



The **Regulation** and
Quality Improvement
Authority



RQIA Business Plan | 2017-18

Assurance, Challenge and Improvement in Health and Social Care

Our Vision, Purpose and Values

Vision

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

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.

Values

RQIA has a shared set of values that define our culture::

- **Independence** - upholding our independence as a regulator
- **Inclusiveness** - promoting public involvement and building effective partnerships - internally and externally
- **Integrity** - being honest, open, fair and transparent in all our dealings with our stakeholders
- **Accountability** - being accountable and taking responsibility for our actions
- **Professionalism** - providing professional, effective and efficient services in all aspects of our work - internally and externally
- **Effectiveness** - being an effective and progressive regulator - forward-facing, outward-looking and constantly seeking to develop and improve our services

Introduction

This Business Plan sets out RQIA's work programme for 2017/18. These are derived from the four strategic themes and priorities described in our draft Corporate Strategy 2017 - 21.

RQIA is an independent regulator tasked with bringing about measurable and enduring improvements in the safety and quality of health and social care services in Northern Ireland.

RQIA does this through a programme of inspections, investigations and reviews of health and social care bodies and recommends actions to improve the quality and availability of services.

RQIA advises Department of Health (DoH) and the general public on the safety, quality and availability of health and social care. We use our powers and influence to drive up quality, recognise and celebrate best practice and build public confidence in health and social care. We also take steps to address and eliminate poor practice and to reduce the likelihood of harm to service users.

During our inspections we assess the quality of the services provided against four key domains; safe, effective, compassionate care and leadership. Following an inspection we ask the service provider to make any changes we consider necessary through the quality improvement plan and we

publish this information in a report of our findings, available on our website, www.rqia.org.uk.

RQIA acts to protect the rights of all vulnerable people by taking account of the principles of Human Rights and Equality and by discharging our statutory functions under the Mental Health (Northern Ireland) Order 1986. These duties and responsibilities include promoting good practice; preventing ill treatment; remedying any deficiency in care or treatment; terminating improper detention in a hospital or guardianship; and preventing or redressing loss or damage to a patient's property.

We assure the quality of services commissioned by the Health and Social Care (HSC) Board and delivered by HSC trusts and agencies through our programme of reviews. This programme takes into consideration relevant standards and guidelines, the views of the public, health care experts and current research.

RQIA undertakes planned inspections at a range of health and social care facilities, including hospital wards and clinical areas. In 2017-18 we will continue a rolling programme of inspections of acute hospitals focused on the patient experience.

The Guidelines and Audit Implementation Network (GAIN) supports the development of clinical and social care audit and the production of regional guidelines in Northern Ireland. In 2017/18 we will take forward a programme of audits.

RQIA is one of four designated national preventive mechanisms (NPM) under the United Nations Optional Protocol to the Convention Against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment (OPCAT). RQIA will continue to exercise its duties as a designated NPM by visiting places of detention, including psychiatric hospitals and prisons, to assess whether those detained are subject to humane treatment.

We are also a designated authority under the Public Interest Disclosure (NI) Order 1998 to whom employees of health and social care bodies may make a protected whistleblowing disclosure.

We work within a prescribed budget and must achieve break-even year on year. Our budget for 2017/18 has been reduced by x%. We have responded to the departmental requirement to submit proposals to work to a reduced budget, which will require an adjustment of our work programme this year. We will continue to use our existing resources to best effect to maintain a robust programme of inspections and reviews.

We are committed to excellence and are implementing an improvement programme based on the European Foundation for Quality Management (EFQM) across all aspects of our work. In 2017-18 we will focus on the development and implementation of an Organisational Development Plan following Investors in People (IiP) assessment and moving towards accreditation against ISO9001:2015.

We remain committed to achieving an appropriate balance between our focus on quality assurance and quality

improvement. We will continue to be proactive in developing the quality improvement agenda in line with Quality 2020.

We will implement our workforce plan including steps to improve the leadership, management and development of our staff. We will continue to assess the capacity and capabilities of the workforce to undertake the core activities required of us as a regulator and improvement body. We will maintain performance management and robust staff appraisal systems to support our business needs and requirements going forward.

RQIA has a responsibility to manage its resources and discharge its responsibilities in an effective, efficient and sustainable manner.

Corporate Strategy 2017-21

This Business Plan has been developed within the context of the RQIA Corporate Strategy 2017-21.

The RQIA Strategy Map (Figure 1, Page 5) serves as a roadmap to illustrate the activities of the organisation for the period 2017-21. It brings together the key elements of the strategy: our vision and purpose, the strategic themes which drive improvement, the core activities we need to excel at and the values we uphold to ensure our success.

Each of the elements of the strategy map is explained in more detail below:

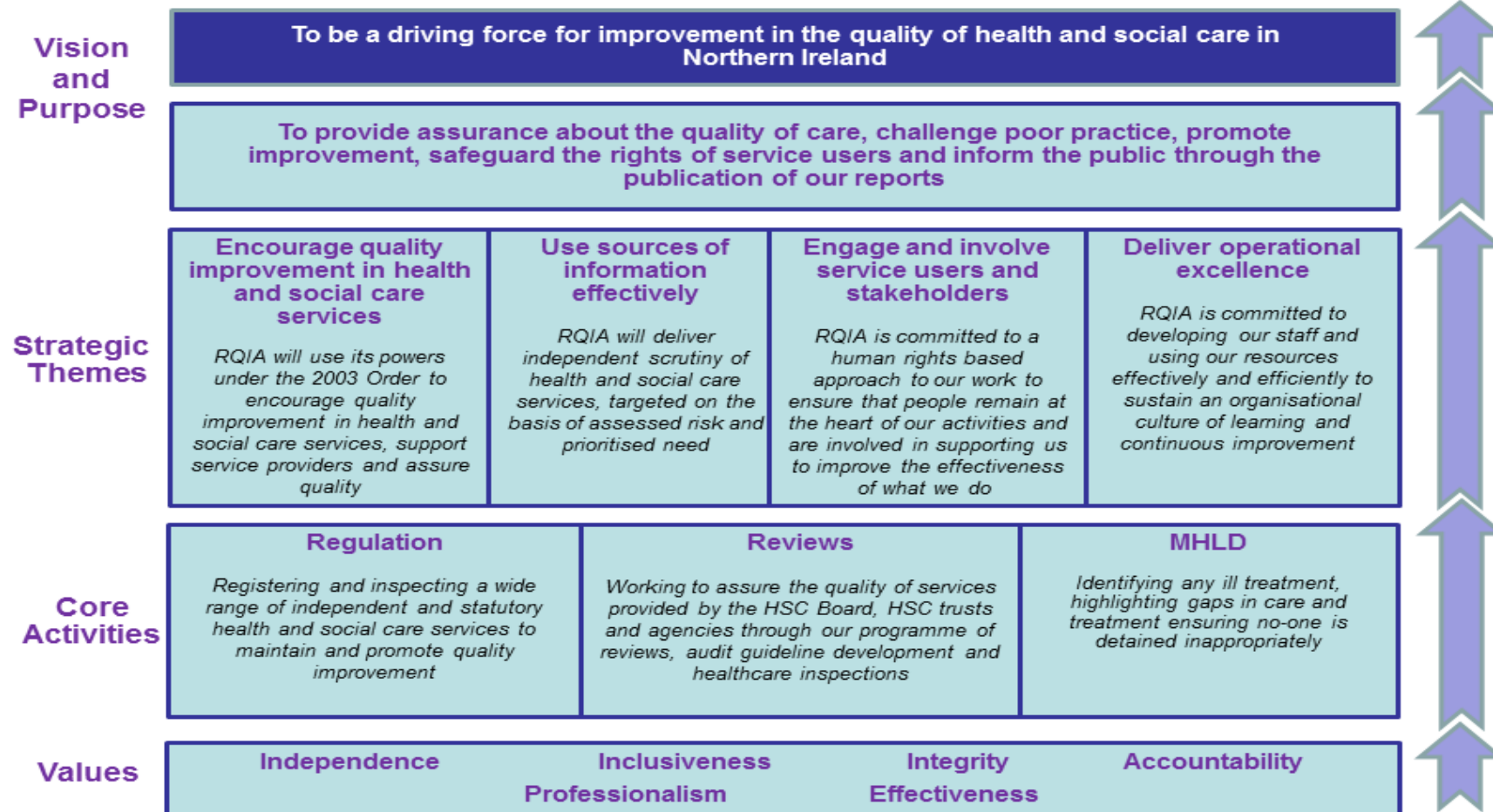
- **Vision and Purpose** - answers the question why RQIA exists and what is our role
- **Strategic Themes** - which will govern the way we work and bring about change to the outcomes of the organisation
- **Core Activities** - which RQIA must effectively execute to deliver the strategic themes
- **Values** - a shared set of values which define our culture and capture what we do when we are at our best

The strategy has been structured in terms of four overarching strategic themes i.e.:

1. **Strategic Theme 1: 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.*
2. **Theme 2: 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*
3. **Strategic Theme 3: 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.*
4. **Strategic Theme 4: 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.*

RQIA Strategy Map 2017-21

Figure 1



Financial Context 2017-18

RQIA derives its income from a recurring allocation (revenue resource limit) from the Department of Health (DoH) and through income generated from the Regulation and Improvement Authority (Fees and Frequency of Inspections) Regulations (Northern Ireland) 2005. In addition, RQIA receives a capital allocation each year from DoH.

Details of RQIA's funding requirements in 2017-18 are set out in the finance section of the Business Plan (see Appendix 1).

Confirmation of the 2017-18 indicative RRL was received from DoH on 4 July 2017. A budget cut of 2% has been applied to the opening 2016-17 position which equates to a reduction of £136,875. The 2017-18 expenditure allocation for RQIA is £6,706,866.

The estimated income from charges in 2017-18 which is based on the current fees and frequencies regulations and includes estimates in relation to registered places and registration fees is £889,987.

RQIA will develop a Savings Plan 2017-18 in order to achieve the savings target of 2% through workforce controls, review and control of non-pay spend.

Performance Management

RQIA will report on performance against the Business Plan at public Board meetings, and through the publication of an annual report and accounts, and an annual quality report (these reports are available at www.rqia.org.uk). RQIA will also provide reports of its activities through the bi-annual accountability review meetings with DoH.

This plan should be read in conjunction with the Corporate Risk Assurance Framework, which identifies risks in relation to the delivery of corporate objectives and how these risks are managed.

Board Approval

The Business Plan 2017-18 was approved by the RQIA Board on 23 March 2017.

Further Information

For further information on the Business Plan 2017-18 or the Corporate Risk Assurance Framework, please contact:

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Business Plan 2017-18

Strategic Theme 1: 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

Key Priorities 2017-21

We will:

- analyse and report on the availability and quality of health and social care services
- scrutinise and report on service providers' approach to quality improvement
- drive forward and share best practice and learning from inspections, audits and reviews
- provide advice and guidance on quality assurance and improvement

| | Action | Intended Outcome / Output | Measures | Action Owner(s) | Timescale for Completion |
|-----|---|--|--|--|--------------------------|
| 1.1 | Complete the planned programme of activity for 2017/18 in respect of registration, inspection, reviews and audits | <p>A system of registration which ensures that only those persons fit to provide good quality care are authorised to do so</p> <p>Independent assurance as part of inspections and reviews, of the delivery safe, effective, compassionate care in a service that is well led</p> <p>As part of inspections and reviews, areas of good practice are identified within each of the domains of safe, effective, compassionate care and well led service and or recommendations for quality improvement are made when required</p> <p>Targeted and proportionate enforcement action to protect the public and ensure providers take action to improve</p> | <ul style="list-style-type: none"> • Number of inspections, reviews and audits completed versus planned • % of areas for improvements in the Quality Improvement Plans implemented at the date of the next inspection • Number of successful prosecutions brought for services failing to register • Number of areas for improvement identified within each of the domains of safe, effective, compassionate care and well led service • Number of enforcement actions taken and time taken to achieve compliance | Director of Regulation, Reviews and MHLD | March 2018 |

| | Action | Intended Outcome / Output | • Measures | Action Owner(s) | Timescale for Completion |
|-----|--|--|--|---|---------------------------------|
| 1.2 | Review and evaluate the evidence for an inspection assessment framework in facilitating improvement | Have established a robust evidence base as to the extent to which the use of assessment frameworks drive quality improvement | <ul style="list-style-type: none"> • Submission of a proposal to the RQIA Board based on the findings of the review and agreement of a way forward for the inspection methodology | Chief Executive | Sept 2017 |
| 1.3 | Develop proposals for the Review Programme post-2018 | Targeted and intelligence led programme of Reviews for 2018-19 that will contribute to a redesign of some aspects of health and social care | <ul style="list-style-type: none"> • Approval of the Review Programme by the RQIA Board and DoH | Director of Reviews | March 2018 |
| 1.4 | Develop a template report to enable the publication of an annual summary of the quality of services inspected, reviewed and audited by RQIA (the first report will be produced in relation to 2017-18) | An overview of the quality of health and social care services describing the impact of RQIA's inspections, reviews and audit activity and sharing of best practice | <ul style="list-style-type: none"> • Approval of a report template and methodology by the RQIA Board and the Department | Director of Reviews, MHL and Regulation | December 2017 |
| 1.5 | Provide advice and guidance to service providers on quality improvement systems | Quality improvement systems are stronger as a result of our advice and guidance. | <ul style="list-style-type: none"> • % of service providers who state that their quality improvement systems have been strengthened as a result of our interventions | Director of Reviews, MHL and Regulation | March 2018 |

| | Action | Intended Outcome / Output | Measures | Action Owner(s) | Timescale for Completion |
|-----|--|---|--|------------------------|---------------------------------|
| 1.6 | Participate as an active partner in the design and development of an Improvement Institute / System for Northern Ireland | RQIA will influence the development of innovative improvements and standardisation in how health and social care services will be delivered in the future | <ul style="list-style-type: none"> Evaluation of RQIA's participation in the Improvement Institute for Northern Ireland and the deliverables from the work of the Institute | Director of Reviews | March 2018 |
| 1.7 | Produce a proposal for the consideration by the RQIA Board regarding the independent evaluation of the Hospital Inspection programme | Cost / benefit / affordability analysis of undertaking an independent evaluation of the Hospital Inspection programme | <ul style="list-style-type: none"> Approval of the recommendations in the Proposal by the RQIA Board | Director of Reviews | June 2017 |

Strategic Theme 2: 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

Key Priorities 2017-21

We will:

- strengthen data gathering and analysis within RQIA
- seek opportunities to collaborate with other regulators and share information with our stakeholders to better target reviews, investigations and inspections, based on need and potential impact
- improve the quality of information we gather from service users to prioritise the focus of our work

| | Action | Intended Outcome / Output | Measures | Action Owner(s) | Timescale for completion |
|-----|---|---|--|--|---------------------------------|
| 2.1 | Develop and implement a prioritised Plan aligned to the Information Scoping Exercise completed in 2016/17 | Strengthened data gathering and analysis, optimal use of internal and external sources of information to inform an intelligence-led approach to targeting inspections, reviews and audits | <ul style="list-style-type: none"> • % of actions fully implemented in the Information Action Plan by target date | Director of Reviews, MHL, Regulation and Corporate Services | March 2018 |
| 2.2 | Foster strategic alliances with other system regulators and improvement bodies both regionally and nationally | Working arrangements in place with relevant system regulators and improvement bodies to share information and work collaboratively | <ul style="list-style-type: none"> • Number of collaborations with system regulators and improvement bodies undertaken • Number of information sharing agreements and Memorandums of Understanding (MoUs) in place | Chief Executive, Director of Reviews, MHL, Regulation and Corporate Services | March 2018 |

| | Action | Intended Outcome / Output | Measures | Action Owner(s) | Timescale for completion |
|-----|--|--|--|--|---|
| 2.3 | Review and revise RQIA's Inspection Planning Tool (IPT) in the context of changes in Fees and Frequency of Inspection Regulations | A robust methodology enabling a risk-based and targeted model of inspection | <ul style="list-style-type: none"> • % of project milestones achieved • % of inspections completed above the statutory minimum utilising the revised IPT | Director of Regulation | December 2017 |
| 2.4 | Strengthen arrangements to capture the voice of service users and their families/carers, to include stakeholder reference group, lay assessors and through engagement during inspections | The needs, values and experiences of individuals and their families have been taken into account in our inspection and review programmes | <ul style="list-style-type: none"> • Evaluation of the number and effectiveness of engagement activities to capture the voice of service users | Chief Executive, Director of Reviews, MHL D, Regulation and Corporate Services | March 2018 |
| 2.5 | Commence implementation of a project to develop and implement an integrated MHL D information system to replace the existing legacy systems following approval of the Outline Business Case from DoH | An integrated MHL D Information System and realisation of the benefits identified in the business case | <ul style="list-style-type: none"> • % of milestones achieved on target from the project plan | Director of Corporate Services and MHL D | March 2018 (Go-live is anticipated to be Qtr 1 2018-19 subject to OBC approval) |

Strategic Theme 3: Engage and involve service users and stakeholders

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

Key Priorities 2017-21

We will:

- engage service users and stakeholders in the co-design of our interventions (audit, review, inspection and investigations)
- involve service users as part of inspections and reviews
- develop and implement a communications and engagement strategy
- enable and encourage service users and the public to provide the intelligence needed to inform assurance and improvement activity

| | Action | Intended Outcome / Output | Measures | Action Owner(s) | Timescale for completion |
|-----|--|--|---|------------------------|---------------------------------|
| 3.1 | Develop and implement a Communications and Engagement Strategy taking account of HSC PPI Standards to increase the publics' awareness of the role and function of RQIA | <p>Increased stakeholder awareness and understanding of the role and functions of RQIA</p> <p>Improved collaborative relationships with stakeholders and evidence that we have engaged and involved them effectively in our work</p> | <ul style="list-style-type: none"> • % of actions implemented in the Communications and Engagement Strategy • Results of Public Perception and Health Surveys • Number of opportunities for service users and stakeholders to be engaged in the design of our work | Chief Executive | March 2018 |

| | Action | Intended Outcome / Output | • Measures | Action Owner(s) | Timescale for completion |
|-----|---|--|---|--|---------------------------------|
| 3.2 | Increase the number of stakeholders and lay assessors actively designing / participating in our programmes of work | <p>The needs, values and experiences of individuals and their families have been taken into account in our inspection and review programmes</p> <p>Increased engagement and involvement of service users and stakeholders in the design of our work</p> <p>Broader representation and multidisciplinary participation in our inspections and reviews</p> | <ul style="list-style-type: none"> • Number of inspections completed with lay assessor involvement (target to increase by 20% year on year) • Number of opportunities for service users and stakeholders to be engaged in the design of our work • Evaluation of the number and effectiveness of engagement activities to capture the voice of service users | Director of Regulation, MHLD and Reviews | March 2018 |
| 3.3 | Partner with the Innovation Lab (Department of Finance) to explore opportunities to work with our stakeholders to collaboratively redesign our activities | Established working partnership to deliver up to 3 prototypes testing concept and/or process. | <ul style="list-style-type: none"> • Number of prototypes designed and commenced • Number of RQIA processes refreshed through collaboration with our stakeholders and facilitated by the Innovation Lab | Chief Executive and Director of Reviews | March 2018 |

| | Action | Intended Outcome / Output | • Measures | Action Owner(s) | Timescale for completion |
|-----|---|--|--|--|---------------------------------|
| 3.4 | Examine and explore opportunities to use technology to facilitate feedback from service providers, service users and their families / carers e.g. pilot the use of e-questionnaires | Needs, values and experiences of individuals and their families are more easily captured in inspections and reviews Inspection, Review and Audit activity is informed by the voice of service users and their families/carers | <ul style="list-style-type: none"> • % increase in the use of the web portal by service providers • Evaluation of the number and impact of the increased use of e-questionnaires | Chief Executive, Director of Reviews, MHL, Regulation and Corporate Services | March 2018 |

Strategic Theme 4: 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

Key Priorities 2017-21

We will:

- develop a highly skilled and flexible workforce, capable of meeting existing and future challenges
- promote a culture of good governance, learning and continuous improvement focusing on better outcomes in the work we do
- benchmark our performance against regional, national and international standards
- efficiently and effectively manage our resources to demonstrate value for money

| | Action | Intended Outcome / Output | Measures | Action Owner(s) | Timescale for completion |
|-----|---|---|--|--|--------------------------|
| 4.1 | Implement the Workforce Plan aligned to the Workforce Review carried out in 2016-17 | The right people in the right place at the right time with the right skills to meet changing business needs | <ul style="list-style-type: none"> • % of actions in the Workforce Plan implemented on target | Chief Executive, Director of Reviews, MHL, Regulation and Corporate Services | March 2018 |
| 4.2 | Develop and implement an Organisational Development (OD) Plan aligned to the Investors in People (IiP) assessment | <p>An innovative, knowledgeable and skilled workforce, ensuring the successful achievement of RQIA's objectives</p> <p>Benchmarked improved leadership and management practices in RQIA Using the Investors in People Framework</p> | <ul style="list-style-type: none"> • Level of IiP accreditation achieved • % of actions in the OD Plan implemented on target • IiP staff survey results | Chief Executive, Director of Reviews, MHL, Regulation and Corporate Services | March 2018 |

| | Action | Intended Outcome / Output | Measures | Action Owner(s) | Timescale for completion |
|-----|---|---|---|--|---------------------------------|
| 4.3 | Implement a project to prepare for ISO 9001:2015 assessment and achieve accreditation | Streamlined and standardised processes and enhanced performance through the implementation of a Quality Management System (QMS) | <ul style="list-style-type: none"> • % of milestones achieved on target from the ISO9001:2015 Project Plan • ISO9001:2015 accreditation | Chief Executive, Director of Reviews, MHL, Regulation and Corporate Services | March 2018 |
| 4.4 | Achieve financial balance and implement zero based budgeting | Recurring savings and break even achieved at year end | <ul style="list-style-type: none"> • Savings Plan developed and approved by the RQIA Board and DoH • Projected and actual end-of-year financial position / Break-even | Director of Corporate Services | March 2018 |

Measuring What Matters

RQIA has developed a suite of financial and process performance measures which are monitored by the RQIA Board on a regular basis. Whilst these measures provide a useful view of organisational performance, RQIA recognises the need to move towards the greater use of outcome measures. We therefore have developed the following complementary suite of outcome measures.

In order to know whether we have achieved our vision, we have grouped our outcome measures under the following four categories:

- People are aware of RQIA and our roles and responsibilities
- Service users and their families/carers trust our independent judgements and advice
- Organisations improve the way they deliver care as a result of our inspections, reviews and audits
- We have developed and maintained a competent, engaged and high performing workforce

These measures will be reported to RQIA's Board annually and will be kept under review. Baseline positions will be established in year one.

| How we will measure whether we have achieved our vision | | |
|---|---|--|
| People are aware of RQIA and our responsibilities | Measure 1: % of respondents who are aware of RQIA | The public's understanding of RQIA's responsibilities will be established through the Health Survey NI |
| | Measure 2: % of respondents who are aware of RQIA's responsibilities for inspections, reviews and audits | |
| Service users and their families/carers trust our independent judgements and advice | Measure 3: % of people surveyed who have read our reports and state that they help them make choices | Statistical evidence from the Health Survey NI, questionnaires completed during inspections and the e-questionnaire pilot will inform these measures |
| | Measure 4: % of respondents who have interacted with RQIA seeking information or advice and who say they were satisfied with this contact | |
| Organisations improve the way they deliver care as a result of our regulation, reviews and audits | Measure 5: % of service providers who state that RQIA's inspection, review and audit activities assist them in driving quality improvement | Statistical evidence from post questionnaires completed after inspections, reviews and audits. RQIA's iConnect will inform these measures. |
| | Measure 6: Time taken to triage information (e.g. whistleblowing, concerns, complaints, notifications) and respond appropriately | |
| We have developed and maintained a competent, engaged and high performing workforce | Measure 7: Positive staff feedback in employee surveys | liP and HSC Staff surveys. Sickness levels are provided by BSO HR. |
| | Measure 8: Sickness absence levels | |

Appendix 1 – Finance Section

1. Revenue Resource Limit (RRL)

Confirmation of the 2017-18 indicative RRL was received from the Department of Health (DoH) on 4 July 2017.

| | |
|-------------------------------------|---------------------|
| | £'000 |
| Recurrent Allocation Baseline | 6,707 |
| Total RRL Allocation 2017/18 | <u><u>6,707</u></u> |

This allocation includes a 2% reduction on the opening 2016-17 baseline and assumes that inescapable cost pressures such as pay awards, incremental drift, and non-pay inflationary pressures will be absorbed.

2. Estimated Income from Charges

The estimated income from charges in 2017/18 is £890K. This figure is based on the current fees and frequencies regulations and includes estimates in relation to registered places and registration fees.

3. Total Permitted Gross Revenue Expenditure

The total permitted gross revenue expenditure in 2017/18 is therefore estimated as follows:

| | |
|--|---------------------|
| | £'000 |
| Estimated RRL Allocation 2017/18 | 6,707 |
| Estimated Income from Charges | <u>890</u> |
| Total Permitted Gross Revenue Expenditure | <u><u>7,597</u></u> |

4. Capital Resource Limit (CRL)

A capital allocation in 2017-18 is subject to the approval of an Outline Business Case for the new MHLD Information System.

Glossary of Abbreviations and Terms

| | |
|----------------------|---|
| BCP | Business Continuity Plan |
| DDO | Disability Discrimination Order |
| DoH | Department of Health |
| EFQM | European Foundation for Quality Management |
| FOI | Freedom of information |
| HSC | Health and social care |
| iConnect | Corporate Information Management System |
| ICT | Information Communications Technology |
| IIP | Investors in People |
| IR(ME)R | Ionising Radiation (Medical Exposure) Regulations |
| MHLD | Mental health and learning disability |
| MHO | Mental Health (Northern Ireland) Order 1986 |
| MoU | Memorandum of Understanding |
| NIAO | Northern Ireland Audit Office |
| NISSC | Northern Ireland Social Care Council |
| NPM | National Preventive Mechanism |
| OPCAT | Optional Protocol to Convention Against Torture |
| PPI | Personal and Public Involvement |
| SAI | Serious Adverse Incidents |
| Lay Assessor | A member of the public who brings their own experience, fresh insight and a public focus to our inspections and reviews on a voluntary basis |
| Peer Reviewer | An individual with a particular skillset or an in-depth understanding of a particular service area and is engaged by RQIA to support its review and inspection programmes |



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