions;
- a scheme of delegation, which delegates decision making authority, within set parameters, to the Chief Executive and other officers;
- standing orders and standing financial instructions;
- the establishment and operation of an effective audit committee; and
- the establishment and operation of an effective appointments and remuneration committee.

The system of internal financial control is based on a framework of production of regular financial information, robust administrative procedures including the segregation of duties and a system of delegation and accountability, supported by key management oversight processes. In particular, it includes:

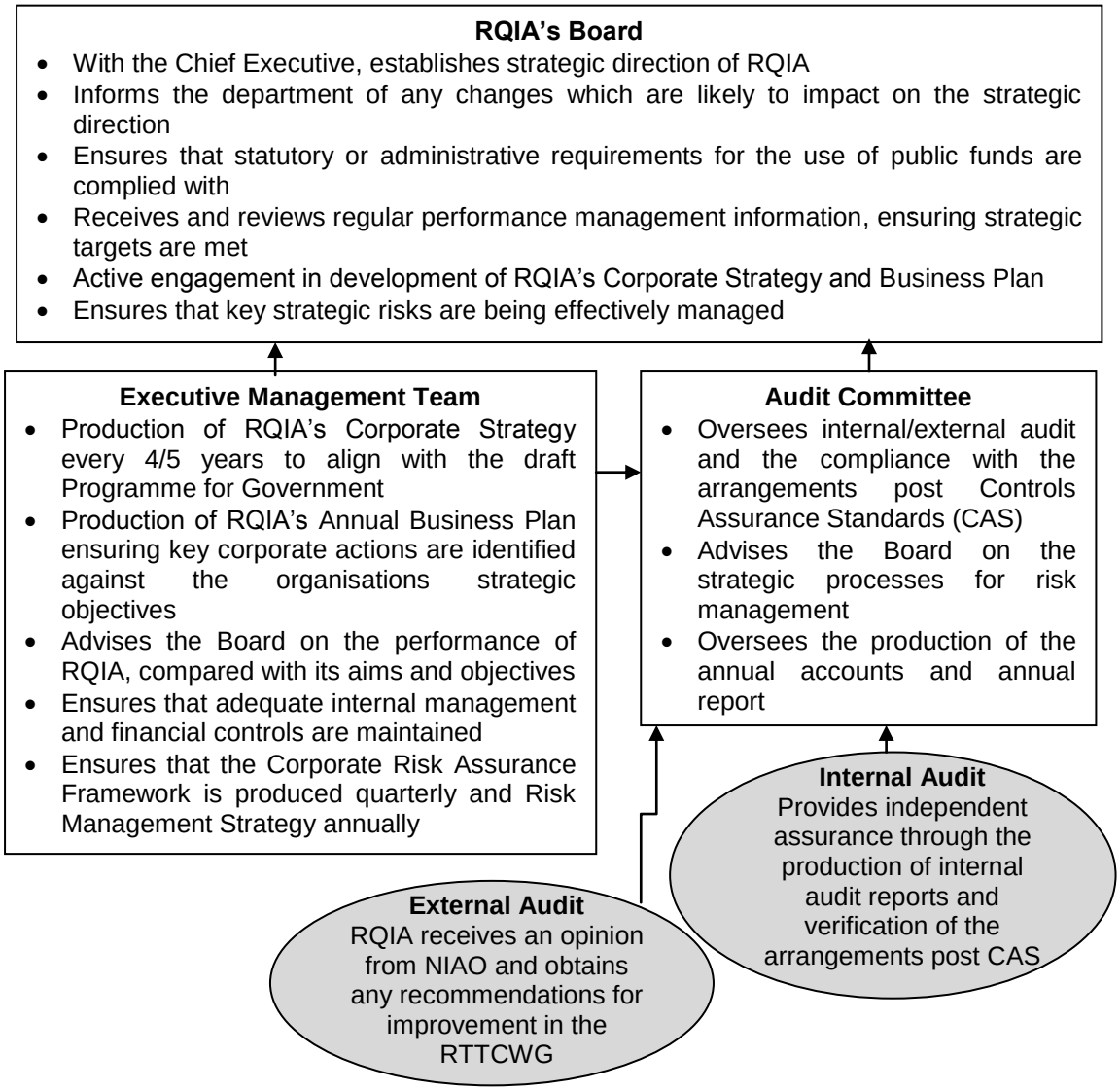
- comprehensive budgeting systems with an annual budget;
- regular reviews by the Board of periodic financial reports which indicate financial performance against the forecast;
- setting and monitoring targets of financial and other performance measures;
- clearly defined capital investment control guidelines;
- as appropriate, formal budget management disciplines;
- production of RQIA's Property Asset Management Report; and
- production of RQIA's Annual Report and Accounts.

A robust structure of accountability and responsibility is required as part of a control environment (i.e. governance, risk management and internal control). The respective responsibilities in relation to corporate governance are detailed in the chart and sections below.

RQIA assessed its compliance with best practice in Corporate Governance using the following tools:

- Audit Committee Self-Assessment
- The Board Governance Self-Assessment Tool
- Accountability process and sponsorship function
- Assurance Framework
- Mid-Year Assurance and Governance Framework
- Independent Assurance – BSO Internal Audit
- Management Statement / Financial Memorandum
- Arrangements post controls assurance standards

The outcomes of the self-assessments post controls assurance standards showed that RQIA continues to follow best practice in Corporate Governance.


RQIA's Board
With the Chief Executive, establishes strategic direction of RQIA
Informs the department of any changes which are likely to impact on the strategic direction
Ensures that statutory or administrative requirements for the use of public funds are complied with
Receives and reviews regular performance management information, ensuring strategic targets are met
Active engagement in development of RQIA's Corporate Strategy and Business Plan
Ensures that key strategic risks are being effectively managed
Executive Management Team
Production of RQIA's Corporate Strategy every 4/5 years to align with the draft Programme for Government
Production of RQIA's Annual Business Plan ensuring key corporate actions are identified against the organisations strategic objectives
Advises the Board on the performance of RQIA, compared with its aims and objectives
Ensures that adequate internal management and financial controls are maintained
Ensures that the Corporate Risk Assurance Framework is produced quarterly and Risk Management Strategy annually
Audit Committee
Oversees internal/external audit and the compliance with the arrangements post Controls Assurance Standards (CAS)
Advises the Board on the strategic processes for risk management
Oversees the production of the annual accounts and annual report
Internal Audit
Provides independent assurance through the production of internal audit reports and verification of the arrangements post CAS
External Audit
RQIA receives an opinion from NIAO and obtains any recommendations for improvement in the RTTCWG

## 3. Governance Framework

RQIA recognises that to deliver its strategic aims, objectives and priorities successfully, it needs sound corporate governance arrangements in place. Corporate governance is founded in statute, policies, processes, systems, organisational culture and behaviours, and together they provide a system for the way in which an organisation is directed, administered, controlled and goes about its business.

RQIA's governance framework sets out the roles, responsibilities and procedures for the effective and efficient conduct of its business. As an Arms-Length Body (ALB) RQIA is committed to governance excellence and is accountable for its decisions and activities.

### RQIA's Responsibility

RQIA is a non-departmental public body, and provides independent assurance about the safety, quality and availability of health and social care services in Northern Ireland. RQIA is also responsible for encouraging improvements in the quality of these services.

RQIA works within a robust statutory framework. The Health and Personal Social Services (Quality, Improvement and Regulation) (NI) Order 2003, provides a statutory mandate to RQIA, and defines its roles and functions. RQIA has a statutory duty to conduct inspections, investigations and reviews of services and to report its findings to DoH.

As an ALB, RQIA's approach to governance mirrors the Seven Principles of Standards in Public Life - the 'Nolan Principles'.

RQIA demonstrates accountability to DoH through:

- twice yearly accountability meetings with DoH
- RQIA's Annual Report which is laid before the NI Assembly;
- annual auditing of RQIA's accounts by the NIAO;
- independent scrutiny of RQIA's procedures and processes through BSO Internal Audit;
- publicly reporting performance in respect of its corporate goals and business targets;
- consulting before introducing major new policies or operational practices;
- Board meetings open to the public;
- publishing information regarding the operation of the Board, and where appropriate minutes of meetings and reports;
- quarterly production of RQIA's Corporate Risk Assurance Framework;
- having a robust and accessible complaints process; and
- production of an annual Quality Report.

## Board Responsibility

RQIA has an independent board of ten non-executive members including the acting Chair and one vacancy. Each board member is appointed by the Minister for Health, for an initial four-year term. Board members can serve a maximum of two terms.

The Board is ultimately responsible for all that RQIA does. In order for RQIA to discharge its responsibilities appropriately and effectively, day-to-day and operational management is delegated to the Chief Executive. A number of matters, however, remain reserved to the Board. These are:

- ensuring that RQIA fulfills its statutory objectives, general functions and duties and appropriately exercises the legal powers vested in it, under the Health and Personal Social Services (Quality, Improvement and Regulation) (NI) Order 2003 and other legislation;
- determining the overall strategic direction of RQIA within resource limits;
- active engagement in the development of the Corporate Strategy and Business Plan;
- monitoring the performance of the Chief Executive and her team, holding them to account for the exercise of their delegated powers and delivery against plans and budgets;
- promoting and protecting RQIA's values, integrity, and reputation; and
- ensuring high standards of governance which command the confidence of all of RQIA's staff and stakeholders.

In fulfilling its responsibilities, the Board pays particular attention to:

- maximising the impact and effectiveness of RQIA;
- identifying and managing risks and harnessing opportunities;
- listening and responding to stakeholders;
- ensuring its independence;
- ensuring the prudent use of public funds; and
- ensuring RQIA acts fairly, responsibly, transparently, proportionately and ethically.

In exercising the responsibilities set out above, Board members are required to meet the following obligations:

- the Board acts collectively in making decisions;
- the Board actively pursues learning and self-development opportunities;
- the Board expects the Executive Management Team (EMT) to provide appropriate, accurate and timely information and advice to enable informed decision making;
- the Board seeks to achieve consensus on major decisions. However, where this is not possible, collective decisions will be based on a majority vote with the Chair holding a casting vote; and
- the Board delegates authority through the Chief Executive to the EMT and staff, for the efficient and effective operation of RQIA and prudent use of public funds.

The Board has established clear levels of delegated authority within which:

- some decisions are reserved exclusively for the Board;
- the Chief Executive is empowered to make decisions and delegate authority to the EMT and staff for the day-to-day operation of RQIA; and
- the Chief Executive is required to escalate high risk and / or high impact issues for the timely attention and consideration of the Board.

A total of six Board meetings were held during 2018/19 with 87% of Board Members in attendance. In addition, four Board workshops took place in 2018/19, addressing strategic issues facing the organisation. The Board met on 29 November 2018 to complete the Board Governance Self-Assessment Tool, assessing the performance of the Board. This assessment concluded that RQIA can provide assurance in relation to the various leading indicators of effective Board governance.

| **Attendance at 2018/19 Board Meetings and Workshops** | | |
|---|---|---|
| | **Board Meetings** (Total 6) | **Board Workshops** (Total 4) |
| Prof. Mary McColgan | 5 | 4 |
| Denis Power | 6 | 4 |
| Lindsey Smith | 6 | 4 |
| Patricia O'Callaghan | 5 | 4 |
| Dr Norman Morrow | 4 | 3 |
| Seamus Magee | 6 | 4 |
| Robin Mullan | 6 | 4 |
| Gerry McCurdy | 6 | 4 |
| Sarah Havlin | 3 | 2 |

**Audit Committee Role and Performance**

The Audit Committee, as a Committee of the Board, assist in discharging its responsibilities for issues of risk control and governance. The Audit Committee reviews the comprehensiveness of assurances in meeting the Board and Accounting Officer's assurance needs, and reviews the reliability and integrity of these assurances.

The Audit Committee comprises six non-executive Board members, including the Audit Committee Chairman. The Audit Committee Chairman and members are appointed to the Audit Committee as per Standing Orders 5.3 and 5.4.

The Audit Committee advises the Board and Accounting Officer on:

- the strategic processes for risk management, internal control, governance and the mid-year Assurance Statement and the Governance Statement;
- the adherence to accounting policies, the preparation of annual accounts and the annual report of the organisation, including the process for review of the accounts prior to submission for audit and the extent of adjustments arising from audit findings;
- the planned activity and recommendations of both internal and external auditors;
- adequacy of management response to issues identified by internal audit activity, and those included in the external auditor's report to those charged with governance;
- assurances relating to the corporate governance requirements for the organisation;
- anti-fraud policies, whistleblowing processes, and arrangements for special investigations;
- the extent to which processes and procedures provide value for money;
- a periodic review of its own effectiveness and an annual review of its own terms of reference; and
- consideration of write-off of losses and authorisation of special payments before submission to the Board for approval.

The Audit Committee met four times during 2018-19 with 88% of members in attendance. The Audit Committee completed the Audit Committee self-assessment checklist on 21 June 2018 for 2018-19, which will conclude that RQIA can provide assurance of compliance with the good practice principles in the checklist.

| **Attendance at 2018/19 Audit Committee Meetings** | |
|---|---|
| **Board Member** | **Audit Committee Meetings** (Total 4) |
| Denis Power | 4 |
| Patricia O'Callaghan | 4 |
| Lindsey Smith | 3 |
| Robin Mullan | 3 |
| Gerry McCurdy | 4 |
| Seamus Magee | 3 |

**The Appointment and Remuneration Committee Role and Performance**

The main functions of the Committee are:

- Consider and agree the broad policy for the appointment and pay (remuneration) of the Chief Executive and second tier officers. This will include the basic pay principles and overall approach to remuneration including governance and disclosure.
- In considering this policy, take account of all factors, which it decides are necessary, including the provisions of any national agreements for staff where appropriate. The objective of this policy shall be to ensure that the senior management of RQIA are:
    - remunerated at a level sufficient to attract, retain and motivate senior staff of the quality required, whilst avoiding paying more than necessary for the purpose; and
    - provided with appropriate incentives to encourage enhanced performance and are, in a fair and responsible manner, rewarded for their individual contributions to the success of the organisation.
- Consider and recommend to RQIA, the framework or broad policy for the pay (remuneration) of staff below second tier level, including the policy or broad approach for pay uplifts for RQIA staff and pension policies.
- Be informed of, and review any major changes in employee benefit structures, including pensions, throughout RQIA.
- Monitor and evaluate the performance of the Chief Executive and agree targets for pay progression and any performance related pay schemes operated by RQIA.
- Within the terms of the agreed policy, receive reports from the Chief Executive on the total individual remuneration package of each Director including, where appropriate, bonuses and incentive payments. These packages shall be determined within the framework or policy set by the DoH.
- Agree the framework or broad policy for the terms and conditions of service for Directors, including termination payments and compensation commitments, taking account of such national guidance as is appropriate.
- Consider and recommend to RQIA disciplinary and grievance procedures applicable to and possible disciplinary action involving the Chief Executive including the dismissal of the post-holder.

The Appointments and Remuneration Committee met once during 2018-19 with three out of three Board Members (100%) in attendance.

**Chief Executive and EMT Responsibility**

The Chief Executive has delegated authority for the day-to-day management of RQIA. The Chief Executive is responsible for leading the EMT and staff in:

- fulfilling RQIA's statutory responsibilities including the general functions and duties specified in the Management Statement and Financial Memorandum;
- developing plans, programmes and policies for Board approval including the Corporate Strategy, Review Programme and Annual Business Plan;
- delivering RQIA's services in line with targets and performance indicators agreed by the Board;
- developing RQIA's relationships with key stakeholders;
- communicating RQIA's plans and achievements to stakeholders, RQIA's staff, DoH and the general public;
- acting as RQIA's Accounting Officer, reporting to the DoH on the use of public funds and with personal accountability and responsibility for RQIA's:
    - propriety and regularity;
    - prudent and economical administration;
    - avoidance of waste and extravagance;
    - efficient and effective use of available resources; and
    - the organisation, staffing and management of RQIA.
- ensuring that the EMT:
    - acts within the levels of authority delegated by the Board, escalating any high risk and /or high impact issues for the timely attention and consideration of the Board;
    - provides accurate and timely information to enable the Board to fulfill its governance responsibilities effectively; and
    - supports the Board in fulfilling its role and responsibilities as set out in this governance statement.

## 4. Business Planning and Risk Management

Business planning and risk management are at the heart of governance arrangements to ensure that statutory obligations and ministerial priorities are properly reflected in the management of business at all levels within RQIA.

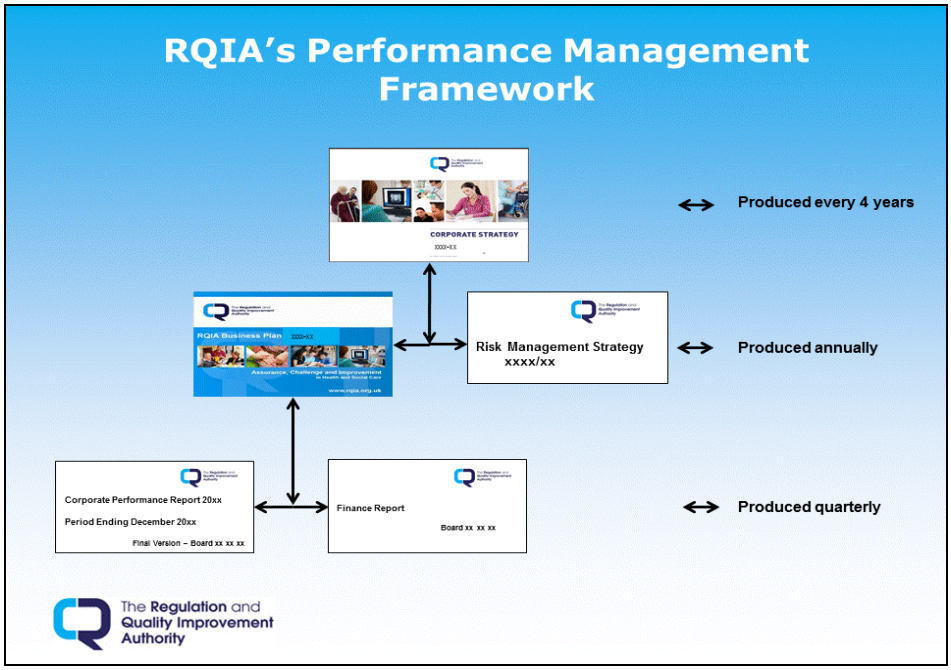
RQIA is actively scoping the potential impact of a 'no deal' outcome from the UK-EU negotiations on the services it provides, in line with the information provided by the Department. The process will continue to be refined as more clarity emerges on the detail of the final agreement.

The Northern Ireland Assembly was dissolved from 26 January 2017 with an election taking place on 2 March 2017, on which date Ministers ceased to hold office. An Executive was not formed following the 2 March 2017 election. As a consequence, the Northern Ireland Budget Act 2017 was progressed through Westminster, receiving Royal Assent on 16 November 2017, followed by the Northern Ireland Budget (Anticipation and Adjustments) Act 2018 which received Royal Assent on 28th March 2018. The authorisations, appropriations and limits in these Acts provide the authority for the 2018-19 financial year as if they were Acts of the Northern Ireland Assembly

Across the HSC sector it is expected that the significant financial challenges faced will intensify. However as with other financial years, RQIA remains committed to achieving financial break even. RQIA are aware of the underlying recurrent funding pressures, which, coupled with further in-year emergent pressures, mean that budgetary challenges will continue in 2019/20. Budget planning work to support the 2019-20 financial plan is ongoing. Along with other HSC organisations, RQIA also continues to face real challenges in the recruitment of key professional staff which may impact on RQIA's capacity to deliver its objectives. These challenges are also, where necessary, proportionately and appropriately reflected in RQIAs risk registers.

RQIA's Performance Management Framework brings together the Corporate Strategy, Annual Business Plan, Risk Management Strategy and Corporate Performance Reports.

The diagram below demonstrates how RQIA's four year strategy is delivered through the annually produced Risk Management Strategy and Business Plan which sets out how RQIA intends to deliver its strategic objectives through time bound business actions and also details how it intends to use the resources at its disposal. The status of the Business Plan actions, measures of success and current financial positions are presented quarterly to RQIA's Board for approval.




The Corporate Performance Report enables the Board to assess how RQIA is performing against the achievement of strategic objectives. It is produced quarterly and is presented to the Board for discussion and approval. It is also made available to RQIA's stakeholders on RQIA's website. The Risk Management Strategy outlines an overall approach to risk management that addresses the current risks facing RQIA in pursuing its strategy, which will also facilitate the effective recognition and management of such risks.

Leadership for risk management is provided by the Board, Audit Committee and EMT. The EMT has developed a Corporate Risk Assurance Framework report which is reviewed, updated and reported upon regularly. Directorates within RQIA develop and regularly review directorate specific risk registers which provide a clear linkage between directorate and corporate risks. RQIA Board provides leadership through its governance arrangements, annual reviews, approval of the Risk Management Strategy and Corporate Risk Assurance Framework reports with a specific focus on a review and challenge of the corporate risks on a quarterly basis, and has oversight of the risk management process through the Audit Committee.

During 2018-19 two new risks were added to the Corporate Risk Assurance Framework report and five risks were de-escalated to the appropriate Directorate Risk Registers. Each risk added to the Corporate Risk Assurance Framework Report is assessed to determine the likelihood and impact of the risk occurring and appropriate mitigating actions were agreed with the EMT and Board.

The Risk Management Strategy and Risk-On-A-Page procedures are available to all staff to support them with understanding their risk management roles and responsibilities. Compulsory Risk Awareness E-learning is completed by all staff every three years.

## 5. Information Risk

The management and control of the risk of loss of electronic information is safeguarded by the provision of secure remote access to a protected ICT environment. Staff adhere to the corporate security policies for ICT and Data Protection. RQIA also achieved substantive compliance with the HSC arrangements post CAS in Information Management and ICT during 2018/19.

RQIA has a nominated Personal Data Guardian, Senior Information Risk Owner, Information Asset Owner and Information Asset Assistants.

All RQIA officers are provided with induction and annual training in information and ICT policies and procedures and have relevant clauses in their contracts of employment. RQIA is committed to the principles of the DoH Code of Confidentiality and the Protocol for Information sharing and is a registered data controller with the Information Commissioners Office (ICO).

In 2018-19 there were no incidents or breaches which required reporting to the ICO.

RQIA has in place a suite of information and ICT policies which are reviewed every three years, including:

- Information and ICT Security Policy
- Use of Electronic Mail (E-mail) Policy
- Use of the Internet Policy
- Use of ICT Equipment Policy
- Records Management Policy
- Retention and Disposal of Documents Schedule
- Version Control Policy and Guidelines for Electronic Documents
- Information Incident Reporting Policy

RQIA has the following reporting and accountability mechanisms in place:

- Reporting to DoH Information and Analysis Unit on statutory processing of DPA and FOI requests
- DoH Controls Assurance Standards
- Internal Audit
- Governance Statement

## 6. Fraud

RQIA takes a zero tolerance approach to fraud in order to protect and support our key public services. Zero-tolerance also means that there will be a thorough investigation of all allegations or suspicions of fraud and robust action will be taken where fraud is proven in line with RQIA's Fraud Response Plan. We have put in place an Anti-Fraud Policy and Fraud Response Plan to outline our approach to tackling fraud, define staff responsibilities and the actions to be taken in the event of suspected or perpetrated fraud, whether originating internally or externally to the organisation.

Our Fraud Liaison Officer (FLO) promotes fraud awareness, co-ordinates investigations in conjunction with the BSO counter Fraud and Probity Services team and provides advice to personnel on fraud reporting arrangements. A report on Fraud incidents is presented to meetings of Audit Committee. All staff are provided with mandatory fraud awareness training in support of the Anti-Fraud Policy and Fraud Response plan, which are kept under review and updated as appropriate every three years.

## 7. Public Stakeholder Involvement

RQIA engages with a wide range of members of the public and other stakeholders as part of its routine inspection and review programmes. RQIA engages with services users and carers using a variety of methods (as appropriate) including, one to one meetings, questionnaires and focus groups. RQIA gathers information from a user/carer/stakeholder perspective for the purpose of making clear and informed judgments when assessing associated risks.

As part of our ongoing engagement programme, RQIA has met with a range of stakeholder representative groups to discuss our ongoing work programme and we have also attended a number of Pensioner Parliament Events. In March 2018, RQIA Board approved our Communications and Engagement Strategy 2018-21, which sets out our future priorities.

## 8. Assurance

Since the cessation of Controls Assurance Standards (CAS) from 1 April 2018 RQIA have processes in place to monitor compliance with the required standards, policies, legislation etc. for providing assurance to its Chief Executive and its Board. The HIA annual report attests to this this and Internal Audit review the RQIA processes for assurance that replaced the Controls Assurance Standards and found them adequate to provide the appropriate level of assurance in 2018-19.

The key elements of assurance in relation to the effectiveness of the system of internal control are:

- Senior managers review performance regularly against the actions and measures of success within RQIA's Annual Business Plan.
- Seven post controls assurance standard self-assessments / checklists are reviewed annually
- Internal audit services are provided by the Internal Audit Unit of BSO. There is continued coverage of the financial systems through RQIA's corporate risk-based and governance audits.

- A Service Level Agreement (SLA) exists with the Business Services Organisation to provide human resources, organisational development, equality, internal audit, H&S, facilities, information governance, ICT, finance, legal and procurement services to RQIA and assurance concerning the operation of these systems is provided annually by its Chief Executive.
- In relation to the SLA, annual monitoring meetings are held. Meetings are held with the service leads to discuss requirements and feedback about performance provided through the annual customer service questionnaires.
- The report to those charged with governance issued by the external auditor.
- An audit action plan charting progress in implementing the agreed recommendations of internal and external audit reports is regularly reviewed by RQIA's EMT and Audit Committee.

**Controls Assurance Standards**

RQIA assessed its compliance with the applicable Controls Assurance Standards and against which a degree of progress is expected in 2018/19.

RQIA achieved the following levels of compliance for 2018/19:

| Standard | Level of Compliance |
|---|---|
| **Management of Procurement & Supply** | Substantive |
| **Health & Safety** | Substantive |
| **Security Management** | Substantive |
| **Fire Safety** | Substantive |
| **Information Management** | Substantive |
| **Information Communications Technology** | Substantive |
| **Human Resources** | Substantive |

## 9. Sources of Independent Assurance

**NIAO**
The financial audit of RQIA was undertaken by the Northern Ireland Audit Office (NIAO). NIAO's approach to the 2018/19 Audit was delivered in accordance with the Audit Strategy and presented to the Audit Committee in March 2019.

**Internal Audit - Business Services Organisation (BSO)**
BSO Internal Audit's primary objective is to provide an independent and objective opinion to the Accounting Officer, Board and Audit Committee on the adequacy and effectiveness of the risk, control and governance arrangements. The basis of this independent and objective opinion is the completion of the Annual Internal Audit Plan.

In 2018-19 Internal Audit reviewed the following systems:

- Performance Management – satisfactory level of assurance received
- Financial Review - satisfactory level of assurance received
- Compliance with DoH Permanent Secretary's Instructions Regarding Travel 2018/19 – satisfactory level of assurance received
- Risk Management 2018/19 – satisfactory level of assurance received
- Inspections 2018 / 19 -limited level of assurance received

There was one priority one weakness in control identified in relation to the 2018/19 Audit Programme, Inspections 2018/19. The focus of the audit was on the Inspection process in RQIA including compliance with statutory requirements, appropriate planning, review and reporting (see p.63 Identification of New Issue for further details).

The audit was based on the risk that services are not appropriately regulated if there is not an effective inspection service in place which is compliant with legislation

The objectives of the audit were as follows:

- To ensure that there is an effective inspection /regulation service in place within RQIA
- To ensure that RQIA are effectively using the information team in the inspection process.

Fieldwork conducted during this audit focused solely on the care sector.

In the annual report the Head of Internal Audit reported that there is a satisfactory system of internal control designed to meet the Authority's objectives.

Internal Audit also conducted a consultancy piece across all HSC ALBs to examine Assurance Process Post-Controls Assurance Standards, and recommended closer working across all ALBs to ensure a common approach and will be taken forward through the Arms Length Bodies forum.

## 10. Review of Effectiveness of the System of Internal Governance

As Accounting Officer, I have responsibility for the review of effectiveness of the system of internal governance. My review of the effectiveness of the system of internal governance is informed by the work of the internal auditors and the executive managers within RQIA who have responsibility for the development and maintenance of the internal control framework, and comments made by the external auditors in their management letter and other reports. I have been advised on the implications of the result of my review of the effectiveness of the system of internal control by the Audit Committee and a plan, to address weaknesses and ensure continuous improvement to the system, is in place.

## 11. Significant Internal Control Issues

**Update on prior year control issues which were reported in the Mid-Year Statement and continue to be considered control issues**

### Issue

A BSO Internal Audit of Information Governance achieved a limited level of assurance. Limited assurance was provided on the basis that since the transfer of some Information Governance services to BSO, RQIA has not taken appropriate ownership for the management and handling of information. This has included ensuring that information assets are identified, owners allocated, risks assessed and all details subsequently recorded on a comprehensive Information Asset Register.

### Response

All actions to address the recommendations from the audit have either been delivered or are on target for implementation. The progress of the implementation of the recommendations and associated actions are monitored through RQIA's EMT and Audit Committee.

### Issue

BSO is responsible for providing RQIA with a range of services through Service Level Agreements (SLAs). The Head of Internal Audit presented the HIA Annual Report on the system of internal control for the year ended 31 March 2018 to the RQIA Audit Committee. However, to date, significant weaknesses in control continue to be identified in the audits relating to Payroll Shared Services.

### Response

BSO's Management have accepted all of the recommendations in the Payroll Shared Services audit report and have agreed a range of actions to address these control weaknesses. BSO Internal Audit completed a further audit of Payroll Shared Services in 2018-19 and its findings will be reported to the RQIA Audit Committee.

**Identification of New Issues**

**Issue**

In the RQIA inspection process, the quality assurance process should be enhanced to include a full review of the inspection file in addition to the draft report. This review should be evidenced. Records to be reviewed should be selected by the reviewer in all instances.

**Response**

RQIA management have accepted the recommendation. RQIA will develop an action plan in order to review progress of all recommendations of the Inspections 2018/19 report. The recommendation will inform development of our new QA process. The peer review procedure will be enhanced to reflect the following:

- For reports reviewed by an SI or AD, the reviewer will select the reports to be reviewed
- For peer review reports, reports will be selected by the relevant SI and allocated to a colleague
- Reports will be reviewed against an agreed template
- 1/3 of QA'd reports will be reviewed by a relevant reviewer from another team
- The review will correlate report findings with inspection record content

## 12. Conclusion

RQIA has a rigorous system of accountability which I can rely on as Accounting Officer to form an opinion on the probity and use of public funds, as detailed in Managing Public Money NI (MPMNI).

Further to considering the accountability framework within RQIA and in conjunction with assurances given to me by the Head of Internal audit, I am content that RQIA has operated a sound system of internal governance during the period 2018/19.

**Olive Macleod OBE** **Date: 4 July 2019**
**Chief Executive**

# THE REGULATION AND QUALITY IMPROVEMENT AUTHORITY

# REMUNERATION AND STAFF REPORT
# YEAR ENDED 31 MARCH 2019

## REMUNERATION REPORT

### Senior employees' Remuneration (Audited)

The salary, pension entitlements and the value of any taxable benefits in kind of the most senior members of the RQIA were as follows:

| | 2018-19 | | | | | 2017-18 | | | | |
|---|---|---|---|---|---|---|---|---|---|---|
| **Name** | **Salary £000s** | **Bonus / Performance Pay £000s** | **Benefits in kind (rounded to nearest £100)****** | **Pension Benefits (rounded to nearest £1,000)** | **Total £000s** | **Salary £000s** | **Bonus / Performance Pay £000s** | **Benefits in kind (rounded to nearest £100)** | **Pension Benefits (rounded to nearest £1,000)** | **Total £000s** |
| **Non-Executive Members** | | | | | | | | | | |
| Alan Lennon*** | 0-5 | - | - | - | 0-5 | 10-15 | - | - | - | 10-15 |
| Mary McColgan | 15-20 | - | - | - | 20-25 | 15-20 | - | - | - | 15-20 |
| Stella Cunningham** | 0-5 | - | - | - | 0-5 | 0-5 | - | - | - | 0-5 |
| Sarah Havlin | 5-10 | - | - | - | 5-10 | 5-10 | - | - | - | 5-10 |
| John Jenkins** | 0-5 | - | - | - | 0-5 | 0-5 | - | - | - | 0-5 |
| Seamus Magee | 5-10 | - | - | - | 5-10 | 5-10 | - | - | - | 5-10 |
| Gerry McCurdy | 5-10 | - | - | - | 5-10 | 5-10 | - | - | - | 5-10 |
| Norman Morrow | 5-10 | - | - | - | 5-10 | 5-10 | - | - | - | 5-10 |
| Daniel McLarnon** | 0-5 | - | - | - | 0-5 | - | - | - | - | - |
| Robin Mullan | 5-10 | - | - | - | 5-10 | 5-10 | - | - | - | 5-10 |
| Patricia O'Callaghan | 5-10 | - | - | - | 5-10 | 5-10 | - | - | - | 5-10 |
| Denis Power | 5-10 | - | - | - | 5-10 | 5-10 | - | - | - | 5-10 |
| Lindsey Smith | 5-10 | - | - | - | 5-10 | 5-10 | - | - | - | 5-10 |
| **Executive Members** | | | | | | | | | | |
| Olive MacLeod | 80-85 | - | 2 | 1 | 80-85 | 80-85 | - | 2 | 9 | 90-95 |
| Maurice Atkinson* | - | - | - | - | - | 70-75 | - | 2 | 5 | 75-80 |
| Kathy Fodey | 60-65 | - | - | 20 | 80-85 | 60-65 | - | 1 | 16 | 80-85 |
| Theresa Nixon | 75-80 | - | - | - | 70-75 | 70-75 | - | 1 | - | 70-75 |
| Lourda Geoghegan | 105-110 | - | 2 | 39 | 140-145 | 95-100 | - | 2 | 21 | 120-125 |

***** Mr M Atkinson left under the Voluntary Exit Scheme on 30 March 2018. **These NEDs were award back-dated pay in 2018-19 and currently do not sit on RQIA's board. *** Deceased.**** BIK relate to profit on mileage payments.

## THE REGULATION AND QUALITY IMPROVEMENT AUTHORITY

## REMUNERATION REPORT

As non-executive members do not receive pensionable remuneration, there are no entries in respect of pensions.

Full details of Board Members appointments can be found in the Directors' Report.

Senior Executives Pension Entitlements

The pension entitlements of RQIA senior executives are as follows (Audited):

| Name | Real Increase in Pension and related lump sum at 60 (Bands of £2,500) | Accrued Pension at age 60 as at 31/03/19 and related lump sum (Bands of £5,000) | Cash Equivalent Transfer value (CETV) at 31/03/18* | Cash Equivalent Transfer Value (CETV at 31/03/19* | Real increase in CETV |
|---|---|---|---|---|---|
| | £'000 | £'000 | £'000 | £'000 | £'000 |
| Olive Macleod | 0-2.5 plus lump sum 0 -2.5 | 20-25 plus lump sum 65-70 | 486 | 554 | 13 |
| Kathy Fodey | 0-2.5 plus lump sum 0-2.5 | 15-20 plus lump sum 30-35 | 304 | 362 | 19 |
| Lourda Geoghegan | 2.5-5 less lump sum 0-2.5 | 20-25 plus lump sum 40-45 | 279 | 360 | 34 |

* The CETV figures at 31 March 2019 and at 31 March 2018 have been supplied by HSC Pension Branch.

Pension figures are not available for any senior executive over the normal retiring age.

A cash equivalent transfer value (CETV) is the actuarially assessed capital value of the pension scheme benefits accrued by a member at a particular point in time. The benefits valued are the member's accrued benefits and any contingent spouse's pension payable from the scheme. A CETV is a payment made by a pension scheme, or arrangement to secure pension benefits in another pension scheme or arrangement when the member leaves a scheme and chooses to transfer the benefits accrued in their former scheme. The pension figures shown relate to the benefits that the individual has accrued as a consequence of their total membership of the pension scheme, not just their service in a senior capacity to which the disclosure applies.

The CETV figures and the other pension details, include the value of any pension benefits in another scheme or arrangement which the individual has transferred to the HPSS pension scheme. They also include any additional pension benefit accrued to the member as a result of their purchasing additional years of pension service in the scheme at their own cost.

CETVs are calculated within the guidelines prescribed by the institute and Faculty of Actuaries.

Real Increase in CETV - This reflects the increase in CETV effectively funded by the employer. It takes account of the increase in accrued pension due to inflation, contributions paid by the employee (Including the value of any benefits transferred from another pension scheme or arrangement) and uses common market valuation factors for the start and end of the period.

**Fair Pay Statement:**

| | **2018-19** | **2017-18** |
|---|---|---|
| Band of Highest Paid Director's Total Remuneration (£000s): | 105-110 | 95-100 |
| Median Total Remuneration (£): * | 39,263 | 37,403 |
| Ratio: | 2.3 | 2.67 |
| Range of staff remuneration**:** | £17K – 105K | £15K -£119K |

*The median staff remuneration includes agency costs.

**Reporting of Early Retirement and Other Compensation – Exit Packages (Audited)**

| Exit package cost band | Number of compulsory 2019 | Number of compulsory 2018 | Number of other departures 2019 | Number of other departures 2018 | Total number of exit packages 2019 | Total number of exit packages 2018 |
|---|---|---|---|---|---|---|
| <£10,000 | - | - | 1 | - | 1 | - |
| £10,000 - £25,000 | - | - | 1 | - | 1 | - |
| £25,001 - £50,000 | - | - | 2 | - | 2 | - |
| £50,001 - £100,000 | - | - | 3 | 1 | 3 | 1 |
| £100,001- £125,000 | - | - | - | 1 | - | 1 |
| Total number exit packages by type* | - | - | 7 | 2 | 7 | 2 |
| Total resource cost £000's | - | - | 295 | 195 | 295 | 195 |

The staff composition, by headcount, is 76% female and 24% male. During 2018-19, there was an average of 7.78% staff absence.

During 2018-19, a total of 24 members of staff left RQIA through retirement, taking up new opportunities, and through the voluntary exit scheme (VES). Seven employees left through VES as part of RQIA's restructuring programme. There were no retirements through ill health or off payroll engagements.

The RQIA participates in the HSC Superannuation Scheme. Under this multi-employer defined benefit scheme both RQIA and employees pay specified percentages of pay into the scheme and the liability to pay benefit falls to the DoH. RQIA is unable to identify its share of the underlying assets and liabilities in the scheme on a consistent and reliable basis.
As per the requirements of IAS 19, full actuarial valuations by a professionally qualified actuary are required at intervals not exceeding four years. The actuary reviews the most recent actuarial valuation at the Statement of Financial Position date and updates it to reflect current conditions. The 2016 valuation for the HSC Pension scheme updated to reflect current financial conditions (and a change in financial assumption methodology) will be used in 2018-19 accounts.

# STAFF REPORT

**Staff Costs (Audited)**

| | 2018-19 | | | 2017-18 |
|---|---|---|---|---|
| | **Permanently employed staff** | **Others** | **Total** | **Total** |
| Wages and Salaries | 4,845,301 | 128,773 | 4,974,074 | 4,901,362 |
| Social Security Costs | 438,616 | - | 438,616 | 455,921 |
| Other Pension Costs | 627,959 | - | 627,959 | 637,550 |
| **Sub-Total** | 5,911,876 | **128,773** | 6,040,649 | **5,994,833** |
| Capitalised staff costs | - | - | - | - |
| **Total Staff costs reported in Statement of Comprehensive Expenditure** | **5,911,876** | **128,773** | **6,040,649** | **5,994,833** |
| Less Recoveries in respect of outward secondments | - | - | - | - |
| **Total Net Costs** | **5,911,876** | **128,773** | **6,040,649** | **5,994,833** |

Staff costs have been disclosed in Note 3 (page 89).

**Average Number of Whole Time Equivalent Persons Employed (Audited)**

| | | | **2019** | **2018** |
|---|---|---|---|---|
| | **Permanently employed staff** | **Others** | **Total** | **Total** |
| | **No.** | **No.** | **No.** | **No.** |
| Administrative and clerical | 127 | 3 | 130 | 134 |
| Total average number of persons employed | 127 | 3 | 130 | 134 |
| Less average staff number relating to capitalised staff costs | 0 | 0 | 0 | 0 |
| Less average staff number in respect of outward secondments | 0 | 0 | 0 | 0 |
| Total net average number of persons employed | 127 | 3 | 130 | 134 |

## ACCOUNTABILITY AND AUDIT REPORT

### LOSSES AND SPECIAL PAYMENTS (Audited)

### Regularity of Expenditure (Audited)

| Type of loss and special payment | 2018-19 Number of Cases | 2018-19 £ | 2017-18 Number of Cases | 2017-18 £ |
|---|---|---|---|---|
| **Cash losses** | | | | |
| Cash Losses - Theft, fraud etc | - | - | - | - |
| Cash Losses - Overpayments of salaries, wages and allowances | - | - | - | - |
| Cash Losses - Other causes | - | - | - | - |
| | - | - | - | - |
| **Claims abandoned** | | | | |
| Waived or abandoned claims | - | - | - | - |
| | - | - | | - |
| **Administrative write-offs** | | | | |
| Bad debts | 4 | 303 | 7 | 2,608 |
| Other | - | - | - | - |
| | - | - | - | - |
| **Fruitless payments** | | | | |
| Late Payment of Commercial Debt | - | - | - | - |
| Other fruitless payments and constructive losses | - | - | - | - |
| | - | - | - | - |
| **Stores losses** | | | | |
| Losses of accountable stores through any deliberate act | - | - | - | - |
| Other stores losses | - | - | - | - |
| | - | - | - | - |
| **Special Payments** | | | | |
| Compensation payments | | | | |
| - Clinical Negligence | - | - | - | - |
| - Public Liability | - | - | - | - |
| - Employers Liability | - | - | - | - |
| - Other | - | - | - | - |
| | - | - | - | - |
| Ex-gratia payments | - | - | - | - |
| Extra contractual | - | - | - | - |
| Special severance payments | - | - | - | - |
| **TOTAL** | **4** | **303** | **7** | **2,608** |

**Regularity of Expenditure (Audited)**

The RQIA has a delegated Scheme of Authority which sets out who are authorised to place non-pay expenditure. The Scheme sets out who are authorised to place requisitions for the supply of goods and services and the maximum level of each requisition.

The RQIA has a Service Level Agreement with the Business Services Organisation, including provision of professional advice regarding the supply of goods and services to ensure proper stewardship of public funds and assets. Under that Service Level Agreement, the Procurement and Logistics Service is a Centre of Procurement Excellence to provide assurance that the systems and processes used in procurement ensure appropriate probity and propriety.

The Head of Development and Corporate Services ensures that expenditure is in accordance with regulations and all necessary authorisations have been obtained.

As far as the Accounting Officer is aware, there is no relevant audit information of which the Agency's auditors are unaware, and the Accounting Officer has taken all steps that he ought to have taken to make himself aware of any relevant audit information and to establish that the entity's auditors are made aware of that information.

The Accounting Officer confirms that the annual report and accounts as a whole is fair, balanced and understandable and that he takes personal responsibility for the annual report and accounts and the judgements required for determining that it is fair, balanced and reasonable.

**Special Payments**

There were no other special payments or gifts made during 2018-19.

**Other Payments and Estimates**

There were no other payments made during the year and none in 2018-19.

**Losses and Special Payments over £250,000**

There were no losses or special payments over £250,000.

**Fees and Charges (Audited)**

See Note 4 Income for details.

**Long Term Expenditure Plans**

No current capital or revenue business cases in place.

**Remote Contingent Liabilities (Audited)**

In addition to contingent liabilities reported within the meaning of IAS37, RQIA also reports liabilities for which the likelihood of a transfer of economic benefit in settlement is too remote to meet the definition of contingent liability. RQIA had no remote contingent liabilities.

**THE CERTIFICATE AND REPORT OF THE COMPTROLLER AND AUDITOR GENERAL TO THE NORTHERN IRELAND ASSEMBLY**

**The Regulation and Quality Improvement Authority**

**THE CERTIFICATE AND REPORT OF THE COMPTROLLER AND AUDITOR GENERAL TO THE NORTHERN IRELAND ASSEMBLY**

**Opinion on financial statements**

I certify that I have audited the financial statements of the Regulation and Quality Improvement Authority for the year ended 31 March 2019 under the Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003. The financial statements comprise: the Statements of Comprehensive Net Expenditure, Financial Position, Cash Flows, Changes in Taxpayers' Equity; and the related notes including significant accounting policies. These financial statements have been prepared under the accounting policies set out within them. I have also audited the information in the Accountability Report that is described in that report as having been audited.

In my opinion the financial statements:

- give a true and fair view of the state of the Regulation and Quality Improvement Authority's affairs as at 31 March 2019 and of the Regulation and Quality Improvement Authority's net expenditure for the year then ended; and
- have been properly prepared in accordance with the Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, and Department of Health directions issued thereunder.

**Opinion on regularity**

In my opinion, in all material respects the expenditure and income recorded in the financial statements have been applied to the purposes intended by the Assembly and the financial transactions recorded in the financial statements conform to the authorities which govern them.

**Basis of opinions**

I conducted my audit in accordance with International Standards on Auditing (UK) (ISAs) and Practice Note 10 'Audit of Financial Statements of Public Sector Entities in the United Kingdom'. My responsibilities under those standards are further described in the Auditor's responsibilities for the audit of the financial statements section of this certificate. My staff and I are independent of the Regulation and Quality Improvement Authority in accordance with the ethical requirements of the Financial Reporting Council's Revised Ethical Standard 2016, and have fulfilled our other ethical responsibilities in accordance with these requirements. I believe that the audit evidence obtained is sufficient and appropriate to provide a basis for my opinions.

**Other Information**

The Board and the Accounting Officer are responsible for the other information included in the annual report. The other information comprises the information included in the annual report other than the financial statements, the parts of the Accountability Report described in the report as having been audited, and my audit certificate and report. My opinion on the financial statements does not cover the other information and I do not express any form of assurance conclusion thereon.

In connection with my audit of the financial statements, my responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or my knowledge obtained in the audit or otherwise appears to be materially misstated. If, based on the work I have performed, I conclude that there is a material misstatement of this other information, I am required to report that fact. I have nothing to report in this regard.

**Opinion on other matters**

In my opinion:

- the parts of the Accountability Report to be audited have been properly prepared in accordance with Department of Health directions made under the Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003; and
- the information given in the Performance Report and Accountability Report for the financial year for which the financial statements are prepared is consistent with the financial statements.

**Responsibilities of the Board and Accounting Officer for the financial statements**

As explained more fully in the Statement of Accounting Officer Responsibilities, the Board and the Accounting Officer are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view.

**Auditor's responsibilities for the audit of the financial statements**

My responsibility is to audit, certify and report on the financial statements in accordance with the Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003.

My objectives are to obtain evidence about the amounts and disclosures in the financial statements sufficient to give reasonable assurance that the financial statements are free from material misstatement, whether caused by fraud or error. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

A further description of my responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website www.frc.org.uk/auditorsresponsibilities. This description forms part of my certificate.

In addition, I am required to obtain evidence sufficient to give reasonable assurance that the expenditure and income recorded in the financial statements have been applied to the purposes intended by the Assembly and the financial transactions recorded in the financial statements conform to the authorities which govern them.

**Matters on which I report by exception**

I have nothing to report in respect of the following matters which I report to you if, in my opinion:

- adequate accounting records have not been kept; or
- the financial statements and the parts of the Accountability Report to be audited are not in agreement with the accounting records; or
- I have not received all of the information and explanations I require for my audit; or
- the Governance Statement does not reflect compliance with the Department of Finance's guidance.

**Report**

I have no observations to make on these financial statements.

*KJ Donnelly*
*Comptroller and Auditor General*
*Northern Ireland Audit Office*
*106 University Street*
*Belfast*
*BT7 1EU*

*11 July 2019*

**THE REGULATION AND QUALITY IMPROVEMENT AUTHORITY**

# SECTION 3

# ANNUAL ACCOUNTS

## THE REGULATION AND QUALITY IMPROVEMENT AUTHORITY

## ANNUAL ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2019

# THE REGULATION AND QUALITY IMPROVEMENT AUTHORITY

## STATEMENT of COMPREHENSIVE NET EXPENDITURE for the year ended 31 March 2019

This account summarises the expenditure and income generated and consumed on an accruals basis. It also includes other comprehensive income and expenditure, which includes changes to the values of non-current assets and other financial instruments that cannot yet be recognised as income or expenditure.

| | NOTE | 2019 £ | 2018 £ |
|---|---|---|---|
| **Income** | | | |
| Income from activities | 4.1 | - | - |
| Other Income (Excluding interest) | 4.2 | 868,375 | 907,972 |
| Deferred income | 4.3 | - | - |
| **Total operating income** | | **868,375** | **907,972** |
| | | | |
| **Expenditure** | | | |
| Staff costs | 3 | (6,040,649) | (5,994,833) |
| Purchase of goods and services | 3 | (670,792) | (678,575) |
| Depreciation, amortisation and impairment charges | 3 | (242,201) | (254,490) |
| Provision expense | 3 | - | - |
| Other expenditure | 3 | (839,543) | (797,647) |
| **Total operating expenditure** | | **(7,793,185)** | **(7,725,545)** |
| | | | |
| **Net Expenditure** | | **(6,924,810)** | **(6,817,573)** |
| | | | |
| Finance income | 4.2 | - | - |
| Finance expense | 3.2 | - | - |
| | | | |
| **Net expenditure for the year** | | **(6,924,810)** | **(6,817,573)** |
| | | | |
| Revenue Resource Limit (RRL) received from DoH | 24.1 | 6,927,213 | 6,854,398 |
| | | | |
| **Surplus/(Deficit) against RRL** | | **2,403** | **36,825** |

## OTHER COMPREHENSIVE EXPENDITURE

| | NOTE | 2019 £ | 2018 £ |
|---|---|---|---|
| **Items that will not be reclassified to net operating costs:** | | | |
| Net gain/(loss) on revaluation of property, plant & equipment | 5.1/8/5.2/8 | 288 | (357) |
| Net gain/(loss) on revaluation of intangibles | 6.1/8/6.2/8 | - | - |
| Net gain/(loss) on revaluation of financial instruments | 7/8 | - | - |
| **Items that may be reclassified to net operating costs:** | | | |
| Net gain/(loss) on revaluation of investments | | - | - |
| | | | |
| **TOTAL COMPREHENSIVE EXPENDITURE for the year ended 31 March 2019** | | **(6,924,522)** | **(6,817,930)** |

The notes on pages 80-102 form part of these accounts.

## THE REGULATION AND QUALITY IMPROVEMENT AUTHORITY

### STATEMENT of FINANCIAL POSITION as at 31 March 2019

This statement presents the financial position of RQIA. It comprises three main components: assets owned or controlled; liabilities owed to other bodies; and equity, the remaining value of the entity.

| | | 2019 | | 2018 | |
|---|---|---|---|---|---|
| | NOTE | £ | £ | £ | £ |
| **Non Current Assets** | | | | | |
| Property, plant and equipment | 5.1/5.2 | 141,120 | | 123,390 | |
| Intangible assets | 6.1/6.2 | 418,473 | | 405,901 | |
| Financial assets | 7 | - | | - | |
| Trade and other receivables | 12 | - | | - | |
| Other current assets | 12 | - | | - | |
| **Total Non Current Assets** | | | **559,593** | | **529,291** |
| **Current Assets** | | | | | |
| Assets classified as held for sale | 9 | - | | - | |
| Inventories | 10 | - | | - | |
| Trade and other receivables | 12 | 28,835 | | 62,677 | |
| Other current assets | 12 | 44,670 | | 31,359 | |
| Intangible current assets | 12 | - | | - | |
| Financial assets | 7 | - | | - | |
| Cash and cash equivalents | 11 | 11,893 | | 23,125 | |
| **Total Current Assets** | | | 85,398 | | 117,161 |
| **Total Assets** | | | **644,991** | | **646,452** |
| **Current Liabilities** | | | | | |
| Trade and other payables | 13 | (800,346) | | (913,958) | |
| Other liabilities | 13 | - | | - | |
| Intangible current liabilities | 13 | - | | - | |
| Financial liabilities | 7 | - | | - | |
| Provisions | 15 | - | | - | |
| **Total Current Liabilities** | | | (800,346) | | (913,958) |
| **Total assets less current liabilities** | | | **(155,355)** | | **(267,506)** |
| **Non Current Liabilities** | | | | | |
| Provisions | 15 | (5,900) | | - | |
| Other payables > 1 yr | 13 | - | | - | |
| Financial liabilities | 7 | - | | - | |
| **Total Non Current Liabilities** | | | (5,900) | | - |
| **Total assets less total liabilities** | | | **(161,255)** | | **(267,506)** |
| **Taxpayers' Equity and other reserves** | | | | | |
| Revaluation reserve | | 2,969 | | 2,681 | |
| SoCNE Reserve | | (164,224) | | (270,187) | |
| **Total equity** | | | **(161,255)** | | **(267,506)** |

The financial statements on pages 76-79 were approved by the Board on 4 July 2019 and were signed on its behalf by:

**Olive Macleod OBE, Chief Executive:** Olive Macleod **Professor Mary McColgan OBE, Acting Chair:** M. McColgan

The notes on pages 80-102 form part of these accounts

## THE REGULATION AND QUALITY IMPROVEMENT AUTHORITY

### STATEMENT of CASH FLOWS for the year ended 31 March 2019

The Statement of Cash Flows shows the changes in cash and cash equivalents of RQIA during the reporting period. The statement shows how RQIA generates and uses cash and cash equivalents by classifying cash flows as operating, investing and financing activities. The amount of net cash flows arising from operating activities is a key indicator of service costs and the extent to which these operations are funded by way of income from the recipients of services provided by RQIA. Investing activities represent the extent to which cash inflows and outflows have been made for resources which are intended to contribute to RQIA's future public service delivery.

| | NOTE | 2019 £ | 2018 £ |
|---|---|---|---|
| **Cash flows from operating activities** | | | |
| Net surplus after interest/Net operating expenditure | | (6,924,810) | (6,817,573) |
| Adjustments for non cash costs | | 258,202 | 268,746 |
| Decrease/(increase) in trade and other receivables | | 20,531 | 376 |
| *Less movements in receivables relating to items not passing through the NEA* | | | |
| Movements in receivables relating to the sale of property, plant & equipment | | - | - |
| Movements in receivables relating to the sale of intangibles | | - | - |
| Movements in receivables relating to finance leases | | - | - |
| Movements in receivables relating to PFI and other service concession arrangement contracts | | - | - |
| (Increase)/decrease in inventories | | - | - |
| Increase/(decrease) in trade payables | | (113,612) | 402,560 |
| *Less movements in payables relating to items not passing through the NEA* | | | |
| Movements in payables relating to the purchase of property, plant & equipment and intangibles | | (51,912) | 37,449 |
| Movements in payables relating to finance leases | | - | - |
| Movements on payables relating to PFI and other service concession arrangement contracts | | - | - |
| Use of provisions | 15 | 5,900 | - |
| **Net cash inflow/(outflow) from operating activities** | | **(6,805,701)** | **(6,108,442)** |
| **Cash flows from investing activities** | | | |
| (Purchase of property, plant & equipment) | 5 | (81,994) | (50,109) |
| (Purchase of intangible assets) | 6 | (144,610) | (12,540) |
| Proceeds of disposal of property, plant & equipment | | - | - |
| Proceeds on disposal of intangibles | | - | - |
| Proceeds on disposal of assets held for resale | | - | - |
| **Net cash outflow from investing activities** | | **(226,604)** | **(62,649)** |
| **Cash flows from financing activities** | | | |
| Grant in aid | | 7,021,073 | 6,175,956 |
| Capital element of payments - finance leases and on balance sheet (SoFP) PFI and other service concession arrangements | | - | - |
| **Net financing** | | **7,021,073** | **6,175,956** |
| **Net increase (decrease) in cash & cash equivalents in the period** | | (11,232) | 4,865 |
| **Cash & cash equivalents at the beginning of the period** | 11 | 23,125 | 18,260 |
| **Cash & cash equivalents at the end of the period** | 11 | **11,893** | **23,125** |

The notes on pages 80-102 form part of these accounts.

## THE REGULATION AND QUALITY IMPROVEMENT AUTHORITY

## STATEMENT of CHANGES in TAXPAYERS' EQUITY for the year ended 31 March 2019

This statement shows the movement in the year on the different reserves held by RQIA, analysed into 'Statement of Comprehensive Net Expenditure Reserve' (i.e. those reserves that reflect a contribution from the Department of Health). The Revaluation Reserve reflects the change in asset values that have not been recognised as income or expenditure. The SoCNE Reserve represents the total assets less liabilities of RQIA, to the extent that the total is not represented by other reserves and financing items.

| | NOTE | SoCNE Reserve £ | Revaluation Reserve £ | Total £ |
|---|---|---|---|---|
| **Balance at 31 March 2017** | | **379,211** | **3,038** | **382,249** |
| **Changes in Taxpayers Equity 2017-18** | | | | |
| Grant from DoH | | 6,175,956 | - | 6,175,956 |
| Other reserves movements including transfers | | - | - | - |
| (Comprehensive expenditure for the year) | | (6,817,573) | (357) | (6,817,930) |
| Transfer of asset ownership | | (17,281) | - | (17,281) |
| Non cash charges - auditors remuneration | 3 | 9,500 | - | 9,500 |
| **Balance at 31 March 2018** | | **(270,187)** | **2,681** | **(267,506)** |
| **Changes in Taxpayers Equity 2018-19** | | | | |
| Grant from DoH | | 7,021,073 | - | 7,021,073 |
| Other reserves movements including transfers | | - | - | - |
| (Comprehensive expenditure for the year) | | (6,924,810) | 288 | (6,924,522) |
| Transfer of asset ownership | | - | - | - |
| Non cash charges - auditors remuneration | 3 | 9,700 | - | 9,700 |
| **Balance at 31 March 2019** | | **(164,224)** | **2,969** | **(161,255)** |

The notes on pages 80-102 form part of these accounts

# THE REGULATION AND QUALITY IMPROVEMENT AUTHORITY

## NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2019

## STATEMENT OF ACCOUNTING POLICIES

### 1. Authority

These accounts have been prepared in a form determined by the Department of Health based on guidance from the Department of Finance's Financial Reporting manual (FReM) and in accordance with the requirements of Article 90(2) (a) of the Health and Personal Social Services (Northern Ireland) Order 1972 No 1265 (NI 14) as amended by Article 6 of the Audit and Accountability (Northern Ireland) Order 2003. The accounting policies follow IFRS to the extent that it is meaningful and appropriate to the Regulation and Quality Improvement Authority (RQIA). Where a choice of accounting policy is permitted, the accounting policy which has been judged to be most appropriate to the particular circumstances of RQIA for the purpose of giving a true and fair view has been selected. RQIA's accounting policies have been applied consistently in dealing with items considered material in relation to the accounts, unless otherwise stated. In line with the FReM, sponsored entities such as the RQIA which show total net liabilities, should prepare financial statements on a going concern basis. The cash required to discharge these net liabilities will be requested from the Department when they fall due, and is shown in the Statement of Changes in Taxpayers' Equity.

### 1.1 Accounting convention

These accounts have been prepared under the historical cost convention modified to account for the revaluation of property, plant and equipment.

### 1.2 Currency

These accounts are presented in UK Pounds sterling. The figures in the accounts are shown to the nearest £1.

### 1.3 Property, Plant and Equipment

Property, plant and equipment assets comprise Plant & Machinery (Equipment), Information Technology, Furniture and Fittings, and Assets Under Construction.

**Recognition**

Property, plant and equipment must be capitalised if:

- it is held for use in delivering services or for administrative purposes;
- it is probable that future economic benefits will flow to, or service potential will be supplied to, the entity;
- it is expected to be used for more than one financial year;
- the cost of the item can be measured reliably; and
- the item has cost of at least £5,000; or
- Collectively, a number of items have a cost of at least £5,000 and individually have a cost of more than £1,000, where the assets are functionally interdependent, they had broadly simultaneous purchase dates, are anticipated to have simultaneous disposal dates and are under single managerial control; or
- Items form part of the initial equipping and setting-up cost of a new building, ward or unit, irrespective of their individual or collective cost.

On initial recognition property, plant and equipment are measured at cost including any expenditure such as installation, directly attributable to bringing them into working condition. Items classified as "under construction" are recognised in the Statement of Financial Position to the extent that money has been paid or a liability has been incurred.

**Valuation of Land and Buildings**
RQIA does not own any land or buildings nor does it occupy any provided to it by DoH.

**Assets Under Construction (AUC)**
Properties in the course of construction for service or administration purposes are carried at cost, less any impairment loss. Assets are revalued and depreciation commences when they are brought into use.

**Short Life Assets**
Short life assets are not indexed. Short life is defined as a useful life of up to and including 5 years. Short life assets are carried at depreciated historic cost as this is not considered to be materially different from fair value and are depreciated over their useful life. Where estimated life of fixtures and equipment exceed 5 years, suitable indices will be applied each year and depreciation will be based on indexed amount.

**Revaluation Reserve**
An increase arising on revaluation is taken to the revaluation reserve except when it reverses an impairment for the same asset previously recognised in expenditure, in which case it is credited to expenditure to the extent of the decrease previously charged there. A revaluation decrease is recognised as an impairment charged to the revaluation reserve to the extent that there is a balance on the reserve for the asset and, thereafter, to expenditure.

**1.4 Depreciation**
Depreciation is charged to write off the costs or valuation of property, plant and equipment and similarly, amortisation is applied to intangible non-current assets, less any residual value, over their estimated useful lives, in a manner that reflects the consumption of economic benefits or service potential of the assets. Assets held under finance leases are also depreciated over the lower of their estimated useful lives and the terms of the lease. The estimated useful life of an asset is the period over which RQIA expects to obtain economic benefits or service potential from the asset. Estimated useful lives and residual values are reviewed each year end, with the effect of any changes recognised on a prospective basis. The following asset lives have been used.

| Asset Type | Asset Life |
|---|---|
| Equipment | 3 – 5 years |
| Information Technology | 3 – 5 years |
| Furniture and Fittings | 3 – 15 years |
| Intangible assets | 3 – 10 years |

**1.5 Impairment loss**
If there has been an impairment loss due to a general change in prices, the asset is written down to its recoverable amount, with the loss charged to the revaluation reserve to the extent that there is a balance on the reserve for the asset and, thereafter, to expenditure within the Statement of Comprehensive Net Expenditure. If the impairment is due to the consumption of economic benefits the full amount of the impairment is charged to the Statement of Comprehensive Net Expenditure and an amount up to the value of the impairment in the revaluation reserve is transferred to the Statement of Comprehensive Net Expenditure Reserve. Where an impairment loss subsequently reverses, the carrying amount of the asset is increased to the revised estimate of the recoverable amount but capped at the amount that would have been determined had there been no initial impairment loss.

The reversal of the impairment loss is credited firstly to the Statement of Comprehensive Net Expenditure to the extent of the decrease previously charged there and thereafter to the revaluation reserve.

### 1.6 Subsequent expenditure

Where subsequent expenditure enhances an asset beyond its original specification, the directly attributable cost is capitalised. Where subsequent expenditure which meets the definition of capital restores the asset to its original specification, the expenditure is capitalised and any existing carrying value of the item replaced is written-out and charged to operating expenses.

### 1.7 Intangible assets

Intangible assets includes any of the following held - software, licences and Information Technology. Software that is integral to the operating of hardware, for example an operating system is capitalised as part of the relevant item of property, plant and equipment. Software that is not integral to the operation of hardware, for example application software, is capitalised as an intangible asset. Expenditure on research is not capitalised: it is recognised as an operating expense in the period in which it is incurred. Internally-generated assets are recognised if, and only if, all of the following have been demonstrated:

- the technical feasibility of completing the intangible asset so that it will be available for use;
- the intention to complete the intangible asset and use it;
- the ability to sell or use the intangible asset;
- how the intangible asset will generate probable future economic benefits or service potential;
- the availability of adequate technical, financial and other resources to complete the intangible asset and sell or use it; and
- the ability to measure reliably the expenditure attributable to the intangible asset during its development.

Intangible assets, such as software licences, are normally amortised over 5 years as short life of assets.

**Recognition**

Intangible assets are non-monetary assets without physical substance, which are capable of sale separately from the rest of RQIA's business or which arise from contractual or other legal rights. Intangible assets are considered to have a finite life. They are recognised only when it is probable that future economic benefits will flow to, or service potential be provided to, RQIA; where the cost of the asset can be measured reliably. All single items over £5,000 in value must be capitalised while intangible assets which fall within the grouped asset definition must be capitalised if their individual value is at least £1,000 each and the group is at least £5,000 in value.

The amount recognised for internally-generated intangible assets is the sum of the expenditure incurred from the date of commencement of the intangible asset, until it is complete and ready for use.

Intangible assets acquired separately are initially recognised at fair value.
Following initial recognition, intangible assets are carried at fair value by reference to an active market, and as no active market currently exists depreciated replacement cost has been used as fair value.

### 1.8 Non-current assets held for sale

RQIA does not hold any non-current assets for sale.

### 1.9 Inventories

RQIA does not hold any inventories.

### 1.10 Income

Income is classified between Revenue from Contracts and Other Operating Income as assessed necessary in line with organisational activity, under the requirements of IFRS 15 and as applicable to the public sector. Judgement is exercised in order to determine whether the 5 essential criteria within the scope of IFRS 15 are met in order to define income as a contract. Income relates directly to the activities of the HSC body and is recognised when, and to the extent that a performance obligation is satisfied in a manner that depicts the transfer to the customer of the goods or services promised. Where the criteria to determine whether a contract is in existence is not met, income is classified as Other Operating Income within the Statement of Comprehensive Net Expenditure and is recognised when the right to receive payment is established.

**Grant in aid**

Funding received from other entities, including the Department of Health are accounted for as grant in aid and are reflected through the Statement of Comprehensive Net Expenditure Reserve.

### 1.11 Investments

RQIA does not have any investments.

### 1.12 Other expenses

Other operating expenses for goods or services are recognised when, and to the extent that, they have been received. They are measured at the fair value of the consideration payable.

### 1.13 Cash and cash equivalents

Cash is cash in hand and deposits with any financial institution repayable without penalty on notice of not more than 24 hours. Cash equivalents are investments that mature in 3 months or less from the date of acquisition and that are readily convertible to known amounts of cash with insignificant risk of change in value. RQIA holds no cash equivalent investments.

### 1.14 Leases

Leases are classified as finance leases when substantially all the risks and rewards of ownership are transferred to the lessee. All other leases are classified as operating leases.

**RQIA as lessee**

RQIA does not hold any Finance Leases.

Operating lease payments are recognised as an expense on a straight-line basis over the lease term. Lease incentives are recognised initially as a liability and subsequently as a reduction of rentals on a straight-line basis over the lease term.

**RQIA as lessor**

RQIA does not act as a lessor.

### 1.15 Private Finance Initiative (PFI) transactions

The RQIA has had no PFI transactions during the year.

## 1.16 Financial instruments

**Financial assets**
Financial assets are recognised on the Statement of Financial Position when RQIA becomes party to the financial instrument contract or, in the case of trade receivables, when the goods or services have been delivered. Financial assets are derecognised when the contractual rights have expired or the asset has been transferred.

Financial assets are initially recognised at fair value. IFRS 9 introduces the requirement to consider the expected credit loss model on financial assets. The measurement of the loss allowance depends upon the HSC Body's assessment at the end of each reporting period as to whether the financial instrument's credit risk has increased significantly since initial recognition, based on reasonable and supportable information that is available, without undue cost or effort to obtain. The amount of expected credit loss recognised is measured on the basis of the probability weighted present value of anticipated cash shortfalls over the life of the instrument.

**Financial liabilities**
Financial liabilities are recognised on the Statement of Financial Position when RQIA becomes party to the contractual provisions of the financial instrument or, in the case of trade payables, when the goods or services have been received. Financial liabilities are de-recognised when the liability has been discharged, that is, the liability has been paid or has expired.

Financial liabilities are initially recognised at fair value.

**Financial risk management**
IFRS 7 requires disclosure of the role that financial instruments have had during the period in creating or changing the risks a body faces in undertaking its activities. Because of the relationships with HSC Commissioners, and the manner in which they are funded, financial instruments play a more limited role within RQIA in creating risk than would apply to a non-public sector body of a similar size, therefore RQIA is not exposed to the degree of financial risk faced by business entities.

RQIA has limited powers to borrow or invest surplus funds and financial assets and liabilities are generated by day to day operational activities rather than being held to change the risks facing RQIA in undertaking activities. Therefore the HSC is exposed to little credit, liquidity or market risk.

**Currency risk**
RQIA is principally a domestic organisation with the great majority of transactions, assets and liabilities being in the UK and Sterling based. RQIA has no overseas operations. RQIA therefore has low exposure to currency rate fluctuations.

**Interest rate risk**
RQIA has limited powers to borrow or invest and therefore has low exposure to interest rate fluctuations.

**Credit risk**
Because the majority of RQIA's income comes from other public sector bodies, RQIA has low exposure to credit risk.

**Liquidity risk**
Since RQIA receives the majority of its funding through its principal Commissioner which is voted through the Assembly, it is therefore not exposed to significant liquidity risks.

## 1.17 Provisions

In accordance with IAS 37, provisions are recognised when the BSO has a present legal or constructive obligation as a result of a past event, it is probable that the BSO will be required to settle the obligation, and a reliable estimate can be made of the amount of the obligation. The amount recognised as a provision is the best estimate of the expenditure required to settle the obligation at the end of the reporting period, taking into account the risks and uncertainties.

Where a provision is measured using the cash flows estimated to settle the obligation its carrying amount is the present value of those cash flows using DoF-issued discount rates of:

| Rate | **Time period** | **Real rate** |
|---|---|---|
| Nominal | Short term (0 – 5 years) | 0.76% |
| | Medium term (5 – 10 years) | 1.14% |
| | Long term (10 - 40 years) | 1.99% |
| | Very long term (40+ years) | 1.99% |
| Inflationary | Year 1 | 2.00% |
| | Year 2 | 2.00% |
| | Into perpetuity | 2.10% |

As at 31 March 2019. Note that PES issued a combined nominal and inflation rate table to incorporate the two elements – please refer to this table as necessary, as included within issuing email of circular HSC(F) 39-2018.

The discount rate to be applied for employee early departure obligations are +0.29% % with effect from 31 March 2019. The RQIA has also disclosed the carrying amount at the beginning and end of the period, additional provisions made, amounts used during the period, unused amounts reversed during the period and increases in the discounted amount arising from the passage of time and the effect of any change in the discount rate.

When some or all of the economic benefits required to settle a provision are expected to be re-covered from a third party, the receivable is recognised as an asset if it is virtually certain that re-imbursements will be received and the amount of the receivable can be measured reliably.

Present obligations arising under onerous contracts are recognised and measured as a provision. An onerous contract is considered to exist where the BSO has a contract under which the unavoidable costs of meeting the obligations under the contract exceed the economic benefits expected to be received under it.

A restructuring provision is recognised when the BSO has developed a detailed formal plan for the restructuring and has raised a valid expectation in those affected that it will carry out the re-structuring by starting to implement the plan or announcing its main features to those affected by it.

The measurement of a restructuring provision includes only the direct expenditures arising from the restructuring, which are those amounts that are both necessarily entailed by the restructuring and not associated with on-going activities of the entity. The HSC body has also disclosed the carrying amount at the beginning and end of the period, additional provisions made, amounts used during the period, unused amounts reversed during the period and increases in the discounted amount arising from the passage of time and the effect of any change in the discount rate. RQIA had no provisions at 31 March 2018.

### 1.18 Contingencies

Under IAS 37, RQIA discloses contingent liabilities where there is a possible obligation that arises from past events and whose existence will be confirmed only by the occurrence or non-occurrence of one or more uncertain future events not wholly within the control of RQIA, or a present obligation that is not recognised because it is not probable that a payment will be required to settle the obligation or the amount of the obligation cannot be measured sufficiently reliably. A contingent liability is disclosed unless the possibility of a payment is remote.

A contingent asset is a possible asset that arises from past events and whose existence will be confirmed by the occurrence or non-occurrence of one or more uncertain future events not wholly within the control of RQIA. A contingent asset is disclosed where an inflow of economic benefits is probable.

Where the time value of money is material, contingencies are disclosed at their present value. In addition to contingent liabilities disclosed in accordance with IAS 37, RQIA should disclose for Assembly reporting and accountability purposes certain statutory and non-statutory contingent liabilities where the likelihood of a transfer of economic benefit is remote, but which have been reported to the Assembly in accordance with the requirements of Managing Public Money Northern Ireland.

### 1.19 Employee benefits

**Short-term employee benefits**
Under the requirements of IAS 19: Employee Benefits, staff costs must be recorded as an expense as soon as the organisation is obligated to pay them. This includes the cost of any untaken leave that has been earned at the year end. This cost has been determined using individual's salary costs applied to their unused leave balances determined from a report of the unused annual leave balance as at 31 March 2019. Untaken flexi leave is estimated to be immaterial to RQIA and has not been included.

**Retirement benefit costs**
RQIA participates in the HSC Superannuation Scheme. Under this multi-employer defined benefit scheme both RQIA and employees pay specified percentages of pay into the scheme and the liability to pay benefit falls to the DoH. RQIA is unable to identify its share of the underlying assets and liabilities in the scheme on a consistent and reliable basis. Further information regarding the HSC Superannuation Scheme can be found in the HSC Superannuation Scheme Statement in the Departmental resource Account for the Department of Health. The costs of early retirements are met by RQIA and charged to the Statement of Comprehensive Net Expenditure at the time RQIA commits itself to the retirement.

As per the requirements of IAS 19, full actuarial valuations by a professionally qualified actuary are required at intervals not exceeding four years. The actuary reviews the most recent actuarial valuation at the Statement of Financial Position date and updates it to reflect current conditions.

The 2017 valuation for the HSC Pension scheme updated to reflect current financial conditions (and a change in financial assumption methodology) will be used in the 2018-19 accounts

### 1.20 Reserves

**Statement of Comprehensive Net Expenditure Reserve**
Accumulated surpluses are accounted for in the Statement of Comprehensive Net Expenditure Reserve.

**Revaluation Reserve**
The Revaluation Reserve reflects the unrealised balance of cumulative indexation and revaluation adjustments to assets other than donated assets.

### 1.21 Value Added Tax

RQIA, as a non-departmental public body, cannot recover VAT incurred through the central VAT agreement.

VAT is charged to the relevant expenditure category or included in the capitalised purchase cost of fixed assets.

### 1.22 Third party assets

RQIA does not hold material assets belonging to third parties.

### 1.23 Government Grants

The note to the financial statements distinguishes between grants from UK government entities and grants from European Union.

### 1.24 Losses and Special Payments

Losses and special payments are items that the Assembly would not have contemplated when it agreed funds for the health service or passed legislation. By their nature they are items that ideally should not arise. They are therefore subject to special control procedures compared with the generality of payments. They are divided into different categories, which govern the way that individual cases are handled.

Losses and special payments are charged to the relevant functional headings in expenditure on an accruals basis, including losses which would have been made good through insurance cover had HSC bodies not been bearing their own risks (with insurance premiums then being included as normal revenue expenditure). However, the note on losses and special payments is compiled directly from the losses and compensations register which reports amounts on an accruals basis with the exception of provisions for future losses.

### 1.25 Accounting Standards that have been issued but have not yet been adopted

Under IAS 8 there is a requirement to disclose those standards issued but not yet adopted.

IFRS 16 Leases replaces IAS 17 Leases and is effective with EU adoption from 1 January 2019. In line with the requirements of the FReM, IFRS 16 will be implemented, as interpreted and adapted for the public sector, with effect from 1 April 2020.

The IASB issued new and amended standards (IFRS 10, IFRS 11 & IFRS 12) that affect the consolidation and reporting of subsidiaries, associates and joint ventures. These standards were effective with EU adoption from 1 January 2014.

Accounting boundary IFRS' are currently adapted in the FReM so that the Westminster departmental accounting boundary is based on ONS control criteria, as designated by Treasury. A similar review in NI, which will bring NI departments under the same adaptation, has been carried out and the resulting recommendations were agreed by the Executive in December 2016. With effect from 2020-21, the accounting boundary for departments will change and there will also be an impact on departments around the disclosure requirements under IFRS 12. ALBs apply IFRS in full and their consolidation boundary may change as a result of the new Standards

Management consider that any other new accounting policies issued but not yet adopted are unlikely to have a significant impact on the accounts in the period of the initial application.

## NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2019

### NOTE 2 ANALYSIS OF NET EXPENDITURE BY SEGMENT

The core business and strategic purpose of RQIA is to monitor the availability, organisation and standards of health and social care services in Northern Ireland and act as a driving force in promoting improvements in the quality of these services. RQIA's Board acts as the chief operating decision maker, receives financial information on RQIA as a whole, and makes decision on that basis. RQIA therefore reports on a single operational segment basis.

### NOTE 3 EXPENDITURE

| | 2019 | 2018 |
|---|---|---|
| **Operating expenses are as follows:-** | **£** | **£** |
| Staff costs:[1] | | |
| Wages and Salaries | 4,974,074 | 4,901,362 |
| Social security costs | 438,616 | 455,921 |
| Other pension costs | 627,959 | 637,550 |
| Supplies and services – general | 37,477 | 37,491 |
| Establishment | 219,375 | 227,480 |
| Premises | 172,150 | 187,839 |
| Bad Debts | 303 | - |
| Rentals under operating leases | 253,250 | 228,332 |
| Miscellaneous | 131,798 | 111,295 |
| Training | 46,666 | 28,445 |
| ICT Maintenance | 80,541 | 41,464 |
| ICT Hardware and Software | 33,912 | 41,649 |
| Staff Substitution | 91,211 | 157,441 |
| BSO Services | 427,651 | 400,530 |
| **Total Operating Expenses** | 7,534,983 | 7,456,799 |
| | | |
| **Non cash items** | | |
| Depreciation | 58,251 | 79,056 |
| Amortisation | 183,950 | 175,434 |
| Loss on disposal Information Technology (IT) | 6,301 | 4,756 |
| Auditors Remuneration | 9,700 | 9,500 |
| **Total non cash items** | 258,202 | 268,746 |
| | | |
| **Total** | **7,793,185** | **7,725,545** |

[1] Further detailed analysis of staff costs is located in the Staff Report on page 67 within the Accountability Report.

During the year the RQIA purchased no non audit services from its external auditor (NIAO) (2017/18: £Nil).

## NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2019

### NOTE 4 INCOME

#### 4.1 Income from Activities

The RQIA did not receive income from activities in 2018-19 and 2017-18.

#### 4.2 Other Operating Income

| | 2019 | 2018 |
|---|---|---|
| | £ | £ |
| Other income from non-patient services | 2,254 | 545 |
| Other income from fees levied on registered bodies* | 866,121 | 907,427 |
| **TOTAL INCOME** | **868,375** | **907,972** |

#### 4.3 Deferred income

The RQIA did not receive any deferred income in 2018-19 or 2017-18

* New services or those where there is a change of ownership are exempt from paying an annual fee until the first anniversary of their registration.

## NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2019

### NOTE 5.1 Property, plant and equipment - year ended 31 March 2019

| | Assets under Construction £ | Plant and Machinery (Equipment) £ | Information Technology (IT) £ | Furniture and Fittings £ | Total £ |
|---|---|---|---|---|---|
| Cost or Valuation | | | | | |
| At 1 April 2018 | **-** | **35,599** | **302,720** | **106,021** | **444,340** |
| Indexation | - | - | - | 1,630 | 1,630 |
| Additions | - | - | 81,994 | - | 81,994 |
| Transfers | - | - | - | - | - |
| Disposals | - | - | (92,677) | - | (92,677) |
| At 31 March 2019 | **-** | **35,599** | **292,037** | **107,651** | **435,287** |
| Depreciation | | | | | |
| At 1 April 2018 | **-** | **35,599** | **206,037** | **79,314** | **320,950** |
| Indexation | - | - | - | 1,342 | 1,342 |
| Transfers | | - | - | - | - |
| Disposals | - | - | (86,376) | - | (86,376) |
| Provided during the year | - | - | 47,608 | 10,643 | 58,251 |
| At 31 March 2019 | **-** | **35,599** | **167,269** | **91,299** | **294,167** |

| **Carrying Amount** | Assets under Construction £ | Plant and Machinery (Equipment) £ | Information Technology (IT) | Furniture and Fittings £ | Total £ |
|---|---|---|---|---|---|
| At 31 March 2019 | - | - | **124,768** | **16,352** | **141,120** |
| At 31 March 2018 | **-** | **-** | **96,683** | **26,707** | **123,390** |
| **Asset financing** | | | | | |
| Owned | - | - | 124,768 | 16,352 | 141,120 |
| **Carrying Amount** At 31 March 2019 | **-** | **-** | **124,768** | **16,352** | **141,120** |
| **Asset financing** | | | | | |
| Owned | - | - | 96,683 | 26,707 | 123,390 |
| **Carrying Amount** At 31 March 2018 | - | - | **96,683** | **26,707** | **123,390** |

Any fall in value through negative indexation or revaluation is shown as impairment.

In terms of asset financing, RQIA owns all assets carried. None of RQIA's assets were purchased through finance lease, PFI or other service concession arrangements.

All of RQIA assets are funded through a capital allocation from DoH.

## NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2019

### NOTE 5.2 Property, plant and equipment - year ended 31 March 2018

| | Assets under Construction £ | Plant and Machinery (Equipment) £ | Information Technology (IT) £ | Furniture and Fittings £ | Total £ |
|---|---|---|---|---|---|
| **Cost or Valuation** | | | | | |
| At 1 April 2017 | **-** | **35,599** | **377,969** | **107,312** | **520,880** |
| Indexation | - | - | - | (1,291) | (1,291) |
| Additions | - | - | - | - | - |
| Transfers | - | - | (31,247) | - | (31,247) |
| Disposals | - | - | (44,002) | - | (44,002) |
| At 31 March 2018 | **-** | **35,599** | **302,720** | **106,021** | **444,340** |
| **Depreciation** | | | | | |
| At 1 April 2017 | **-** | **35,599** | **190,892** | **69,549** | **296,040** |
| Indexation | - | - | - | (934) | (934) |
| Transfers | | - | (13,966) | - | (13,966) |
| Disposals | - | - | (39,246) | - | (39,246) |
| Provided during the year | - | - | 68,357 | 10,699 | 79,056 |
| At 31 March 2018 | **-** | **35,599** | **206,037** | **79,314** | **320,950** |

| **Carrying Amount** | Assets under Construction £ | Plant and Machinery (Equipment) £ | Information Technology (IT) | Furniture and Fittings £ | Total £ |
|---|---|---|---|---|---|
| At 31 March 2018 | **-** | **-** | **96,683** | **26,707** | **123,390** |
| At 31 March 2017 | **-** | **-** | **187,077** | **37,763** | **224,840** |

| **Asset Financing** | | | | | |
|---|---|---|---|---|---|
| Owned | **-** | **-** | **96,683** | **26,707** | **123,390** |
| **Carrying Amount** At 31 March 2018 | **-** | **-** | **96,683** | **26,707** | **123,390** |

| **Asset Financing** | | | | | |
|---|---|---|---|---|---|
| Owned | **-** | **-** | **187,077** | **37,763** | **224,840** |
| **Carrying Amount** At 1 April 2017 | **-** | **-** | **187,077** | **37,763** | **224,840** |

## NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2019

### NOTE 6.1 Intangible assets - year ended 31 March 2019

| | Software Licenses £ | Information Technology £ | Asset under Construction £ | Total £ |
|---|---|---|---|---|
| **Cost or Valuation** | | | | |
| At 1 April 2018 | **119,466** | **814,546** | **25,200** | **959,212** |
| Additions | - | - | 196,522 | 196,522 |
| Reclassification | - | - | - | - |
| Transfers | - | 221,722 | (221,722) | - |
| | - | - | - | - |
| At 31 March 2019 | **119,466** | **1,036,268** | **-** | **1,155,734** |
| **Depreciation** | | | | |
| At 1 April 2018 | **98,905** | **454,406** | - | **553,311** |
| Provided during the year | 12,525 | 171,425 | - | 183,950 |
| At 31 March 2019 | **111,430** | **625,831** | **-** | **737,261** |

| **Carrying Amount** | Software Licenses £ | Information Technology £ | Asset under Construction £ | Total £ |
|---|---|---|---|---|
| At 31 March 2019 | **8,036** | **410,437** | **-** | **418,473** |
| At 31 March 2018 | **20,561** | **360,140** | **25,200** | **405,901** |
| **Asset Financing** | | | | |
| Owned | 8,036 | 410,437 | - | 418,473 |
| **Carrying Amount** At 31 March 2019 | **8,036** | **410,437** | **-** | **418,473** |
| **Asset Financing** | | | | |
| Owned | 20,561 | 360,140 | 25,200 | 405,901 |
| **Carrying Amount** At 31 March 2018 | **20,561** | **360,140** | **25,200** | **405,901** |

Any fall in value through negative indexation or revaluation is shown as impairment.

In terms of asset financing, RQIA owns all assets carried. None of the RQIA's assets were purchased through finance lease, PFI or other service concession arrangements.

All of RQIA assets are funded through a capital allocation from DoH.

## THE REGULATION AND QUALITY IMPROVEMENT AUTHORITY

## NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2019

### NOTE 6.2 Intangible assets - year ended 31 March 2018

| | Software Licenses £ | Information Technology £ | Asset under Construction £ | Total £ |
|---|---|---|---|---|
| **Cost or Valuation** | | | | |
| At 1 April 2017 | **119,466** | **814,546** | - | **934,012** |
| Additions | - | - | 25,200 | 25,200 |
| Transfers | - | - | - | - |
| | - | - | - | - |
| At 31 March 2018 | **119,466** | **814,546** | **25,200** | **959,212** |
| **Depreciation** | | | | |
| At 1 April 2017 | **86,380** | **291,497** | - | **377,877** |
| Provided during the year | 12,525 | 162,909 | - | 175,434 |
| At 31 March 2018 | **98,905** | **454,406** | - | **553,311** |

| **Carrying Amount** | Software Licenses £ | Information Technology £ | Asset under Construction £ | Total £ |
|---|---|---|---|---|
| At 31 March 2019 | **20,561** | **360,140** | **25,200** | **405,901** |
| At 31 March 2018 | **33,086** | **523,049** | - | **556,135** |
| **Asset Financing** | | | | |
| Owned | 20,561 | 360,140 | 25,200 | 405,901 |
| **Carrying Amount** At 31 March 2018 | **20,561** | **360,140** | **25,200** | **405,901** |
| **Asset Financing** | | | | |
| Owned | 33,086 | 523,049 | - | 556,135 |
| **Carrying Amount** At 31 March 2017 | **33,086** | **523,049** | **-** | **556,135** |

## NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2019

### NOTE 7 FINANCIAL INSTRUMENTS

As the cash requirements of RQIA are met through Grant-in-Aid provided by the Department of Health, financial instruments play a more limited role in creating and managing risk than would apply to a non-public sector body.

The majority of financial instruments relate to contracts to buy non-financial items in line with RQIA's expected purchase and usage requirements and RQIA is therefore exposed to little credit, liquidity or market risk.

### NOTE 8 IMPAIRMENTS

RQIA had no impairments in 2018-19 or 2017-18.

### NOTE 9 ASSETS CLASSIFIED AS HELD FOR SALE

RQIA did not hold any assets classified as held for sale at either 31 March 2019 or 31 March 2018.

### NOTE 10 INVENTORIES

RQIA did not hold any inventories for resale at either 31 March 2019 or 31 March 2018.

### NOTE 11 CASH AND CASH EQUIVALENTS

| | 2019 | 2018 |
|---|---|---|
| | £ | £ |
| Balance at 1 April | 23,125 | 18,260 |
| Net change in cash and cash equivalents | (11,232) | 4,865 |
| **Balance at 31 March** | **11,893** | **23,125** |

| **The following balances at 31 March were held at** | **2019** | **2018** |
|---|---|---|
| | £ | £ |
| Commercial Banks and cash in hand | 11,893 | 23,125 |
| **Balance at 31 March** | **11,893** | **23,125** |

The bank account is operated by Business Services Organisation (BSO) on behalf of RQIA.

## NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2019

### NOTE 12 TRADE RECEIVABLES, FINANCIAL AND OTHER ASSETS

| | 2019<br>£ | 2018<br>£ |
|---|---|---|
| **Amounts falling due within one year** | | |
| Trade receivables | 13,273 | 23,318 |
| Other receivables - not relating to fixed assets | 2,899 | - |
| Other receivables | 12,663 | 39,359 |
| **TOTAL TRADE AND OTHER RECEIVABLES** | **28,835** | **62,677** |
| | | |
| Prepayments | 44,670 | 31,359 |
| Accrued income | - | - |
| **TOTAL OTHER CURRENT ASSETS** | **44,670** | **31,359** |
| | | |
| **TOTAL RECEIVABLES AND OTHER CURRENT ASSETS** | **73,505** | **94,036** |

The balances are net of a provision for bad debts of £Nil (2018/19: £Nil).

### NOTE 13 TRADE PAYABLES, FINANCIAL AND OTHER LIABILITIES

| | 2019<br>£ | 2018<br>£ |
|---|---|---|
| **Amounts falling due within one year** | | |
| Other taxation and social security | 205,451 | - |
| Trade capital payables – property, plant and equipment and intangibles | 77,112 | 25,200 |
| Trade revenue payables | 517,464 | 312,625 |
| Payroll payables | 164 | 248,390 |
| BSO payables | 155 | 5,335 |
| Other payables | - | 322,408 |
| **Trade and other payables** | **800,346** | **913,958** |
| | | |
| **Total payables falling due within one year** | **800,346** | **913,958** |
| | | |
| **Amounts falling due after more than one year** | - | - |
| **Total non current other payables** | - | - |
| | | |
| **TOTAL TRADE PAYABLES AND OTHER CURRENT LIABILITIES** | **800,346** | **913,958** |

## NOTE 14 PROMPT PAYMENT POLICY

### 14.1 Public Sector Payment Policy - Measure of Compliance

The Department requires that RQIA pay their non HSC trade creditors in accordance with applicable terms and appropriate Government Accounting guidance. RQIA's payment policy is consistent with applicable terms and appropriate Government Accounting guidance and its measure of compliance is:

| | 2019 Number | 2019 Value £ | 2018 Number | 2018 Value £ |
|---|---|---|---|---|
| Total bills paid | 1,111 | 2,983,601 | 1,133 | 2,731,632 |
| Total bills paid within 30 day target | 1,058 | 2,914,913 | 1,077 | 2,688,508 |
| **% of bills paid within 30 day target** | **95%** | **98%** | **95%** | **98%** |
| Total bills paid within 10 day target | 897 | 2,486,606 | 884 | 2,466,455 |
| **% of bills paid within 10 day target** | **81%** | **83%** | **78%** | **90%** |

### 14.2 The Late Payment of Commercial Debts Regulations 2002

There was no interest payable arising from claims made by businesses under this legislation.

## THE REGULATION AND QUALITY IMPROVEMENT AUTHORITY

## NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2019

### NOTE 15 PROVISIONS FOR LIABILITIES AND CHARGES – 2019

| | Pensions relating to former directors | Pensions relating to other staff | Clinical negligence | CSR restructuring | Other | 2019 |
|---|---|---|---|---|---|---|
| | £ | £ | £ | £ | £ | £ |
| Balance at 1 April 2018 | - | - | - | - | - | - |
| Provided in year | - | - | 5,900 | - | - | 5,900 |
| (Provisions not required written back) | - | - | - | - | - | - |
| (Provisions utilised in the year) | - | - | - | - | - | - |
| Cost of borrowing (unwinding of discount) | - | - | - | - | - | - |
| **At 31 March 2019** | **-** | **-** | **5,900** | **-** | **-** | **5,900** |

| **Comprehensive Net Expenditure Account charges** | **2019** | **2018** |
|---|---|---|
| | **£** | **£** |
| Arising during the year | 5,900 | - |
| Reversed unused | - | - |
| Cost of borrowing (unwinding of discount) | - | - |
| **Total charge within Operating expenses** | **5,900** | **-** |

**Analysis of expected timing of discounted flows**

| | Pensions relating to former directors | Pensions relating to other staff | Clinical negligence | CSR restructuring | Other | 2019 |
|---|---|---|---|---|---|---|
| | £ | £ | £ | £ | £ | £ |
| Not later than one year | - | - | - | - | - | - |
| Later than one year and not later than five years | - | - | 5,900 | - | - | 5,900 |
| Later than five years | - | - | - | - | - | - |
| **At 31 March 2019** | | **-** | **5,900** | **-** | **-** | **5,900** |

RQIA did not require any provisions in 2017/18.

## NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2019

### NOTE 16 CAPITAL COMMITMENTS

| | 2019<br>£ | 2018<br>£ |
|---|---|---|
| **Contracted capital commitments at 31 March otherwise not included in these financial statements** | | |
| Property, plant & equipment | - | - |
| Intangible assets | - | 256,804 |
| | - | 256,804 |

RQIA had no capital commitments at 31 March 2019. The contracted capital commitment £256,804 at 31 March 18 relates exclusively to the Mental Health & Learning Disability information system.

### NOTE 17 COMMITMENTS UNDER LEASES

#### 17.1 Finance Leases

RQIA had no finance leases at either 31 March 2019 or 31 March 2018

#### 17.2 Operating Leases

Total future minimum lease payments under operating leases are given in the table below for each of the following periods.

| **Obligations under operating leases comprise** | 2019<br>£ | 2018<br>£ |
|---|---|---|
| **Buildings** | | |
| Not later than one year | 243,390 | 243,390 |
| Later than one year but not later than five years | 227,033 | 470,423 |
| Later than five years | - | - |
| | **470,423** | **713,813** |
| **Other** | | |
| Not later than 1 year | - | 371 |
| Later than 1 year and not later than 5 years | - | - |
| Later than 5 years | - | - |
| | **-** | **-** |

#### 17.3 Commitments under Lessor Agreements - Operating Leases

RQIA did not act as a lessor at either 31 March 2019 or 31 March 2018.

# THE REGULATION AND QUALITY IMPROVEMENT AUTHORITY

## NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2019

### NOTE 18 COMMITMENTS UNDER PFI CONTRACTS AND OTHER SERVICE CONCESSION ARRANGEMENTS

**18.1 Off balance sheet PFI contracts and other service concession arrangements.**

RQIA had no commitments under PFI and other concession arrangement contracts at 31 March 2019 or 31 March 2018.

**18.2 On balance sheet (SoFP) PFI Schemes**

RQIA had no on balance sheet (SoFP) PFI and other service concession arrangements schemes at 31 March 2019 or 31 March 2018.

### NOTE 19 OTHER FINANCIAL COMMITMENTS

RQIA did not have any other financial commitments at 31 March 2019 or 31 March 2018

### NOTE 20 FINANCIAL GUARANTEES, INDEMNITIES AND LETTERS OF COMFORT

Because of the relationship with HSC Commissioners, and the manner in which RQIA is funded, financial instruments play a more limited role than would apply to a non-public sector body of a similar size, therefore RQIA is not exposed to the degree of risk faced by business entities. RQIA has no powers to borrow or invest surplus funds and financial assets and liabilities are generated by day to day operational activities rather than being held to change the risks facing RQIA in undertaking activities. Therefore RQIA is exposed to little credit, liquidity or market risk.

RQIA did not have any financial instruments at either 31 March 2019 or 31 March 2018.

### NOTE 21 CONTINGENT LIABILITIES.

The RQIA did not have any quantifiable contingent liabilities at 31 March 2019 or 31 March 2018.

### NOTE 22 RELATED PARTY TRANSACTIONS

RQIA is an arm's length body of the Department of Health and as such the Department is a related party.

During the 2018-19 year RQIA has had various material transactions with the DoH and with other entities for which the DoH is regarded as the parent department, particularly with the Business Services Organisation (BSO) which provides financial, human resources, procurement, legal, IT and corporate services to RQIA through Service Level Agreements.

During the year, none of the board members, members of the key management staff or other related parties have undertaken any material transactions with RQIA.

## NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2019

### NOTE 23 THIRD PARTY ASSETS

RQIA held no assets at either 31 March 2019 or 31 March 2018 belonging to third parties.

### NOTE 24 Financial Performance Targets

#### 24.1 Revenue Resource Limit

**RQIA is given a Revenue Resource Limit which it is not permitted to overspend.**

The Revenue Resource Limit for RQIA is calculated as follows:

| | 2019 Total £ | 2018 Total £ |
|---|---|---|
| DoH (excludes non cash) | 6,663,111 | 6,585,652 |
| Non cash RRL (from DoH) | 264,102 | 268,746 |
| **Total Revenue Resource Limit to Statement of Comprehensive Net Expenditure** | **6,927,213** | **6,854,398** |

#### 24.2 Capital Resource Limit

**RQIA is given a Capital Resource Limit (CRL) which it is not permitted to overspend.**

| | 2019 £ | 2018 £ |
|---|---|---|
| Gross capital expenditure by RQIA | 278,516 | 25,200 |
| (Receipts from sales of fixed assets) | - | - |
| Net capital expenditure | 278,516 | 25,200 |
| Capital Resource Limit | 316,304 | 25,200 |
| Overspend/(Underspend) against CRL | (37,788) | - |

### 24.3 Financial Performance Targets

RQIA is required to ensure that it breaks even on an annual basis by containing its net expenditure to within +/-0.25% of RRL or £20,000, whichever is greater.

| | 2018-19 £ | 2017-18 £ |
|---|---|---|
| Net Expenditure | (6,924,810) | (6,817,573) |
| RRL | 6,927,213 | 6,854,398 |
| Surplus/(Deficit) against RRL | 2,403 | 36,825 |
| Break Even cumulative position (opening) | 24,804 | (12,021) |
| Break Even Cumulative position (closing) | 27,207 | 24,804 |

**Materiality Test:**

| | 2018-19 % | 2017-18 % |
|---|---|---|
| Break Even in year position as % of RRL | 0.03% | 0.54% |
| Break Even cumulative position as % of RRL | 0.39% | 0.36% |

RQIA did meet its requirements to contain net resource outturn within +/-0.25% of RRL or £20,000, whichever is greater.

### NOTE 25 EVENTS AFTER THE REPORTING PERIOD

There are no events after the reporting period having material effect on the accounts.

### DATE OF AUTHORISED ISSUE

The Accounting Officer authorised these financial statements for issue on 11 July 2019.

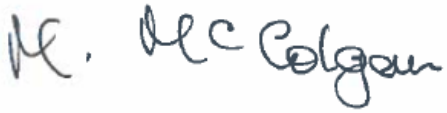
**ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2019**

**CERTIFICATES OF ACTING CHAIRMAN AND CHIEF EXECUTIVE**

I certify that the annual accounts set out in the financial statements and notes to the accounts (pages 76-102) which I am required to prepare on behalf of the Regulation and Quality Improvement Authority have been compiled from and are in accordance with the accounts and financial records maintained by the Regulation and Quality Improvement Authority and with the accounting standards and policies for HSC bodies approved by the DoH.

**Olive Macleod OBE**
**Chief Executive**
**4 July 2019**

I certify that the annual accounts set out in the financial statements and notes to the accounts (pages 76-102) as prepared in accordance with the above requirements have been submitted to and duly approved by RQIA's Board.



**Professor Mary McColgan OBE**
**Acting Chair**
**4 July 2019**

**APPENDIX 1**

**Progress against RQIA's Strategic Themes**

| STRATEGIC THEME 1<br><br>Encourage quality improvement in health and social care services | |
|---|---|
| **Action** | **Performance** |
| **Action 1.1**<br>We will lead an independent assurance process overseeing the sustainable implementation of the recommendations of the report of the Inquiry into Hyponatraemia-Related Deaths. | The independent assurance workstream is chaired by RQIA Chief Executive and co-chaired by the Director of Assurance. 60% of workstreams have presented their work plan to date to the assurance group. |
| **Action 1.2**<br>We will produce our first annual summary of the quality of services we inspected, audited and reviewed in 2017/18. | A self-service state of the nation reporting is now available by service type. A report for dental services has been created using this information and shared with Board members. |
| **Action 1.3**<br>We will implement the steps outlined in our action plan arising from our internal review of steps taken in respect of Dunmurry Manor Care Home and consider recommendations made by the Commissioner in respect of actions arising for RQIA in the report of his investigation | Many of these actions have been subsumed into the review of inspection methodology The Review of Inspection Methodology Programme was agreed at the March 2019 RQIA Board meeting, and the first Project Board meeting will be held on 22 May 2019. Background research is underway and the first three elements to be progressed are improved report formats, the use of information to inform scheduling and decision-making.<br><br>The Dunmurry Manor Care Home Action Plan remains in place in the Assurance Directorate with fourteen actions completed to date. |
| **Action 1.4**<br>Where we identify gaps in the quality of services in care homes, we will support improvement, for example by providing or signposting to best practice guidance | Three Medicines Management Workshops to Care Home Providers were delivered in partnership with the NICE Implementation Facilitator for Northern Ireland. We continue to work seek opportunities to work with the NICE Implementation Facilitator for NI to increase awareness of NICE resources for the regulated sector.<br><br>The information team is working to analyse requirements and recommendations a view to ascertaining key areas in which to focus for future projects.<br><br>Providers have been notified that links are available on our website to IDDSI in relation to Adult Swallowing Difficulties. |

| STRATEGIC THEME 2<br><br>Use sources of information effectively | |
|---|---|
| **Action** | **Performance** |
| **Action 2.1**<br>We will develop and quality assure a range of relevant risk factors to inform the targeting of resources to nursing and residential home inspections. | NI Ambulance Service (NIAS) data and Hospital Admission Data have been evaluated and summary reports produced.<br><br>The NIAS data has been used to produce a stand-alone report with analysis of the ambulance calls from nursing & residential homes during 2017/18. This has been shared with the HSC Trusts as a joint NIAS-RQIA publication.<br><br>Information team will meet with the Care Homes team to discuss what information extracted from the NIAS data will best serve their intelligence needs. Once agreed, work will commence to establish a regular process for receipt of the data and to explore the possibility of recording on iConnect.<br><br>There are a number of data quality issues with the hospital admission data and as such quality assurance is ongoing.<br><br>Whilst an initial extract of data from the GP NHAIS system has been obtained, unfortunately there were a number of concerns over the data quality. As such we are not in a position to use the data at this stage. However, we are continuing to review the data, and other alternative options are also being explored.<br><br>A preliminary analysis of RADaR risk scores was presented at an inspector workshop on 5 November 2018. Data collection will continue in 2019-20 with the database having been updated and developed further to also allow for recording of outcomes of the 3 monthly dynamic review element of RADaR. |
| **Action 2.2**<br>We will ensure information collected centrally within RQIA is fit for purpose and delivers a consistently high standard of timely and appropriate analysis. | The self-service reporting template is now in use within the Nursing, Residential and Independent Healthcare teams. The report will be introduced to the Children's Team in Quarter 1, 2019/20<br><br>A 'State of the Nation' report has been developed and tested, and will be introduced to teams in April/May 2019. This report is service type specific and will provide information on registrations, inspections, notifications and areas of improvement in services over a 5 year period.<br><br>In addition to iConnect dashboards, a self-validation report will be developed in 2019/20 to enable staff to identify errors recorded on iConnect, and information outstanding or missing. This report is expected to be completed by the end of Quarter 2 2019/20. |
| **Action 2.3**<br>We will publish an annual summary of high level statistical information in relation to the regulatory activities carried out by RQIA. The publication will be in line with official statistics guidance and as such we will seek national statistics accreditation. | The summary report has been collated by the information team and is currently undergoing final formatting with the communications team. It is anticipated to be finalised by the end of May 2019.<br><br>A summary report of RQIA regulatory activity was also completed by the end of Quarter 4 in relation to the completion of our regulatory requirements. 100% of our inspections were completed at end of Q4. |

| STRATEGIC THEME 2<br><br>Use sources of information effectively | |
|---|---|
| **Action** | **Performance** |
| **Action 2.4**<br>We will ensure that the work of the Information Team is in line with the Northern Ireland Statistics and Research Agency (NISRA) and Department of Health standards. | The RQIA Information Team Business Plan has been incorporated within the NISRA DoH Business Plan.<br><br>Refresher training in the National Statistics Code of Practice has been undertaken by the NISRA statistician/Head of Information and disseminated to the team. |

| STRATEGIC THEME 3<br><br>Engage and involve service users and stakeholders | |
|---|---|
| **Action** | **Performance** |
| **Action 3.1**<br>We will increase the profile of RQIA with the public. | A number of questions in relation to the public's perception of RQIA's role and responsibilities were incorporated in to the (NISRA) Continuous Household Survey during 2017/18 and will be repeated in 2019/20.<br><br>Results from the NISRA Survey were received at the end of September, they show that 32% of people surveyed were aware of RQIA, 27% were aware of RQIA's registration and inspection of HSC services function, 22% were aware of RQIA's responsibilities in relation to people with mental ill health or learning disabilities and 24% were aware of RQIA's responsibilities for carrying out investigations/reviews of HSC services.<br><br>Further analysis by sex, age group and geographical areas has also been analysed.<br><br>A stakeholder sentiment analysis was conducted on behalf of RQIA which has facilitated monitoring of the communication strategy. |
| **Action 3.2**<br>We will launch a membership scheme to involve service users, families and carers in our work. | The Membership Scheme was launched on 7 June 2018. During Quarter 1 we asked for volunteers to join the scheme with a view to an event or series of events in the autumn to co-produce terms of reference and a work-plan for the group.<br><br>At 31 December 2018, 71 people had signed up to RQIA's membership scheme. In Quarter 3 members will be invited to attend focus groups to develop and co-produce terms of reference and a work-plan for the group. This may include developing accessible information and guidance for members of the public; accessible report formats; and seeking views on other areas/issues that we should focus upon.<br><br>During quarter 4, held its inaugural with the Membership Scheme forum, where we discussed how engage the public in our work; improve the accessibility of our reports to ensure they help to support the public when making choices about health and social care services; and how we can improve our website |

| STRATEGIC THEME 3<br><br>Engage and involve service users and stakeholders | |
|---|---|
| **Action** | **Performance** |
| **Action 3.3**<br>We will actively develop partnerships with academia and service improvers to enhance our processes and procedures. | RQIA has been engaging with Professor Brian Taylor (Ulster University), on the development and implementation of 'RADaR'. RQIA delivered a presentation on RADaR at the University of Ulster DARE Conference, on 3 July.<br><br>RQIA has also met with representatives from the Association for Real Change (ARC), Independent Health and Care Providers (IHCP) for the purposes of information sharing and planning partnership working events.<br><br>RQIA supported ARC at an event for registered Managers on 27 November focusing on monitoring quality across a range of social care settings.<br><br>A training programme on rights of children has been developed with Queens University Belfast and the RQIA Children's Team which has been delivered in November.<br><br>In Quarter 2, RQIA facilitated one week placement for two open university student nurses, 23 – 27 July 18. As part of this placement, two dental inspections were completed with student nurses involvement, 25 and 26 July 18.<br><br>RQIA participates in HSC training days (to include infection prevention and control link nurse study days, Band 6 and 7 leadership study days). At the end of Quarter 3, four presentations were given, two to the Belfast (26 September 18, 21 November 2018) and one each to Northern (25 May 2018) and Southern Trust (25 September 2018).<br><br>We contributed to five workshops with the HSC Quality Improvement Alliance (QIA) to support care home transformation, |
| **Action 3.4**<br>We will work collaboratively to report on the lived experience of users of health and social care. | In Quarter 3 RQIA engaged with the Voice of Young People in Care organisation (VOYPIC) to increase user involvement in children's homes inspections. Currently VOYPIC are preparing a plan which will include the recruitment of an intern who will oversee the training and induction of a team of ex care experienced young people (sessional workers) to assist in the inspection of children's services.<br><br>In Quarter 4, RQIA agreed a proposal to work with VOYPIC and work is currently underway to recruit an intern.<br><br>We will avail of information gathered by the 10,000 voices project relating to lived experience in Nursing Homes. This will be reported on when it is available. |
| **Action 3.5**<br>We will increase the involvement of lay assessors in our work programmes. | The target for 2018/19 is 70 inspections to include a lay assessor. During 2018-19, 78 inspections have been carried out with a lay assessor present: 48 at a nursing home; 25 at a residential care home; 4 within a MHLD service; and one as part of an independent health care inspection.<br><br>Four lay assessors have been used across 10 days of inspection (11 – 25 October 2018) to HSC Outpatient Department services, as part of the inspection element of the DoH Commissioned Review of Governance Arrangements in Outpatients Services in the Belfast Trust. |

| STRATEGIC THEME 4<br><br>Deliver operational excellence | |
|---|---|
| **Action** | **Performance** |
| **Action 4.1**<br>We will implement the actions set out in our Transformation, Modernisation and Reform framework. | During 2018/19 we submitted job descriptions for a Business Manager (band 7), Business Support Officers (band 5) for banding to BSO Human Resources. A job description for the Inspector Assistant role has been submitted for banding during quarter 4.<br><br>We submitted amendments to BSO Human Resources in relation to the RQIA Organisational Structure on HRPTS in order to advertise new positions. This is out with RQIA's control. All new job roles will be advertised during quarter one of 2019/20, when BSO Human Resources revise the organisational structure. .<br><br>A paper was brought to the RQIA Board in March 2019 regarding the Project Board for the new inspection methodology for regulated services. A meeting date has been agreed for May 2019. |
| **Action 4.2**<br>We will develop and implement an organisational development plan to give our staff the skills they need to support transformation, modernisation and reform. | Senior staff have been offered opportunities for development including a CLM Level 7 course in leadership (2 staff), an executive development programme at QUB (1 staff), the Scottish Improvement Leader Programme (1staff) and the Leadership centre regional development programme (1 staff). Feedback will be collated to determine the most appropriate course or mix of courses for RQIA staff development.<br><br>A planning day has been arranged with administrative staff in the Business Support Unit to develop an admin development plan for 2019/20. |
| **Action 4.3**<br>We will develop and implement a charter of RQIA's vision and values | RQIA recently revised its vision and values to define our culture and capture what we do when we are at our best, however when available RQIA will adopt the launch of the regional values framework.<br><br>This will be completed during 2019/20. |
| **Action 4.4**<br>We will develop and implement a suite of customer service standards. | During Quarter 1 a benchmarking exercise was undertaken to ascertain customer service standards in comparable organisations. Internal standards were issued in respect of telephony and duty calls. New systems for the quality assurance of correspondence have been put in place. |
| **Action 4.5**<br>We will align our range of provider guidance to ensure it reflects our vision, values and commitment to customer service. | This exercise will follow on foot of the development of customer service standards. This has been deferred to 2019/20 |
| **Action 4.6**<br>We will pilot the risk-adjusted, dynamic and responsive (RADaR) model designed in 2017/18 to support a risk-based, intelligence-led approach to inspection planning for care homes and other services. | Data from the Scaled Inspection Tool which was completed at all primary inspections in 2018-19 has been collated within a custom pilot database. Inspectors were also asked to complete a proposed timescale for the next inspection which allows for the modelling of future inspection frequencies and workload. Collection of data will continue in 2019-20 and also include the addition of dynamic review of RADaR. Inspectors will review data from the self-service report 3 monthly (or earlier in response to incoming intelligence) and record the outcome of these reviews on the pilot database against the latest risk score for the service. |

| STRATEGIC THEME 4<br><br>Deliver operational excellence | |
|---|---|
| **Action** | **Performance** |
| **Action 4.7**<br>We will improve the quality of our reports so they are meaningful, accessible and useful to all stakeholders. | A project is underway to test in day care and domiciliary care agency, inspectors to provide information about RQIA and inspections in a format that is accessible to service users with a range of communication needs. The project has involved service users, staff and inspectors and feedback from these groups supports the need for RQIA to review the accessibility of inspection reports. Through co-production, a range of 'easy read' report template and other information about RQIA for service users who have communication needs was finalised in March 2019 for implementation in 2019/20 inspection year. |

| STRATEGIC THEME 5<br><br>In addition to the specific actions included in our business plan for the coming year, RQIA will maintain our core activities | |
|---|---|
| **Action** | **Performance** |
| **Action 5.1**<br>We will exercise the Authority's powers to support and drive improvement in the services we inspect, review and audit | RQIA contributed to an Association for Real Change (ARC) workshop involving registered managers of services to develop a regional quality monitoring template for the completion of monthly reports.<br><br>RQIA have initiated a project to review the inspection methodology; developed safety huddles (currently testing with care homes team) with a spread plan for quarter 1; RQIA are a member of the HSC QIA; there are regular liaison meetings with HSC Directors, and Trust Chief Executives. Bi-annual meetings are arranged with IHCP.<br><br>RQIA provided a presentation at three workshops on Medicines Management with NISCC between January and March 2019. |
| **Action 5.2**<br>We will provide advice to the Department of Health on proposed policy and legislation affecting the regulation or quality of health and social care. | Three number of article four letters were issued to the DoH.<br><br>RQIA, through quarterly liaison meetings with the DoH, advise and update DoH on all aspects of health and social care.<br><br>The Chief Executive meets professional leads in the DoH on a quarterly basis to update and share information relating to the sector.<br><br>A paper was prepared and shared highlighting the gap in service provision for young people requiring accommodation in unregistered accommodation.<br><br>The 2018/2019 Review Programme has undergone re-prioritisation during 2018/2019 due to emerging reviews, commissioned by the DoH. Four thematic reviews are currently underway, with a further six review reports undergoing quality assurance. |

| STRATEGIC THEME 5<br><br>In addition to the specific actions included in our business plan for the coming year, RQIA will maintain our core activities | |
|---|---|
| **Action** | **Performance** |
| **Action 5.3**<br>We will meet our statutory requirements in respect of the regulation, inspection, review and audit of health and social care. | We planned to complete 2011 inspections in order to meet the statutory minimum in the regulated sector. We completed 2572 inspections by 31 March 2019 to include the regulated sector, MHLD and unregulated services (boarding department, residential family centres, young adult support accommodation and a voluntary adoption agency). Areas of improvement identified across the sector related to staffing and governance arrangements. Individual regulated services found areas for improvement in management of medicines, health and welfare of residents and care plans.<br><br>21 inspections have been carried out to HSC acute services. These include a one day re-audit to Causeway Hospital and a 10 day inspection to the Belfast Trust Outpatients Departments, as part of the Review of Governance Arrangements in Outpatients Services in the Belfast Trust. Five additional inspections were carried out to support regulated services.<br><br>29 of inspections was carried out to Mental Health and Learning Disability Hospitals this year including: Muckamore abbey Hospital, Gransha Hospital, Ward 27 in Downeshire Hospital.<br><br>1082 inspections were carried out to the independent sector, including dentists, medical agencies, hospitals and hospices. |
| **Action 5.4**<br>We will manage our resources effectively to ensure that we operate within allocated budget, operating within a breakeven tolerance where a deficit is not permissible and a surplus cannot exceed £20k. | The 2018/19 annual fee and quarter 1 pro-rata schedules were approved and forwarded to BSO Income for processing in July 2018, with quarter 2 invoices processed & issued in November 2018, quarter 3 in January 2019 & quarter 4 in March 2019. 2018/19 invoices have been issued to all providers.<br><br>As at 31 March, over 99% of the 2018/19 income had been recovered and therefore our target was met. A small number of outstanding debtors will be referred to the operational teams for decision.<br><br>RQIA staff restructuring has commenced following the outcome of the Workforce Review carried out in 2017/18 and as a result a number of posts have or will be advertised in the coming months.<br><br>RQIA achieved break-even at the end of March 2019. |

| STRATEGIC THEME 5<br><br>In addition to the specific actions included in our business plan for the coming year, RQIA will maintain our core activities | |
|---|---|
| **Action** | **Performance** |
| **Action 5.5**<br>We will adopt a targeted, proportionate and responsive approach to our programme of inspection, audit and reviews. | In addition to the regulated services where 'RADaR' is being piloted, RQIA continues to plan inspections and respond to concerns in a manner that is targeted and proportionate. A range of regulatory interventions are used to drive improvements in services including enforcement activity, signposting and compliance monitoring. We will hold a further workshop in May 2019.<br><br>We have reviewed our approach to inspection of Neonatal and Critical Care areas. At the end of Quarter 4 we had met with both the DoH and relevant Clinical Networks to engage take forward a collaborative self-assessment and risk based approach to inspection.<br><br>We have continued to review and re-prioritise our Review Programme to meet additional requests from the DoH for commissioned reviews. This has been discussed with DoH at Bi-monthly meetings on 26 September 2018 and 6 November 2018 and 11 January 2019<br><br>8% of the inspections carried out by RQIA during 2018/19 were partially or fully completed out of hours. The percentage was higher for certain service types, namely nursing homes (13%), residential care homes (11%) and children's homes (28%).<br><br>82.5% of the inspections carried out by RQIA were either Primary or Secondary inspections, with the remaining 17.5% completed for other reasons (including registration visits).<br><br>6% of inspections were either Follow ups, Enforcement Monitoring, Other Intelligence, PEI or Whistleblowing. |
| **Action 5.6**<br>We will develop and foster strategic alliances with other regulators and improvers. | Bi-annual liaison meetings are held between RQIA and the Northern Ireland Commissioner for Children and Young People (NICCY). RQIA met NICCY to exchange information around issues of mutual interest in respect of children's services in Northern Ireland.<br><br>Two Memoranda of Understanding (MoUs) were signed off with the Northern Ireland Social Care Council and the Fire and Rescue Service and draft MoUs were sent to ETI, HSENI, SBNI and NIHE for approval.<br><br>RQIA has regular liaison meeting with DoH, HSCB, trusts etc. All objectives outlined in the engagement plan have been achieved. |
| **Action 5.7**<br>We will recognise and share examples of good practice where we find it. | RQIA has shared good practice through workshops with providers on preparing for winter (x2); medicines management (x3) and raising awareness of human rights in residential homes and across the sector (x2). |

| STRATEGIC THEME 5<br><br>In addition to the specific actions included in our business plan for the coming year, RQIA will maintain our core activities | |
|---|---|
| **Action** | **Performance** |
| **Action 5.8**<br>We will continue to actively participate in the work of HSC Quality Improvement. | RQIA is a member of the HSC Quality Improvement Alliance. The aim of the HSC QIA is to be recognised internationally, but especially in Northern Ireland as a leader of excellence in HSC. As a member, our role is to shape a dynamic network from what is known and from experiences.<br><br>RQIA's Director of Improvement participates in meetings of the Design Collaborative progressing work of the Improvement Institute/System.<br><br>We continue to use peer reviewers as part of inspection to HSC service. This supports the collaborative work and quality improvement across the region. We used have used 12 peer reviewers on inspections. |
| **Action 5.9**<br>We will work in partnership with the Innovation Lab to improve our engagement with users of health and social care services. | Due to pressures on the Innovation Lab, this has been deferred to 2019/20. |
| **Action 5.10**<br>We will deliver a minimum of (12) engagement events with providers of health and social care services. | During 2018-19 we delivered 18 events for service providers.<br><br>From September to November we held five workshops across Northern Ireland to support care home providers and domiciliary care services prepare their services for the winter, in partnership with RCN, PHA, NI Ambulance Service and Multiagency Emergency Preparedness groups. We also held five workshops on medicines management, with input from NICE. RQIA's Mental Health and Learning Disability team held a stakeholder involvement workshop with service providers and managers.<br><br>In December, we held a radiation safety workshop involving all trusts and independent organisations. Our workshop focused on the changes within the new Ionising Radiation (Medical Exposure) Regulations which came into operation in February 2018. We held a workshop involving all independent hospitals and hospices, to share information in relation to our revised inspection methodology, which will be implemented from January 2019. The providers were positive with respect to the new approach. In particular moving from an inspection process which was focused in the main on nursing care and practice, to one which is more multi-disciplinary in its approach.<br><br>During January to March, RQIA held three joint workshops with NISCC and PHA for domiciliary care services relating to medicines management and frailty. We also held a joint workshop for mental health providers with the Royal College of Psychiatrists; and two joint human rights training workshop with the Independent Health and Care Providers for their members. |
| **Action 5.11**<br>We will implement Phase II of the project to integrate MHLD systems into iConnect. | 100% of milestones were successfully delivered on target. The iConnect MHLD information module went live on the 2 January 2019 as planned. All current risks have been assessed as low. The MHLD team are being supported by the development during the early implementation phase. The project closed down on 31 January 2019. Standard reporting and dashboard development is ongoing. |

| STRATEGIC THEME 5<br><br>In addition to the specific actions included in our business plan for the coming year, RQIA will maintain our core activities | |
|---|---|
| **Action** | **Performance** |
| **Action 5.12**<br>We will implement and oversee central monitoring of all statistical information requests. | The information request database has been built on a Microsoft Access platform and was rolled out to the information team in late June 2018. The database holds all the required information and meets the team's needs.<br><br>A total of 208 separate information requests have been logged onto the database, The information team continues to review and discuss ongoing information requests at our bi-monthly team meetings.<br><br>Information team will undertake an information request user's satisfaction survey during quarter 1 2019/20. |
| **Action 5.13**<br>We will develop strategic alliances with other organisations to promote the use of information collected and analysed internally within RQIA and work collaboratively where we can | RQIA have been represented at all ISB meetings to date and have had input to the now agreed terms of reference for the group.<br><br>RQIA have attended 3 meetings of the UK Healthcare Regulators Analyst Network to share best practice in data analysis with other UK Healthcare Regulators including CQC, HIW, NMC, GDC, GMC, HIS.<br><br>RQIA information team facilitated a visit from HIW in November to share best practice<br><br>RQIA attended the Northern Ireland launch of the Association of Public Healthcare Analysts (AphA) and have been allocated two funded memberships by the Information Standards Board.<br><br>In Quarter 4, the Assistant Director for Care Homes attended the Regional Emergency Contingency Planning Group in respect of Brexit Planning. |
| **Action 5.14**<br>We will improve how we do our business to ensure that people trust and use our reports of inspection, audits and reviews to make informed choices and decisions about health and social care services. | RQIA produced a video called 'Geraldine's Story' where Geraldine shared her experience of finding a nursing home for her husband who was living with dementia.<br><br>RQIA implemented all actions from the engagement strategy and plan. RQIA, in partnership with other organisations delivered presentations at workshops to the regulated sector.<br><br>RQIA revised the corporate documents and guidance leaflets for use on all inspections during 2018-19.<br><br>Location maps for care homes have been developed and shared with stakeholders (i.e. DoH & HSCB). |

## Appendix 2: Enforcement Action: 1 April 2018 - 31 March 2019

| Name of Service and category (provider) | Date of Issue | Details of RQIA enforcement action | Date of compliance |
|---|---|---|---|
| Angels Recruitment Agency Ltd. Domiciliary Care Agency, Londonderry (Dan James Duddy) | 11 April 2017<br><br>31 May 2017<br><br>3 July 2017<br><br>9 August 2017 | Two notices of failure to comply with regulations, relating to staff induction and quality monitoring.<br><br>Notice of proposal to place three conditions of registration<br><br>Notice of decision to place three conditions of registration<br><br>Three conditions of registration placed on service (see appendix 3 for details).<br><br>Compliance achieved COR lifted | 6 June 2017 (one notice)<br>11 July 2017 (one notice)<br><br><br><br><br><br>10 April 2018 |
| Ashbrooke Care Home, Nursing Home, Enniskillen (Runwood Homes Ltd.) | 18 August 2017<br><br>14 September 2017 | Urgent Order to cancel registration of Runwood Homes Ltd. in respect of Ashbrooke Care Home<br><br>Appeal lodged with Care Tribunal<br><br>Appeal withdrawn, proceedings dismissed | 18 August 2017<br><br><br><br>13 April 2018<br>. |
| Bluebird Care, Domiciliary Care Agency, Holywood (Dr PW McCormick) | 8 August 2018 | One notice of failure to comply with regulations, relating to quality monitoring reports | 15 October 2018 |
| Copperfields Nursing Home, Aughnacloy (Edwards Enterprises NI Ltd) | 11 December 2018<br><br>11 January 2019<br><br>12 February 2019 | Notice of proposal to place two conditions of registration<br><br>Notice of decision to place two conditions of registration<br><br>Two conditions of registration placed on service (see appendix 3 for details). | Ongoing at 31 March 2019 |
| Extra Care (Extra Care for Elderly People Ltd), Antrim | 7 June 2018 | Two notices of failure to comply with regulations, relating to missed and late calls, and staff supervision | 7 September 2018 |
| Glenabbey Manor RCH, Newtownabbey (Runwood Homes Ltd) | 10 September 2018 | One notice of failure to comply with regulations, relating to medicines management. | 17 October 2018 |
| Glenmachan Tower House Nursing Home (Church of God) | 4 May 2018 | One notice of failure to comply with regulations, relating to the management of wound care and the use of pressure relieving equipment. | 6 August 2018 |

| Name of Service and category (provider) | Date of Issue | Details of RQIA enforcement action | Date of compliance |
|---|---|---|---|
| The Graan Abbey Nursing Home, Enniskillen (Carewell Homes Ltd) | 6 December 2018 | One notice of failure to comply with regulations, relating to medicines management. | 15 January 2019 |
| Hawthorn House NH, Belfast (Four Seasons Health Care | 11 July 2018 | Two notices of failure to comply with regulations, relating to staffing arrangements and medicines management. | 21 September 2018 |
| Leabank NH, Ballycastle (Macklin Care Homes) | 27 February 2018 | One improvement notice, relating to patient records. | 24 May 2018 |
| NI Ambulance Service Bangor Ambulance Station (Mr Shane Devlin) | 2 October 2017 | Two improvement notices issued, relating to governance and Infection prevention/hygiene | 21 December 2018 |
| NI Ambulance Service Broadway Ambulance Station (Mr Shane Devlin) | 2 October 2017 | Two improvement notices issued, relating to governance and Infection prevention/hygiene | 21 December 2018 |
| NI Ambulance Service Craigavon Ambulance Station (Mr Shane Devlin) | 19 February 2018 | Two improvement notices issued, relating to governance and Infection prevention/hygiene | 21 December 2018 |
| NI Ambulance Service Headquarters (NIAS, Mr Michael Bloomfield) | 21 December 2018 | One improvement notice issued, to ensure robust staff training for infection prevention and control is delivered and assured across the organisation | Ongoing at 31 March 2019 |
| The Oak Tree Centre (WHSCT) Day Care Setting | 27 June 2018 | Two notices of failure to comply with regulations, relating to care issues, and health and safety risks. | 20 August 2018 |
| Parkanaur College Residential Care Home (Thomas Doran Trust) | 14 March 2019 | Three notices of failure to comply with regulations, relating to management, staffing arrangements and the health and welfare of residents | Ongoing at 31 March 2019 |
| Peniel Nursing Care Services, Belfast (Stella Law) | 27 February 2019 | Notice of proposal to place one condition of registration requiring the registered provider to notify RQIA when they are proposing to become operational | Ongoing at 31 March 2019 |

| Name of Service and category (provider) | Date of Issue | Details of RQIA enforcement action | Date of compliance |
|---|---|---|---|
| SCA Montague (Springfield Charitable Association) Day Care Setting | 5 June 2018 | Two notices of failure to comply with regulations, relating to visits by the registered provider and the general environment within the centre. | 3 July 2018 |
| Seaview House Nursing Home, Bangor (Ms R F Gilmore) | 25 April 2018 | One notice of failure to comply with regulations, relating to effective monitoring and governance arrangements. | 25 July 2018 |
| Three Islands Nursing Home, Toomebridge (Mr and Mrs McAleer) | 11 December 2018 | Two notices of failure to comply with regulations, relating to care records and infection prevention and control | 6 February 2019 |
| TW Care Services Ltd Domiciliary Care Agency, Ballymena | 28 March 2018 | One notice of failure to comply with regulations, relating to recruitment practices and AccessNI checks. | 8 May 2018 |
| Wood Green Residential Care Home, Jordanstown (Mrs Yvonne Diamond) | 7 March 2019 | Two notices of failure to comply with regulations, relating to medicines management. | Ongoing at 31 March 2019 |

**Prosecution of Unregistered Services**

In Northern Ireland, beauty clinics providing services using certain classes of laser or intense pulsed light (IPL) treatments are required to register with RQIA. During 2018-19, one service was convicted of failing to register with RQIA, and treating clients with unregistered cosmetic laser and/or intense pulsed light (IPL) equipment:

| Service | Service Provider | Date | Court | Fine |
|---|---|---|---|---|
| Skyn Boutique, Lisburn | Maxine Eaves | 18 September 2018 | Lisburn Magistrates Court | £300 plus costs |

## Enforcement at Children's Residential Care Services

During the year RQIA took enforcement action in relation to three children's residential home.

On 29 June 2018, a service operated by the Praxis Care Group/Challenge received two notices of failure to comply with regulations in relation to its environment and statutory notifications. Compliance was achieved on 7 September 2018.

On 27 November, a separate service operated by the Praxis Care Group/Challenge received one notice of failure to comply with regulations in relation to operating within its statement of purpose. Compliance was achieved on 4 January 2019.

On 13 February 2019, a service operated by the Northern HSC Trust received one notice of failure to comply with regulations in relation to operating within its statement of purpose. This matter was ongoing at 31 March 2019.

## Appendix 3: Conditions of Registration as a result of Enforcement Action

| Service | Condition of Registration/ Deregistration | Date action took effect | Additional Information |
|---|---|---|---|
| Copperfields Nursing Home, Aughnacloy (Edwards Enterprises NI Ltd) | Two conditions of registration:<br><br>1.The registered person must notify RQIA in advance of every admission to the nursing home, identify the patient's name, category of care under which they are admitted and the contact details of the care manager from the referring trust.<br>2.The registered person must ensure that a record of the occupancy of the home, in respect of the categories of care, is maintained and included in the Regulation 29 report. This report should be submitted to RQIA on a monthly basis. | 12 February 2019 | Ongoing at 31 March 2019 |

## Appendix 4: RQIA Board Members' Profiles (as at 31 March 2019)

**Mrs Sarah Havlin** was appointed to RQIA's Board in December 2011, and was reappointed for a further four-year term in December 2015. Sarah is a member of RQIA's appointments and remuneration committee and the appointment panel for Part II Medical Practitioners and Second Opinion Appointed Doctors. She is a solicitor by profession, and is currently the Northern Ireland Certification Officer for Trade Unions and Employers' Associations - a regulatory and judicial role within industrial relations. Sarah also acts as an independent adjudicator and arbitrator across a range of legal proceedings, including as an independent assessor for complaints and serious adverse incidents for the Health and Social Care Board.

**Mr Seamus Magee, OBE**, was appointed to RQIA's board in April 2014 for a four-year term and reappointed for a further term in May 2018. He is a member of RQIA's audit committee. Prior to his retirement, Seamus was head of the Electoral Commission in Northern Ireland. He is a Charity Commissioner for Northern Ireland, is a lay assessor with the GMC and sits on NMC fitness to practice panels. He is also a member of the Law Society Client Complaints Committee; and is a member of the board of governors at Assumption Grammar, Ballynahinch.

**Professor Mary McColgan, OBE,** Acting Chair, was appointed to RQIA's board in April 2013 for a four-year term, and is currently acting Chair. Prior to her retirement, Mary was head of school of sociology and applied social studies at Ulster University, and is now Emerita Professor at the university.

**Mr Gerry McCurdy** was appointed to the RQIA Board in July 2014 for a four year term and reappointed for a further term in July 2018. He is a member of RQIA's Audit Committee. Prior to his retirement, Gerry was the Northern Ireland Director of the Food Standards Agency. He is currently an external consultant in food safety for the United Nations and the World Bank, and has worked on international projects in Europe and Asia. He is also a member of international certification body Global Trust's Impartiality Committee.

**Dr Norman Morrow, OBE,** was appointed to RQIA's board in May 2014 for a four-year term, and reappointed for a further term in May 2018. Prior to his retirement, he was Chief Pharmaceutical Officer for Northern Ireland. He is an associate of the HSC Leadership Centre and a Board member of Belfast Bible College.

**Mr Robin Mullan** was appointed to RQIA's board in May 2014 for a four-year term and reappointed for a further term in May 2018. He is a member of RQIA's audit committee. Robin is the former chief executive and accounting officer of Peamount Healthcare. He is also a commissioner with the Equality Commission for Northern Ireland, where he is a member of its audit and risk committee.

**Miss Patricia O'Callaghan** was appointed to RQIA's board in April 2013 for a four-year term and reappointed for a further term in April 2017. She is a member of RQIA's audit committee and the appointment panel for Part II Medical Practitioners and Second Opinion Appointed Doctors. Patricia is a registered nurse, and prior to her retirement, she was director of head and skeletal services at the Belfast Health and Social Care Trust. She also a member of the Industrial Court to the Department for the Economy and the Agricultural Wages Board.

**Mr Denis Power** was appointed to RQIA's board in December 2011, and reappointed for a further four years in December 2015. Denis is chair of RQIA's audit committee and a member of the appointment panel for Part II Medical Practitioners and Second Opinion Appointed Doctors. Prior to his retirement, Denis held senior management positions in the banking sector. He is currently a trustee of Titanic Foundation Ltd; a director of Springboard Opportunities Ltd; and an independent member on the Board at The Executive Office. Denis chairs the audit and risk committees for each organisation.

**Ms Lindsey Smith** was appointed to RQIA's board in December 2011, and reappointed for a further four years in December 2015. She is a member of RQIA's audit committee. Lindsey is a self-employed organisational development consultant, executive coach and experienced facilitator, and a part-time associate lecturer at Ulster University and Queens University, Belfast. Lindsey is also a board member for the Health and Safety Executive Northern Ireland.

The **Regulation** and **Quality Improvement Authority**

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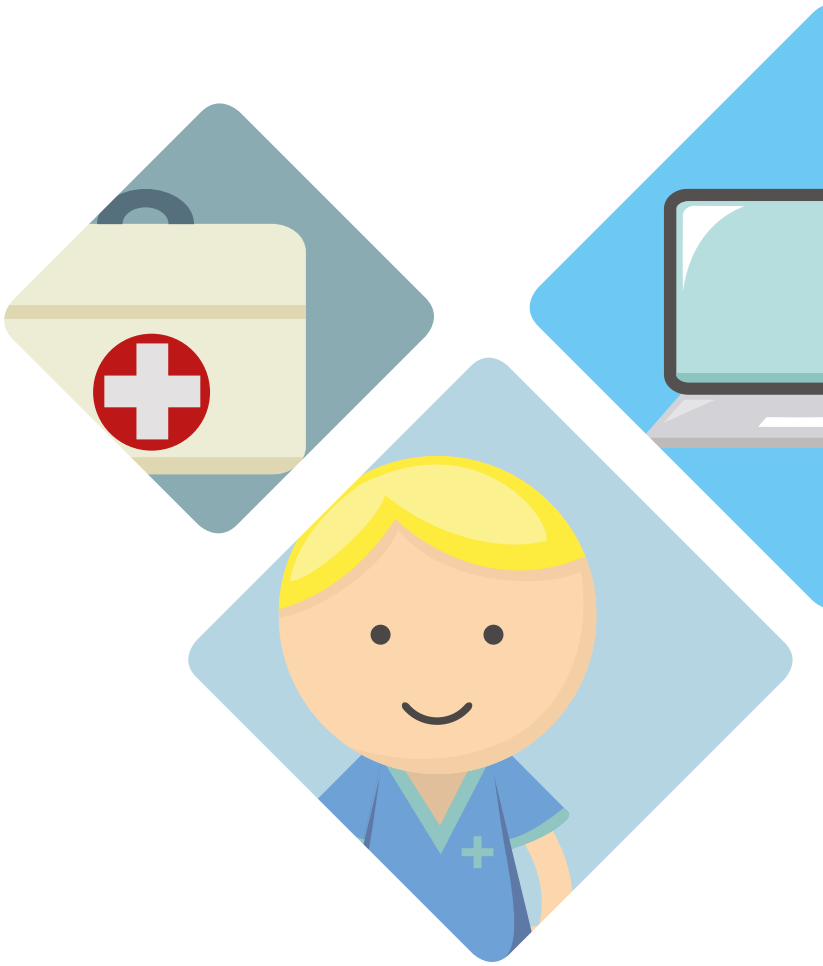

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