

## **RQIA Board Meeting – 13 May 2010**

### **2009/10 END OF YEAR REPORT**

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**Authors:** RQIA Staff (Executive Team, Heads of Programme, Corp Services)

**Presented by:** Maurice Atkinson

#### **Aim and Purpose**

This report presents an overview of RQIA's activities and progress against the 2009/10 business plan objectives until 31 March 2010.

The report reflects how RQIA has met its core activities and demonstrates how RQIA delivers value to its stakeholders.

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#### **Recommendation**

The Board is asked to **NOTE** the report.

**MAURICE ATKINSON**

Director of Corporate Services



## **Annual Report (2009- 2010)**

**Reporting period from 01 April 2009 - 31 March 2010**

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## **EXECUTIVE SUMMARY**

### **About RQIA:**

#### **Staffing at 31 March 2010**

At 31 March 2010 there were 140 staff members in post. This excludes 10 board members, 3 sessional staff and 24 bank staff. The WTE excluding board and sessional staff was 133.73.

The total number of establishments and agencies registered increased from 797 at 31 March 2009 to 927 at 31 December 2009 and to 931 at 31 March 2010. 56 adult placements have been de-registered.

Whilst significant progress has been made in the further registration of services new to regulation under the Transitional Order 2007, a significant number of day care services were identified as not meeting the standard for regulation. These issues have been reflected in the RQIA corporate risk register and have been brought to the attention of the Health and Social Care Board and to DHSSPS. RQIA continues to work with HSC colleagues to mutually address this matter.

#### ***Regulation via Inspection:***

During quarter 4 of 2009/10, 692 inspections of regulated sector services were carried out, compared with 620 in the previous quarter. During 2009/10, a total of 2586 inspections of regulated sector services were conducted.

In carrying out these inspections RQIA achieved all of its statutory requirements under the Fees and Frequencies Regulations 2005 for the minimum number of inspections for each establishment and agency.

In this quarter conditions of registration continued to be placed on Clifton Private Nursing Home as a result of ongoing enforcement action. A further 2 failure to comply notices were issued in quarter 4 of 2009/10, one of which was followed by a notice of proposal.

#### ***Regulation via Review:***

Within the final quarter of 2009/10, considerable progress was made with the following reviews:

- Child Protection arrangements (Phase 4 work complete and report being drafted),
- Review of Maternity Services (complete awaiting publication )
- Commissioned service review into Blood safety (complete and published)
- Commissioned service review into Paediatric IV infusions - Hyponatraemia (Completed and awaiting Board approval)
- Review of the use of IV Sedation in Dental Practices (complete and awaiting publication)
- Review of GP Out of Hours (Fieldwork complete - report being drafted)
- Child and Adolescent Mental Health Services (stage one fieldwork complete further stages in planning)

- Review of NIAS (Self assessment and fieldwork complete - report being drafted)
- Pathways to secure accommodation (fieldwork complete reported being drafted)
- GMC Revalidation (planning complete awaiting self assessment and fieldwork)

### ***Mental Health and Learning Disability***

Significant progress has been made in respect of statutory functions outlined within the Mental Health Order 1986. During this quarter 33 patient experience reviews were conducted with interviews held with 78 patients detained under the Mental Health Order. In quarter 4 2009/10 2432 prescribed forms were received and scrutinised. In 2009/10 9708 prescribed forms were received and scrutinised. Planning for a pilot of mental health facilities in June 2010 was significantly progressed in the last quarter of 2009/10.

### ***Rights Based Approach to Regulation***

Work on the implementation of a human rights based approach was further developed, including:

- Endorsement of the approach by RQIA Board and Executive Team
- Finalising Human Rights indicators for inspection of mental health and learning disability services with associated planning of an endorsement symposium by Human rights experts in May 2010.

- Planning of capacity building workshop for advocates of mental health and learning disability services by the US National Institute for Trial Advocacy (NITA) May 2010
- Ongoing Human Rights inputs to the review of pathways to secure accommodation for children and young people
- Planning for the incorporation of a rights based approach into policies and training.

## SECTION 1: CORE ACTIVITIES QUARTER ENDING 31 MARCH 2010

**CA1** **Improving Care: We encourage and promote improvements in the safety and quality of services through the regulation and review of health and social care**

**CA1.1** Completed a prioritised and focused programme of service reviews & inspections to inform our overall assessment of health and social care in Northern Ireland

### CA1.1.1 Registration

The Authority registers services delivered by statutory and independent (i.e. private and voluntary) providers to ensure they are of an acceptable standard and meet all statutory and best practice requirements. The number and type of registered establishments and agencies at 31 March 2010 is presented in Table 1. This information has been derived from RQIA's central register. The total number of registered establishments and agencies increased from 927 at the 31st December 2009 to 931 on 31 March 2010. Details on additions and removals from the register can be found below. Adult placement, nursing and domiciliary care agencies operate regionally and are not aligned to a Trust area.

**Table 1: Establishments/agencies registered by Trust 31 March 2010**

Type of establishment	BHSCT	NHSCT	SEHSCT	SHSCT	WHSCT	Total
<b>Total at 31 December 2009</b>	<b>143</b>	<b>144</b>	<b>138</b>	<b>105</b>	<b>117</b>	<b>927*</b>
Nursing homes	53	61	52	49	38	253
Residential care homes	45	59	61	27	46	233
Adult Placements						5**
Children's homes	12	12	9	10	10	53
Independent clinics	15	2	3	4	2	26
Independent hospitals / hospices	4	1	1	1	2	9
Nursing agencies						22
Day Care Settings	14	6	16	16	22	74
Domiciliary Care Agencies						249
Residential Family Centres	2	1				3
Adult Placement Agencies		3		1		4
<b>Total at 31 March 2010</b>	<b>145</b>	<b>145</b>	<b>142</b>	<b>108</b>	<b>120</b>	<b>931***</b>

\* 927 Total as presented as in last quarterly report was sum of trust totals and 257 domiciliary agencies and 23 nursing agencies.

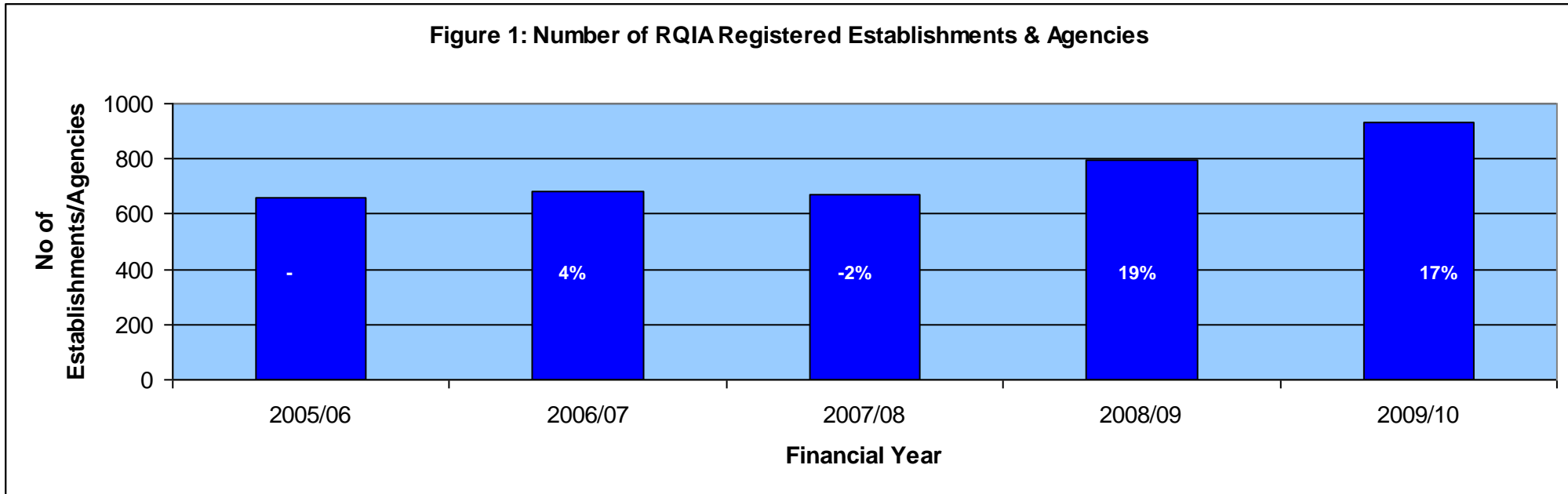
\*\* Of the previous 61 adult placements only 5 (i.e. 1 in BHSCT, 3 in NHSCT and 1 in SHSCT) remained on the Register at 31/3/10. These services were previously included within the residential care homes total

\*\*\* Total is the sum of Trust totals and Adult Placements, Nursing Agencies and Domiciliary Agencies

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**Figure 1: Number of RQIA Registered Establishments & Agencies**



The number of registered establishments and agencies presented in Figure 1 above has increased steadily with the exception of 2007/08. 2008/09 and 2009/10 brought significant increases with the registration of services new to regulation. RQIA has continually aimed to meet its regulatory targets even in light of the increasing workload and remit.

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**Table 2: Establishments/agencies registered bed numbers at 31 March 2010**

Type of establishment	BHSCT	NHSCT	SEHSCT	SHSCT	WHSCT	NI Total
Nursing homes	2160	2682	1997	2120	1622	<b>10,581*</b>
Residential care homes	1289	1025	1267	481	765	<b>4827</b>
Children's homes	84	75	78	56	69	<b>362</b>
<b>Total</b>	<b>3533</b>	<b>3782</b>	<b>3342</b>	<b>2657</b>	<b>2456</b>	<b>15,770**</b>

\* Total includes 568 residential care beds within nursing homes

\*\* The overall bed figure includes those beds in newly registered services and those re-categorised.

Registered bed numbers in nursing homes have increased in quarter 4 by 121 places compared to quarter 3 of 2009/10 whereas the bed numbers in residential care homes have increased by only 9 places and the total number of children's homes beds has decreased by 8 places. The overall bed figure for 2008/09 was 15,698.

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***Newly Registered Establishments/Agencies***

The new services registered in quarter 4 of 2009/10 include one nursing home (71 beds) and one independent clinic in the SHSCT area and one independent clinic in the BHSCT area. RQIA is also processing a substantial volume of registration applications in relation to the services new to regulation. Of these, 14 Day Care Settings, 6 Domiciliary Care Agencies and 1 Residential Family Centre were registered in quarter 4. Table 3 below presents the number of new registrations in 2009/10.

**Table 3: New Establishments/Agencies registered during 2009/10 - By Trust**

Type of establishment	BHSCT	NHSCT	SEHSCT	SHSCT	WHSCT	Total
Nursing homes	0	0	0	1	2	3
Residential care homes	0	0	1	0	0	1
Adult Placements	0	0	0	0	0	0
Children's homes	0	0	0	0	0	0
Independent clinics	2	0	0	2	1	5
Independent hospitals / hospices	0	0	0	0	0	0
Nursing agencies	0	0	0	0	1	1
Day Care Settings	0	0	0	0	0	52*
Domiciliary Care Agencies	0	0	0	0	0	161
Residential Family Centres	0	0	0	0	0	1
Adult Placement Agencies	0	0	0	0	0	2
<b>TOTAL</b>	<b>2</b>	<b>0</b>	<b>1</b>	<b>3</b>	<b>4</b>	<b>226</b>

\*A significant number of Day Care services (76) have been highlighted as not meeting registration standards during this quarter. These issues were highlighted to the DHSSPS and planning for a series of meeting with provider trusts was undertaken in order to secure affirmative action to achieve registration.

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***Deregistration of Services***

Twenty services were de-registered in quarter 4 2009/10. These include four residential homes, fourteen domiciliary care agencies, one children's home and one nursing agency. In total there have been 24 new services registered in quarter 4 and 20 de-registered thus making a net increase of 4 (i.e. 927 on the 31st December 2009 to 931 on the 31st March 2010). Table 4 below presents the number of de-registrations in 2009/10.

**Table 4: Establishments/Agencies de-registered during 2009/10 - By Trust**

Type of establishment	BHSCT	NHSCT	SEHSCT	SHSCT	WHSCT	Total
Nursing homes	0	0	0	0	1	1
Residential care homes	2	1	5	1	0	9
Adult Placements	0	0	0	0	0	56
Children's homes	1	0	0	0	1	2
Independent clinics	0	0	0	0	0	0
Independent hospitals / hospices	0	0	0	0	0	0
Nursing agencies	0	0	0	0	0	1
Day Care Settings	0	0	0	1	0	1
Domiciliary Care Agencies	0	0	0	0	0	22
Residential Family Centres	0	0	0	0	0	0
Adult Placement Agencies	0	0	0	0	0	0
<b>TOTAL</b>	<b>3</b>	<b>1</b>	<b>5</b>	<b>2</b>	<b>2</b>	<b>92</b>

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**CA1.1.2 Operations Regulation / Inspection Activity****Table 5: Inspections carried for Period 01 January - 31 March 2010 by Service Category and Inspection Speciality**

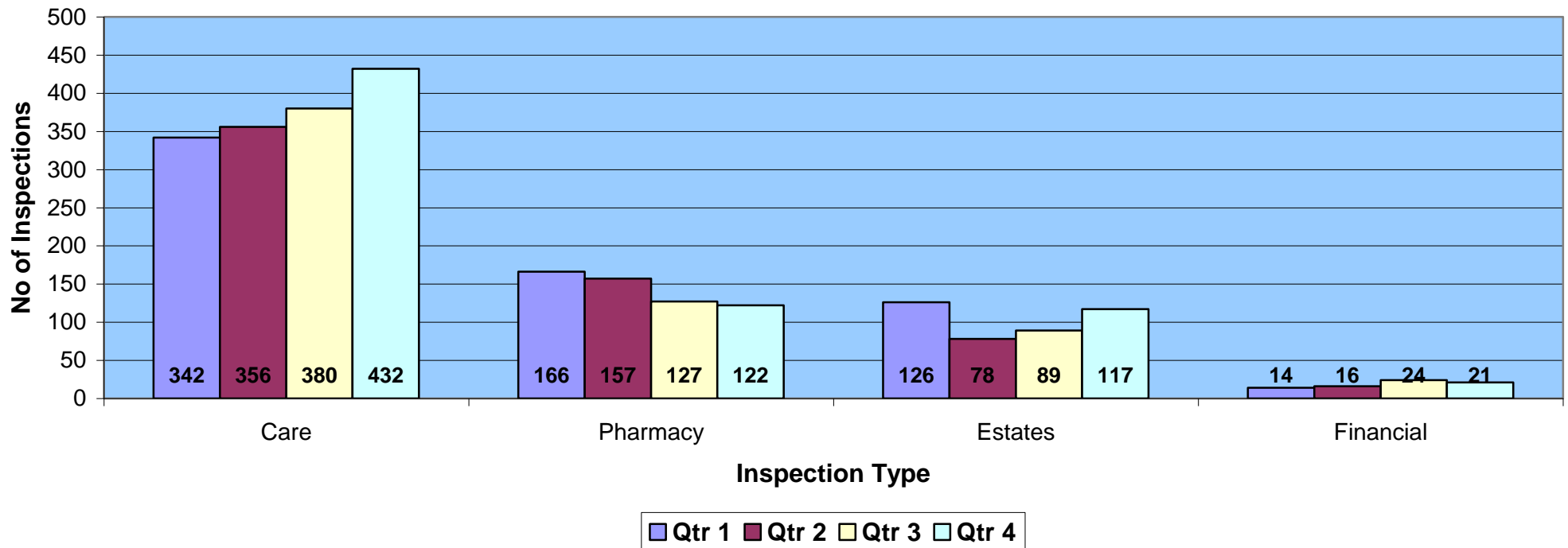
Category	Care	Estates	Finance	Pharmacy	Total in Qtr 4
Adult Placement Organisation	5				5
Children's (CH)	35	2		11	48
Day Care Setting (DCS)	27	45		3	75
Domiciliary Care Agency (DCA)	73		1	25	99
Independent Clinic	7	3			10
Independent Hospital	6	5		5	16
Nursing (NH)	150	28	13	58	249
Nursing Agency	5			3	8
Residential (RC)	123	33	7	17	180
Residential Family Centre (RFC)	1	1			2
<b>Total</b>	<b>432</b>	<b>117</b>	<b>21</b>	<b>122</b>	<b>692</b>

By the end of quarter 4, RQIA met its statutory obligations by ensuring it conducted the required minimum number of inspection for all identified establishments and agencies as outlined in the fees and frequencies regulations 2005.

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**Figure 2: RQIA Inspections By Type By Quarter 2009/10**



In the main inspection activity has remained regular with slight augmentation in capacity for care, estates and finance in the second half of the year.

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Within the last year as part of the developing inspection methodology RQIA selected a range of prioritised inspection standards for each of the regulated service areas involved in the methodology project. These thematic areas as outlined in table 6 were selected using the RQIA's prioritisation matrix. A similar exercise has taken place for the inspection year 2010/11.

**Table 6: Prioritised Inspection Standards 2009/10**

<b>Care Setting</b>	<b>Standards Inspected</b>
Domiciliary Care Agencies	Referral Arrangements Staff Recruitment Staff Training Protection from Abuse
Adult Placement Agencies	Referral Arrangements Staff Recruitment Staff Training Protection from Abuse
Care Homes	Needs Assessment Care Planning Care Review Recruitment of staff Infection Control (unannounced inspection theme)
Day Care	Needs Assessment Care Planning Management and Control of Ops Recruitment of Staff
Nursing Homes	Nursing Care Care records Staffing Recruitment Infection Control (unannounced inspection theme)

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**Table 7: Inspections completed for Period 01 April 2009 - 31 March 2010 by Service Category and Inspection Speciality**

<b>Category</b>	<b>Care</b>	<b>Estates</b>	<b>Finance</b>	<b>Other</b>	<b>Pharmacy</b>	<b>Total 2009/10</b>
Adult Placement Agency(APA)	5					5
Boarding School	12				3	15
Childrens (CH)	121	30			36	187
Day Care Setting (DCS)	68	85	1		39	193
Domiciliary Care Agency (DCA)	248	2	1		79	330
Independent Clinic	22	22			3	47
Independent Hospital	14	7			9	30
Nursing (NH)	503	133	41	3	275	955
Nursing Agency	21				3	24
Residential (RC)	509	130	40		119	798
Residential Family Centre (RFC)	1	1				2
<b>Total 2009/10</b>	<b>1524</b>	<b>410</b>	<b>83</b>	<b>3</b>	<b>566</b>	<b>2586</b>

Since the 1 April 2009 RQIA carried out 2586 inspections across the full range of regulated sector services. In carrying out these inspections RQIA achieved all of its statutory requirements under the Fees and Frequencies Regulations 2005 for the minimum number of inspections for each establishments and agency. In March 2010 notional targets for all types of inspection across agencies were set based on the previous year's inspection activity. These targets were set on the basis of high levels of pre-registration inspections in 2008/09 and the high levels of enforcement follow-up for the previous year. As a result of these projections, a target inspection volume for care inspections was set at 1790. This target was not achieved for a number of reasons that include high sickness levels in the nursing and care homes teams and lower numbers of establishments and agencies subject to enforcement follow-up inspections. The non achievement of this target did not impact on RQIA's achievement of statutory minimum inspections. Due to the revisions in pharmacy and estates team capacity the inspection frequencies were adjusted for the year to pharmacy inspections 512 (target met) and estates inspections 388 (target met). During the course of the year responsibility for the management of finance inspection transferred from the Corporate Services Directorate to the Operations Directorate.

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As yet the team resource for finance inspection has operated with 1 WTE inspector and support from the business services organisation. Recent developments in the job evaluation of the finance inspector posts will enable RQIA to move to recruit into the within the next 2 two months.

**Table 8: Inspections carried out for period 01 January - 31 March 2010 by Inspection Type, Purpose and Speciality**

Type	Purpose	Care	Estates	Finance	Pharmacy	Total
Announced	Enforcement Monitoring (FTC)	1				1
	Follow Up	3				3
	Pre Registration	14	3		5	22
	Scheduled	287	113	21	5	426
	Variation to Registration	1				1
Unannounced	Complaints Investigation	2	1			3
	Enforcement Monitoring (FTC)				2	2
	Follow Up	13			2	15
	Post Registration				4	4
	Pre Registration				13	13
	Scheduled	111			91	202
<b>Total</b>		<b>432</b>	<b>117</b>	<b>21</b>	<b>122</b>	<b>692</b>

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**Table 9: Inspections carried out for period 01 April 2009 - 31 March 2010 by Type and Speciality**

Type	Purpose	Care	Estates	Finance	Other	Pharmacy	Total
Announced	Complaints Investigation			1			1
	Enforcement Monitoring (FTC)	4					4
	Follow up	10	5				15
	Incident Investigation	3					3
	Other	3					3
	Post Registration	3	2				5
	Pre Registration	52	30			20	102
	Scheduled	858	364	82		12	1316
	Variation to Registration	4	7				11
Unannounced	Complaints Investigation	8	2				10
	Enforcement Monitoring (FTC)	13				5	18
	Follow up	38				16	54
	Incident Investigation	4					4
	Post Registration					34	34
	Pre Registration					23	23
	Scheduled	524			3	456	983
<b>Total</b>		<b>1524</b>	<b>410</b>	<b>83</b>	<b>3</b>	<b>566</b>	<b>2586</b>

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**CA1.1.2 Operations Regulation / Inspection Activity**

For the new financial year the Inspection Activity Monitoring System (IAMS) was updated, introducing a tightening of the way the targets are calculated. Instead of a 20 working day target that takes account of bank holidays as well as annual and sick leave, the Key Performance Indicators are now calculated based on a fixed non moveable target based on 28 calendar days.

The three main performance indicators remain as follows:

Target 1. 90% of Inspections carried out on scheduled date;

Target 2. 75% of draft reports issued within 28 days of completed inspection;

Target 3. 80% of open reports issued within 28 days of draft report issue date.

RIQA continues to perform well in terms of these targets. From 1 January until 31 March 2010 Table 10 overleaf shows a 96% achievement within all teams of our target to carry out all inspections on the scheduled date. This compares with the same performance figure for the previous quarter of 97%. In relation to Target 2, draft reports completed within 28 days, the overall percentage of compliance with this target was 77% in comparison to 75% in the previous quarter. Target 3 shows the same compliance rate of 99% for this quarter as the previous quarter.

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**Table 10: Inspections KPI Report for Period 01 January - 31 March 2010**

Team	Specialism	Inspections			Draft Report			Open Report		
		Scheduled	On time	% on Time	Due	On time	% on Time	Due	On time	% on Time
Agencies	Care	55	55	100%	75	72	96%	83	83	100%
Residential*	Care	148	134	91%	142	103	73%	135	134	99%
	Estates	116	116	100%	104	101	97%	96	96	100%
Children's	Care	36	36	100%	41	34	83%	33	33	100%
Finance^	Finance	22	21	95%	27	17	63%	24	24	100%
Independent Health^^	Care	12	11	92%	11	8	73%	10	9	90%
Mental Health	Care	11	8	73%	2	1	50%	1	1	100%
Nursing***	Care	158	149	94%	129	65	50%	139	132	95%
	Pharmacy	124	123	99%	115	98	85%	97	97	100%
<b>Total</b>		<b>682**</b>	<b>653</b>	<b>96%</b>	<b>646</b>	<b>499</b>	<b>77%</b>	<b>618</b>	<b>609</b>	<b>99%</b>

see footnotes overleaf for tables 10 & 11.

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**Table 11: Inspections KPI Report for Period 01 April 2009 - 31 March 2010**

Team	Specialism	Inspections			Draft Report			Open Report		
		Scheduled	On time	% on Time	Due	On time	% on Time	Due	On time	% on Time
Agencies	Care	248	248	100%	235	136	58%	224	223	100%
Residential*	Care	497	416	84%	464	340	73%	423	419	99%
	Estates	407	407	100%	379	371	98%	358	358	100%
Children's	Care	143	135	94%	131	121	92%	109	109	100%
Finance^	Finance	83	79	95%	84	36	43%	94	81	86%
Independent Health^^	Care	33	32	97%	32	21	66%	27	23	85%
Mental Health	Care	9	8	89%	2	1	50%	1	1	100%
Nursing***	Care	589	558	95%	538	273	51%	434	423	97%
	Other	3	3	100%	3	0	0%	3	3	100%
	Pharmacy	559	551	99%	469	431	92%	430	424	99%
<b>Total</b>		<b>2571**</b>	<b>2437</b>	<b>95%</b>	<b>2337</b>	<b>1730</b>	<b>74%</b>	<b>2103</b>	<b>2064</b>	<b>98%</b>

\* The Residential team also conducts Estates inspections (previously conducted by Agencies team).

\*\* Additional inspections were carried out during the quarter which were scheduled to take place outside the reporting period, which accounts for the difference between the above figure and the total number of inspections carried out as per Tables 7 and 9.

\*\*\* The Care inspectors within the Nursing and Pharmacy Regulation team have been under pressure emanating from the inspection of high risk homes and three staff members on sick leave hence the delayed issue of draft reports.

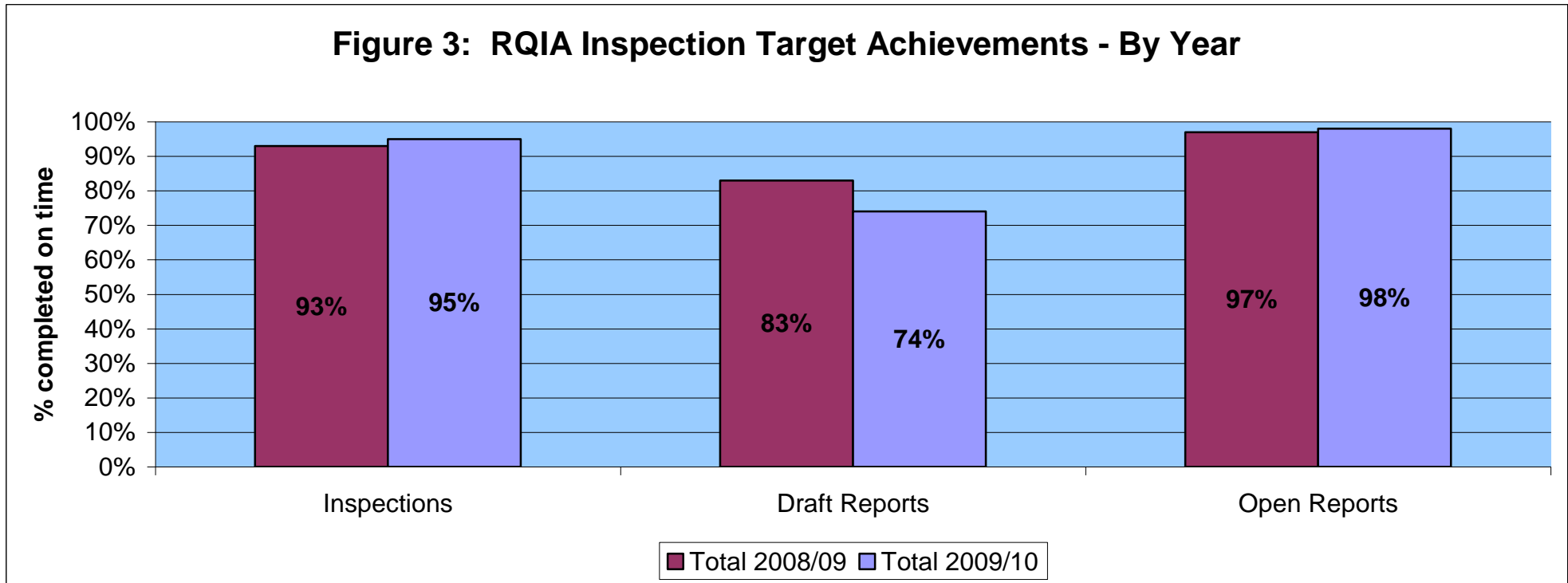
^ Not currently performance managed as part of Operations Regulation

^^ Some activity relates to visits to establishments to determine the need for registration and this does not result in the requirement for an open report. It is anticipated that this activity may be removed from IAMS.

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**Figure 3: RQIA Inspection Target Achievements - By Year**



For 2009/10 RQIA has exceeded its targets in relation to the completion of inspections and release of open reports. The completion of draft reports within schedule has feel slightly short of target but this is mainly due to staffing capacity and factors out of the RQIAs control (e.g. receipt of responses to draft reports).

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**CA1.1.3 Operations Review Activity**

Following a consultation process with relevant stakeholders RQIA has developed a 3-year review programme which is now available on the RQIA website.

**Table 12: Health and Social Care Governance Reviews**

<b>Trust</b>	<b>Type of Review</b>	<b>Review Visit Dates</b>	<b>Status</b>	<b>Reporting Date</b>
All HSC Trusts	Child Protection Review	Stages 1,2,3 Complete Stage 4 February 2010 Stage 5 April 2010	Stage 4, fieldwork complete and report being drafted Stage 5, fieldwork planned for June 2010	Report pending
All HSC Trusts	Maternity Services Intrapartum care Review	March/April 2009.	All stages completed.	Reports complete and approved by RQIA Board publication pending May 2010
All HSC Trusts	Blood Safety Review	Review visits completed.	Review completed.	Reports published
All HSC Trusts	Service review Paediatric IV Infusions- Hyponatraemia.	October 2009	Review completed.	Report complete and publication pending May 2010
All providers	Pathway to Secure Accommodation	Throughout 2009/10	Fieldwork complete report being drafted	Report being drafted for Board meeting June 2010
Ambulance Trust	Governance Review	April 2010	Ongoing.	July 2010
All Trusts	Discharge information workshop	GAIN guidelines to be produced by March 2010	Discharge dataset agreed. Guideline being prepared. Implementation plan being developed.	Guidelines being finalised
HSC Board	Follow up review of intravenous sedation in general dental practices	Review visits October/November 2009	Practice visits completed 10/12/09.	Board approval given March 2010. Report with DHSSPSNI.
All Trusts	IRMER	Inspections commence 2010	Responsibilities transferred 15 March 2010	Ongoing inspection activity from Qtr 1 2010/11
HSC Board	GP Out of Hours Services	Visits November 2009	Interviews with and visits to providers completed 29/11/09.	For approval at Board meeting in July 2010
All Trusts	Revalidation pilots	Visits June 2010	Work continues in conjunction with GMC. . Planning well advanced and fieldwork dates agreed for June 2010.	September 2010

**SECTION 1: CORE ACTIVITIES QUARTER ENDING 31 MARCH 2010**

<b>CA1</b>	<b><u>Improving Care:</u> We encourage and promote improvements in the safety and quality of services through the regulation and review of health and social care</b>
<b>CA1.1</b>	Completed a prioritised and focused programme of service reviews & inspections to inform our overall assessment of health and social care in Northern Ireland

RQIA has committed to ensuring that a number of inspections are conducted out of hours in line with organisational Key Performance Indicators. Figures for out of hours inspections will be available from the IAMS system in subsequent quarters.

RQIA continues to circulate on a frequent basis copies of relevant circulars and alerts. As far as possible email is used to speed up the distribution and this has reduced the need for postage.

A commencement order will be made in advance of the regulations in April - May 2010. The commencement order will contain transitional arrangements for the four voluntary adoption agencies currently registered with the department. The voluntary adoption agencies will have a period of 2 months after commencement to submit an application to RQIA. There is no further progress to report on the regulation of fostering.

On 15 March 2010 The Ionising Radiation (Medical Exposure) (Amendment) Regulations (Northern Ireland) 2010 took effect and responsibility for the regulation and inspection of the Ionising Radiation (Medical Exposure) Regulations transferred to RQIA. An inspection programme for the year 2010/11 has been developed and will be reported on in subsequent performance reports.

An amendment to the Misuse of Drugs Regulations (Northern Ireland) which came into force on 1 July 2006 made it a requirement that all private prescriptions for schedule two and schedule three controlled drugs must be written on a dedicated private controlled drug prescription form (PCD1) issued by the CSA. RQIA in conjunction with DHSSPSNI Medicines Inspectorate, CSA and Board Prescribing Advisors have final responsibility for deciding on validity of these requests. As a result of these responsibilities RQIA maintain a record of approvals made for private prescribing. In quarter 4 no approvals were given. For the year to date RQIA received 8 requests for approval for private controlled drug prescribing, 5 of these requests were granted, 3 were refused.

The RQIA Director of Quality Assurance attended a meeting with DHSSPSNI in March 2010. Early Years standards require to be reviewed and DHSSPSNI will set up a working group to finalise these by September 2010.

In 2009/10 100% of governance and service reviews and inspections were completed in line with agreed terms of reference.

## SECTION 1 - CORE ACTIVITIES QUARTER ENDING 31 MARCH 2010

CA1	<b><u>Improving care</u> : We encourage and promote improvements in the safety and quality of services through the regulation and review of health and social care.</b>
CA1.2	Improved local and national methods for the inspection and review of services

### **CA1.2.1 Information Sourcing Project**

The project has identified a wide range of relevant sources of information which can inform the work of RQIA. Access to the Queens University Belfast Health on the Net (HONNI) website has been promoted to all RQIA staff. RQIA is developing MOUs with a number of organisations and this will facilitate sharing of information. The next stage of the project will be to examine how to make effective use of external sources of information to inform an Overall Assessment of Health and Social Care. During each review it is planned to prepare a profile of trends and issues in relation to the services which will draw on available sources of relevant information.

### **CA1.2.2 Inspection Methodology**

Quarter 4 saw a consolidation of ongoing developmental work in 2009/10. The tools and processes developed throughout the year for adult placement agencies, day care settings, domiciliary care agencies, nursing homes and residential homes have ensured that the 2010/11 year of inspections commenced in full on 1 April 2010. These developments include new or enhanced self-assessment, inspection workbooks, user surveys, inspection guidance, levels of achievement, evidence base and inspection feedback.

Eight information sessions were held in early February 2010 to engage provider representatives on both the enhanced processes and provide guidance on the focus of inspection for 2010/11. Over 850 representatives from provider organisations attended the service-specific sessions. A significant proportion of inspectors also attended these events. Feedback from the sessions has been positive. In addition, a series of information and training sessions for inspectors was held in March 2010 to ensure consistency of approach to inspection.

A series of guidance documents have been produced to provide details on the process of inspection as well as the evidence required to illustrate compliance with standards. The guidance also enables a greater understanding of the levels of achievement and maturity. This transparency of information means that both providers and inspectors are able to prepare for and carry out inspection in a more effective and informed manner with the aim of leading to a greater culture of ongoing improvement.

## SECTION 1 - CORE ACTIVITIES QUARTER ENDING 31 MARCH 2010

<b>CA1</b>	<b><u>Improving care</u> : We encourage and promote improvements in the safety and quality of services through the regulation and review of health and social care.</b>
<b>CA1.2</b>	Improved local and national methods for the inspection and review of services

### CA1.2.3 *Hygiene Inspection Programme*

**Table 13: Unannounced Hygiene Inspection Activity carried out during period 1 April 2009 - 31 March 2010**

Facility	Trust	Inspection Type	Date of Inspection	Status
Antrim Area Hospital Maternity	NHSCT	Unannounced	2 April 2009	Complete
Craigavon Area Hospital Maternity	SHSCT	Unannounced	2 April 2009	Complete
Erne Maternity	WHST	Unannounced	6 April 2009	Complete
Causeway Maternity	NHSCT	Unannounced	6 April 2009	Complete
Mater Maternity	BHSCT	Unannounced	7 April 2009	Complete
Lagan Valley Maternity	SEHSCT	Unannounced	7 April 2009	Complete
Altnagelvin Maternity	WHST	Unannounced	9 April 2009	Complete
Daisy Hill Maternity	SHSCT	Unannounced	9 April 2009	Complete
Ulster Hospital	SEHSCT	Unannounced	11 May 2009	Complete
Bluestone MHU	SHSCT	Unannounced	20 May 2009	Complete
Royal Hospital	BHSCT	Unannounced	29 May 2009	Complete
Knockbracken MHU	BHSCT	Unannounced	1 June 2009	Complete
Antrim Hospital	NHSCT	Unannounced	12 June 2009	Complete
Lagan Valley MHU	SEHSCT	Unannounced	18 June 2009	Complete
Ross Thompson Unit MHU	NHSCT	Unannounced	1 July 2009	Complete
Tyrone & Fermanagh Hospital MHU	WHST	Unannounced	8 July 2009	Complete
Downe Hospital MHU	SEHSCT	Unannounced	17 July 2009	Complete

**SECTION 1 - CORE ACTIVITIES QUARTER ENDING 31 MARCH 2010**

**CA1** Improving care : We encourage and promote improvements in the safety and quality of services through the regulation and review of health and social care.

**CA1.2** Improved local and national methods for the inspection and review of services

**Table 13 cont: Unannounced Hygiene Inspection Activity carried out during period 01 July - 30 September 2009**

Facility	Trust	Inspection Type	Date of Inspection	Status
St Luke's Hospital MHU	SHSCT	Unannounced	17 July 2009	Complete
Musgrave Park Hospital Acute	BHSCT	Unannounced	24 July 2009	Complete
Holywell Hospital MHU	NHSCT	Unannounced	27 July 2009	Complete
RBHSC Hospital Acute	BHSCT	Unannounced	6 August 2009	Complete
South Tyrone Hospital Acute	SHSCT	Unannounced	10 August 2009	Complete
Mater Hospital MHU	BHSCT	Unannounced	17 August 2009	Complete
Whiteabbey Hospital Acute	NHSCT	Unannounced	28 August 2009	Complete
Erne Hospital Acute	WHST	Unannounced	2 September 2009	Complete
Altnagelvin Hospital Re-audit Acute	WHST	Unannounced	5 October 2009	Complete
Downe Hospital Re-audit Acute	SESCHT	Unannounced	12 October 2009	Complete
Causeway Hospital Re-audit Acute	NHSCT	Unannounced	12 October 2009	Complete
Craigavon Hospital Re-audit Acute	SHSCT	Unannounced	14 October 2009	Complete
Belfast City Hospital Re-audit Acute	BHSCT	Unannounced	8 October 2009	Complete
Mater Hospital Re-audit Acute	BHSCT	Unannounced	12 November 2009	Complete
Mid Ulster Hospital Re-audit Acute	NHSCT	Unannounced	30 November 2009	Complete

## SECTION 1 - CORE ACTIVITIES QUARTER ENDING 31 MARCH 2010

<b>CA1</b>	<b><u>Improving care</u> : We encourage and promote improvements in the safety and quality of services through the regulation and review of health and social care.</b>
<b>CA1.2</b>	Improved local and national methods for the inspection and review of services

As outlined above the 15 acute hospitals, 9 mental health units and 8 maternity units were inspected in the current year. A total of 61 wards and departments were inspected as a result of this activity. 7 of the audits were re-audits of acute hospital facilities.

In the period from 30th November 2009 until 31 March 2010 there were no unannounced inspections of hospital wards / clinical areas. The decision to defer further planned inspections in the period was taken following consultation with the DHSSPS to facilitate the activities of the newly established Regional Review group which was tasked by the Minister to complete an audit of the work being undertaken by the five health and social care trusts in response to the action plans submitted to RQIA following the previous inspections.

Other activity undertaken by the Infection Prevention and Hygiene team included involvement in the assessment of 15 facilities as part of stage 4 of the child protection review. The team also assisted the nursing regulation team with a series of unannounced inspections as well as providing advice and training to the other regulation teams on infection control.

In quarter 4 the team also commenced planning for the review of nutrition and food hygiene. The team has also been involved in the review of the DHSSPS review of the Cleanliness Matters Strategy and is part of the departmental reference group to develop new standards for environmental hygiene and infection prevention and control practices. External links have been developed with Environmental Health and the Food Standards Agency and the team is now represented on the Regional Food Liaison Group.

See section CA1.2.2 above for improvements in relation to RQIA's inspection methodologies.

A review of possible methodologies for use during RQIA reviews was completed in July 2009. This is being used to ensure best practice methodologies are considered whilst planning reviews.

RQIA has committed to producing an annual report of outcomes and recommendations of quality assurance activity. This will be completed in the form of an Overall Assessment of Health and Social Care (see CA1.2.1).

## SECTION 1 - CORE ACTIVITIES QUARTER ENDING 31 MARCH 2010

CA1	<b><u>Improving care</u> : We encourage and promote improvements in the safety and quality of services through the regulation and review of health and social care.</b>
CA1.3	Evidenced that the results of our programme of inspections and reviews is having a demonstrable impact on service improvement

### CA1.3.1 Impact of Operations Regulation - *Enforcement*

During the quarter, 2 FTC notices were issued to children's homes. One notice relating to statement of purpose and staffing was issued to and complied with by Rossneal House Children's Home. An FTC notice relating to the statement of purpose was issued to Cuan Court Children's Home on 5 March 2010. Non-compliance with this notice has resulted in the escalation to a issue of legal notice of proposal on 23 March 2010, outlining conditions of registration to be applied to the home's registration status.

During the quarter RQIA initiated action in respect of a private medical agency operating out of premises at 440 Antrim Road Belfast. Legal advice on actions to be taken was sought and liaison with the HSC Board on the status of the responsible person was initiated.

Throughout the year RQIA's issued 4 failure to comply notices, this compares with 7 issued in the year 2008/09. In this year RQIA escalated enforcement action in respect of one nursing home, placing conditions of registration on the home (Clifton House Nursing Home) and issued a notice of proposal to place conditions of registration on Cuan Court Children's home for non compliance with a notice of failure to comply with regulations.

In the last year RQIA identified 3 facilities accommodating young people aged 16 and 17 in residential care that were identified as unregistered. The young people placed in these facilities were placed there by the HSC Trusts. These facilities were inspected in May and June 2009 and as a result 2 of the facilities voluntarily closed. The third facility applied for registration as a children's home with RQIA.

A further 13 facilities across Northern Ireland were identified as providing a total of 64 places for young people on the leaving care pathway including those under 18 years. These facilities are currently operating within an interim joint commissioning arrangement agreed with DHSSPS and NIHE, incorporating Supporting People funding and are not registered as Children's Homes.

**SECTION 1 - CORE ACTIVITIES QUARTER ENDING 31 MARCH 2010**

<b>CA1</b>	<b>Improving care : We encourage and promote improvements in the safety and quality of services through the regulation and review of health and social care.</b>
<b>CA1.3</b>	Evidenced that the results of our programme of inspections and reviews is having a demonstrable impact on service improvement

<b>Service</b>	<b>Details of 'failure to comply' (FTC) notice</b>	<b>Date of issue</b>	<b>Date compliance achieved</b>
Brooklands Private Nursing Home, Kilkeel	Care issues Record keeping Staffing	3 February 2009(FTC)	27 April 2009
The Model Care Centre, Private Nursing Home, Ballymoney	Care and treatment issues Staffing Medicines Infection control Record keeping	4 March 2009(FTC)	3 June 2009
Clifton House Nursing Home (Benn Suite), Belfast	Care issues Record keeping Staffing	24 June 2009(FTC)  28 September 2009 (Notice of proposal)  4 November 2009 (notice of decision placing conditions on the registration of the home)	Ongoing as at 31 March 2010 RQIA continues to monitor the home through regular inspection to ensure the safety and wellbeing of residents at the Benn Suite
Rossneal House Children's Home	Statement of purpose Staffing	3 March 2010(FTC)	10 March 2010
Cuan Court Children's Home	Statement of purpose	5 March 2010(FTC)  23 March 2010 (Notice of proposal)	Ongoing as at 31 March 2010

## SECTION 1 - CORE ACTIVITIES QUARTER ENDING 31 MARCH 2010

<b>CA1</b>	<b><u>Improving care</u> : We encourage and promote improvements in the safety and quality of services through the regulation and review of health and social care.</b>
<b>CA1.3</b>	Evidenced that the results of our programme of inspections and reviews is having a demonstrable impact on service improvement

DHSSPS is currently working to complete minimum standards for Supported Accommodation operating under the provisions of the interim joint commissioning arrangement and providing services to young people.

The Children's Services Team carried out an inspection of one such facility on 3 February 2010 in response to concerns which had been raised by a whistleblower. The report of that inspection has been prepared and issued to the service provider. A written response was received on 3 March 2010.

After a series of meetings with the HSC Board and the Acting Chief Social Services Officer, a number of actions were agreed which will include RQIA undertaking inspections of all 13 facilities. The programme of inspections of all 13 facilities is planned to commence in June 2010 and will be completed by July 2010.

Following the identification of 76 statutory day care facilities as being unable to register mainly as a result of estates requirements identified on pre registration inspection RQIA held a series of meetings with four Trusts and the DHSSPS. Following a series of bi-lateral meetings with the trusts a programme of capital works was undertaken by each trust. As a result of these interventions 24 services were progressing to immediate registration, 38 to progress to registration with conditions to be met by 31 March 2011 and a further 9 identified as not meeting registration standards. A further 5 services were awaiting a move to new premises and making a renewed application for registration for the new service or were changing the model of service delivery which takes them outside of the regulatory framework.

## SECTION 1 - CORE ACTIVITIES QUARTER ENDING 31 MARCH 2010

CA1	<b><u>Improving care</u> : We encourage and promote improvements in the safety and quality of services through the regulation and review of health and social care.</b>
CA1.3	Evidenced that the results of our programme of inspections and reviews is having a demonstrable impact on service improvement

### CA1.3.2 Impact of Operations Review

In 2009/10 RQIA committed to plan and carry out an impact analysis of the work of RQIA. An assessment of the review programme's impact on improvements in care will be undertaken via a review of action plans submitted by relevant HSC organisations following publication of reports. These actions will be compiled into a composite report at the year end using the core activities as the key measures of impact. Following completion of the development of a planned and prioritised programme of inspection the planning group will commence work on benefits realisation for the review programme. A summary of this work will be included in the RQIA annual report.

RQIA has also committed to further develop its information systems in assessing the impact of regulation in the quality and standard of service provision through:

- 1) New methodology of inspection (see CA1.2.1)
- 2) Monitoring of incidents from regulated sector (see CA1.3.4)
- 3) Monitoring of complaints within regulated sector services (see D2.1.1)
- 4) Reviewing how the guidance issued by RQIA is being implemented by the regulated sector (e.g. *C difficile*, management of patients' finances). A planned review of the arrangements and implementation of the RQIA review recommendations is scheduled to take place as part of the agreed CSCG Review Programme in 2010/11.

### CA1.3.3 Service Improvement

#### ***Incident Reporting Project***

New arrangements for the reporting, recording and analysis of incidents from the regulated sector to RQIA have been designed and roll out commenced across services in the period January to April 2010. New reporting templates have been developed and guidance prepared for provider organisations. Under the new arrangements all incidents are entered onto a common database which has been developed and under the new system providers in the regulated sector are asked to return incidents into RQIA using email/fax. A full time dedicated central incident administrator has been recruited for one year in the first instance. All new incidents will now be risk assessed by the relevant inspector using a recognised tool which will determine whether the incident is to be closed or followed up by the inspector.

## SECTION 1 - CORE ACTIVITIES QUARTER ENDING 31 MARCH 2010

<b>CA1</b>	<b><u>Improving care</u> : We encourage and promote improvements in the safety and quality of services through the regulation and review of health and social care.</b>
<b>CA1.3</b>	Evidenced that the results of our programme of inspections and reviews is having a demonstrable impact on service improvement

### ***Deaths and Notifiable Incidents from Children's Homes***

The detailed notifications required from children's homes which are very clearly defined within the Children's (NI) Order 1995 are presented in table 14. There have been no death notifications in children's homes.

**Table 14: Notifications received from children's homes during period 01 April 2009 - 31 March 2010**

<b>Notifiable event</b>	<b>No of Events</b>
Staff misconduct under POCVA: alleged abuse	1
Staff misconduct under POCVA: other unprofessional conduct	1
Serious illness or serious accident sustained by child	102
Outbreak of infectious disease: serious in nature	4
Allegation of serious offence by child	121
Involvement/Suspected involvement of child in sexual exploitation	22
Serious incident necessitating calling police to home	270
Child protection enquiry involving child accommodated	41
<b>Total</b>	<b>562</b>

- *The high levels of police called to homes has been identified and raised at inspections re the development of strategies to reduce these figures.*
- *Young people requiring medical intervention relates to self harm. Referrals were made to CAMHS.*

The highest number of events reported during this inspection year relates to serious incidents necessitating calling the police to the home. In most incidents the involvement of police has been appropriate and necessary. Inspectors addressed any incidents where they considered excessive use of police with the respective provider. There was also evidence throughout the year to suggest that the police have adopted a more robust approach to ensure that young people are adhering to their bail conditions. However, at times, as a result of the police being called to the home, young people may be arrested and charged with criminal damage or assault, which increases the statistic for young people charged with offences. The figure for illness or accident to a young person is also high, the main reason being the amount of hospital treatment / hospitalisations for young people who have self harmed through cutting or overdosing. A small number of suicide pacts in some homes were reported. In each instance, the intervention and action taken had been robustly risk managed.

**SECTION 1 - CORE ACTIVITIES QUARTER ENDING 31 MARCH 2010****CA2      Informing the Population We publicly report on the safety, quality and availability of health and social care****CA2.1**      Make available our register of regulated establishments and agencies, our programme of work, and all inspection and review reports on in easy, accessible and available formats***Web-based Register***

During the year RQIA developed a specification and proposal for the development of a web-based version of the register of regulated establishments. This will support RQIA in meeting its strategic objective of making all inspection reports (both announced and unannounced) accessible to the public through the RQIA website. At present this information is not available online, but can be requested via the website. During quarter 4 this development work was completed to allow open inspection reports to be made available online during 2010-11.

***Use of RQIA Information (KPI)***

RQIA has committed to producing an assessment of the extent to which people are using our information about the safety, quality and availability of health and social care. This issue will be considered as part of RQIA's review of its Corporate Strategy KPQs and KPIs in 2010.

***Freedom of Information / Data Protection***

There were 14 FOI requests in Qtr 4 2009/20 and they were all responded to within 20 working days. There were 4 subject access requests made in the last quarter, 3 of which were responded to within the appropriate timescale. 1 request remains outstanding but is expected to be complied with within the 40 calendar day time period. In total there were 34 FOI requests made in the period April 2009 to March 2010. One of these requests was of a complex nature and required consultation with external bodies, and thus was not responded to within 20 working days. There were also 6 subject access requests made, 5 of which were responded to and 1 which is expected to be responded to within the appropriate deadline.

**SECTION 1 - CORE ACTIVITIES QUARTER ENDING 31 MARCH 2010**

<b>CA2</b>	<b><u>Informing the Population</u> We publicly report on the safety, quality and availability of health and social care</b>
<b>CA2.2</b>	Use our information to provide an overall assessment of the state of health and social care in NI.

**CA2.2.1 Service Improvement**

RQIA has established a project to develop an overall assessment of the state of health and social care. This will build on the findings of the review programme for the period 2009-12 and the results of our inspection programmes. The project group is considering possible approaches to the presentation of an overall assessment and the potential to include information from a wide range of external sources on care quality such as the Northern Ireland Cancer Registry and national audits to which Northern Ireland contributes. The project group completed a draft of a planned and prioritised programme of reviews using a range of tools developed since April 2009. The draft programme was approved by the RQIA Board in January 2010 and will be circulated widely. In quarter 4 further work has been developed in respect of tools to report on benefits realisation from the review programme, enhanced methods of performance management of the review programme and further exploration of how the overall assessment will be presented.

## SECTION 1 - CORE ACTIVITIES QUARTER ENDING 31 MARCH 2010

<b>CA3</b>	<b><u>Safeguarding Rights:</u> We act to protect the rights of all vulnerable people using health and social services</b>
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<b>CA3.1</b>	Ensure all RQIA work takes account of the principles and legislative basis of Human Rights and Equality
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### CA3.1.1 Equality and Human Rights Issues

RQIA continues to meet requirements under section 75 of the Northern Ireland Act (1998) by:

- carrying out equality screening on all new policies and procedures
- monitoring the implementation of recommendations from Mental Health (conducted by MHC prior to April 2009) Equality Impact Assessment. A meeting is scheduled for late February between BSO Equality Unit, Head of Mental Health and HR Manager to map progress against the delivery plan.
- working in partnership with other HSC agencies to progress the equality and human rights agenda.

Having taken up post in mid August the Human Rights Advisor developed the programme of work outlined at the Board meeting in December 2009. In this quarter there have been significant developments in the following areas:

- Training of RQIA Board and identified staff groups
- Organising and lead facilitation of a multi-agency round table discussion on deaths in custody
- Commencement of a specific RQIA prison HSC sub strategy which has included meetings with ex prisoner groups
- Development of a set of Human Rights indicators as a framework for the inspection of mental health and learning disability services, this has included the inclusion of a range of clinical and care indicators against which services can be expected.
- Planning and lead facilitation of an endorsement symposium for the HR indicators by a panel of internationally recognised HR experts.
- Planning of capacity building workshop for advocates of mental health and learning disability services by the US National Institute for Trial Advocacy (NITA)
- Ongoing Human Rights inputs to the review of pathways to secure accommodation for children and young people ( Additional HR inputs for the project were confirmed from Queens and Cork universities)
- Planning for the incorporation of rights based approach into policies and training.
- Planning and execution of an assessment framework for the joint inspection of Magilligan prison March 2010
- Ongoing liaison with a range of key academic, legal and HSC stakeholders in the promotion of RQIA HR based approach
- Presentation at a range of stakeholder events including the Joint stakeholder conference on 10 march 2010
- The HR advisor has also provided a range of supplemental legal advices to the executive and operational teams

**SECTION 1 - CORE ACTIVITIES QUARTER ENDING 31 MARCH 2010**

**CA3**      **Safeguarding Rights: We act to protect the rights of all vulnerable people using health and social services**

**CA3.1**      Ensure all RQIA work takes account of the principles and legislative basis of Human Rights and Equality

The Human Rights advisor also represents RQIA on the National group of National preventative Mechanisms (NPM) under OPCAT. Work on a coordinated multi-agency approach to deaths in custody also commenced in this quarter. A NPM report will be compiled for the UK central committee July 2010. Draft report to be presented to the RQIA Board June 2010.

In the last year RQIA have had a number of constructive meetings with the Northern Ireland Human Rights Commission and the Equality Commission. The Meeting with the Human Rights Commission centred on the potential for joint work with a range of inspectorate and oversight bodies, the investigation of human rights issues in nursing home accommodation and the development of the Human Rights Based approach by RQIA.

A tool for the evaluation of the discharge of the functions under the Mental Health Order 1986 was discussed at the first meeting of the Expert Advisory Panel. It is anticipated that the first interim report will be made to the panel in July 2010.

The first report on the discharge of responsibilities under OPCAT will be produced for the RQIA Board in July 2010 for approval and forwarding to the UK Coordinating Committee.

**SECTION 1 - CORE ACTIVITIES QUARTER ENDING 31 MARCH 2010**

**CA3**      **Safeguarding Rights: We act to protect the rights of all vulnerable people using health and social services**

**CA3.2**      Effectively discharged our functions under the Mental Health (Northern Ireland) Order 1986

**CA3.2.1      Responsibilities under Mental Health Legislation**

The Mental Health and Learning Disability Team's function is to monitor governance and service reviews undertaken in mental health and learning disability services in HSC Trusts, Boards and Agencies. From April 2009 the team assumed responsibility for the discharge of those functions as outlined under the Mental Health (Northern Ireland) Order 1986. During the quarter the following work streams have been progressed:

AREA OF WORK	STATUS							
<b>Serious Adverse incidents</b>	Desktop review of serious adverse incidents has been initiated and remains ongoing. From 1st April 2009 until end of March 2010 there were 129 cases in total. Table 15 below shows the number of serious adverse incidents reported from 1st January to 31 March 2010 and the number of episodes of under 18 admissions to Adult inpatient units .							
	<b>Table 15: Serious Adverse Incidents for Period 01 January - 31 March 2010</b>							
	Trust	Deaths				Other Serious Adverse Incidents	Total Serious Adverse Incidents	Number of under 18 admissions to inpatient units
		Suicide/Suspected Suicide	Natural Causes	Other	Unknown			
	BHSCT	5			3		8	9
	NHSC	2			1		3	8
	SEHSC	2		1			3	5
	SHSC	4					4	8
WHSC	4					4	1	
<b>TOTAL</b>	<b>17</b>	<b>0</b>	<b>1</b>	<b>4</b>	<b>0</b>	<b>22</b>	<b>31</b>	

**SECTION 1 - CORE ACTIVITIES QUARTER ENDING 31 MARCH 2010**

**CA3** Safeguarding Rights: We act to protect the rights of all vulnerable people using health and social services

**CA3.2** Effectively discharged our functions under the Mental Health (Northern Ireland) Order 1986

**CA3.2.1 Responsibilities under Mental Health Legislation (ctd)**

AREA OF WORK	STATUS							
<b>Serious Adverse incidents</b>	<b>Table 16: Serious Adverse Incidents for Period 01 April 2009 - 31 March 2010</b>							
	Trust	Deaths				Other Serious Adverse Incidents	Total Serious Adverse Incidents	Number of under 18 admissions to inpatient units
		Suicide/Suspected Suicide	Natural Causes	Other	Unknown			
	<b>BHSCT</b>	20	0	4	7	1	<b>32</b>	48
	<b>NHSCT</b>	16	2	1	5	1	<b>25</b>	20
	<b>SEHSCT</b>	22	0	5	1	1	<b>29</b>	10
	<b>SHSCT</b>	16	0	0	1	3	<b>20</b>	11
	<b>WHSCT</b>	18	0	1	3	1	<b>23</b>	20
<b>TOTAL</b>	<b>92</b>	<b>2</b>	<b>11</b>	<b>17</b>	<b>7</b>	<b>129</b>	<b>109</b>	

**SECTION 1 - CORE ACTIVITIES QUARTER ENDING 31 MARCH 2010**

**CA3**      **Safeguarding Rights: We act to protect the rights of all vulnerable people using health and social services**

**CA3.2**      Effectively discharged our functions under the Mental Health (Northern Ireland) Order 1986

AREA OF WORK	STATUS																																																															
<b>Monitoring of errors in prescribed forms and guardianship applications</b>	<ul style="list-style-type: none"> <li>A process has been established to monitor and capture details of accuracy of detention forms and guardianship applications being received from Trusts. Table 17 below shows the status of detention forms received from Trusts in over the past year since transfer of functions.</li> </ul>																																																															
	<b>Table 17: Status of Detention Forms Received for period 01 April - 31 March 2010</b>																																																															
	<table border="1"> <thead> <tr> <th rowspan="2"></th> <th colspan="5">Total Number of Forms Received</th> <th colspan="5">% Forms - Late Submissions</th> <th colspan="5">% Forms - Unsatisfactory</th> </tr> <tr> <th>Q1</th> <th>Q2</th> <th>Q3</th> <th>Q4</th> <th>Total</th> <th>Q1</th> <th>Q2</th> <th>Q3</th> <th>Q4</th> <th>Total</th> <th>Q1</th> <th>Q2</th> <th>Q3</th> <th>Q4</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td style="text-align: center;"><b>9708</b></td> <td></td> <td></td> <td></td> <td></td> <td style="text-align: center;"><b>66</b></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td><b>TOTAL</b></td> <td><b>2291</b></td> <td><b>2506</b></td> <td><b>2469</b></td> <td><b>2432</b></td> <td style="text-align: center;"><b>*</b></td> <td><b>69%</b></td> <td><b>61%</b></td> <td><b>62%</b></td> <td><b>69%</b></td> <td style="text-align: center;"><b>%</b></td> <td><b>7%</b></td> <td><b>3%</b></td> <td><b>3%</b></td> <td><b>3%</b></td> <td><b>4%</b></td> </tr> </tbody> </table>		Total Number of Forms Received					% Forms - Late Submissions					% Forms - Unsatisfactory					Q1	Q2	Q3	Q4	Total	Q1	Q2	Q3	Q4	Total	Q1	Q2	Q3	Q4	Total						<b>9708</b>					<b>66</b>						<b>TOTAL</b>	<b>2291</b>	<b>2506</b>	<b>2469</b>	<b>2432</b>	<b>*</b>	<b>69%</b>	<b>61%</b>	<b>62%</b>	<b>69%</b>	<b>%</b>	<b>7%</b>	<b>3%</b>	<b>3%</b>	<b>3%</b>	<b>4%</b>
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<i>* Figure exceeds total of four quarters due to late reporting in previous quarters</i>																																																																
<ul style="list-style-type: none"> <li>Errors have been identified and a significant number had not been copied to RQIA immediately as is required under Mental Health (Northern Ireland) Order 1986. In some cases the late submission meant that patients had been improperly detained because the timescales for Trusts to amend the forms (where permitted) had expired.</li> <li>Trust Chief Executives have been informed of these significant failings and the issue has been raised during ongoing meetings with each Trust. The trend noted earlier in the year for late submission of prescribed forms has been decreasing as have the proportion of unsatisfactory forms.</li> <li>This Information will also be reported by RQIA as the National Preventative Mechanism Under OPCAT</li> </ul>																																																																

An update on the provision of multi-disciplinary review of treatment plans and the making of recommendations through the appointment and operation of part iv doctors was not available at the point of producing this report due to a staff absence.

In Quarter 4 RQIA conducted a review of the management of patient finances by HSC Trusts under Article 116 of the Mental Health (NI) Order 1986. The First round of information gathering and assessment provided each of the trust's registers of patients in their care with finances over £5,000. A further series of information from trusts has been received providing RQIA with an opportunity to assess the

trust's processes for safeguarding patient finance. A short report on the activity under Article 116 will be available in June 2010.

## SECTION 1 - CORE ACTIVITIES QUARTER ENDING 31 MARCH 2010

<b>CA3</b>	<b><u>Safeguarding Rights:</u> We act to protect the rights of all vulnerable people using health and social services</b>
<b>CA3.2</b>	Effectively discharge our functions under the Mental Health (Northern Ireland) Order 1986
<b>CA3.2.1 Responsibilities under Mental Health Legislation (ctd)</b>	
<b>AREA OF WORK</b>	<b>STATUS</b>
<b>Meetings with Trust Directors</b>	<ul style="list-style-type: none"> <li>The post of Head of Mental Health and Learning Disability Review was filled on 1 December 2009. Further meetings with the directors and senior managers were undertaken in January/February 2010 to introduce the new post holder and introduce further developments in the programme of work under the related legislation these meeting have been conducted through the year and have proved useful in clarify role and effecting improvements in service provision</li> </ul>
<b>Patient Experience reviews (formerly Mental Health Surgeries)</b>	<ul style="list-style-type: none"> <li>Throughout the year the MHLDD developed and piloted a series of formal contact sessions with patients detained under the Mental Health Order 1986. From 12/01/10 to 26/03/10 a total of 33 psychiatric wards were visited and 78 detained patients interviewed. Patients were asked a series of questions based on 'Improving the Patient and Client Experience standards' and Human Rights indicators. Overall the level of care and treatment provided to detained patients is satisfactory. Some common issues have emerged: <ul style="list-style-type: none"> <li>Patients not always aware of their rights under detention</li> <li>Patients not actively involved in care planning</li> <li>Little evidence of regular patients forum meetings</li> <li>Not enough time with primary nurse</li> <li>Variance in opportunity to attend MDT meetings</li> <li>Privacy issues</li> </ul> </li> </ul>
<b>Guardianship Panel</b>	<ul style="list-style-type: none"> <li>Guardianship panel has met on 3 occasions this quarter and 11 times since 1 April 2010</li> <li>Since 1 January 2010 there have been 7 new applications for guardianship and 17 renewals. There were 68 current guardianship files in total at the end of the quarter.</li> </ul>
<b>Medical Panel</b>	<ul style="list-style-type: none"> <li>Medical panel has met on three occasions in the last year and meets quarterly. The issues which have been discussed are: <ul style="list-style-type: none"> <li>Appointment of Part II and Part IV Doctors</li> <li>Update of training to ensure competent practice</li> <li>Electronic transfer of forms</li> <li>Capacity</li> <li>Consent to treatment</li> <li>Clozapine Therapy</li> <li>Covert Medication</li> </ul> </li> </ul>

**SECTION 1 - CORE ACTIVITIES QUARTER ENDING 31 MARCH 2010**

<b>CA3</b>	<b><u>Safeguarding Rights:</u> We act to protect the rights of all vulnerable people using health and social services</b>
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<b>CA3.2</b>	Effectively discharge our functions under the Mental Health (Northern Ireland) Order 1986
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<b>AREA OF WORK</b>	<b>STATUS</b>
<b>Governance Review</b>	<ul style="list-style-type: none"> <li>The Child and Adolescent Mental Health Services review commenced in this quarter. A profiling questionnaire was distributed to and returned by all trusts. An assessment framework has been developed to take account of the full terms of reference and this is to be distributed in May 2010. Review team have been identified and field work planned for week commencing 28 June 2010.</li> </ul>
<b>Expert Advisory Panel</b>	The first meeting of the panel, chaired by Mr Richard Adams, was held on 10 March 2010. A further programme of panel meetings has been planned for the next 12 months.
<b>Learning from queries</b>	The process that has been established to capture range of incoming queries has continued. Legal advice has been sought following receipt of queries which require specialist advice, and regular meetings are held with Legal Services Department.
<b>Contribution to the development of new mental health legislation</b>	<p>RQIA continue to make constructive contribution to the drafting of the new Northern Ireland single Mental Health Bill. RQIA have made contribution to the NI steering group and have had meetings with the relevant officials in the DHSSPSNI on the future role of RQIA in the new legislation. Key issues discussed include:</p> <ul style="list-style-type: none"> <li>initial detention approval</li> <li>offenders</li> <li>tier 3</li> <li>community treatment orders</li> <li>advance directives/statement</li> <li>under 16's.</li> </ul> <p>A key area for the discussion on RQIA's role is its continuation in the oversight of services and its provision of clinical judgement in its oversight role.</p>
<b>Advocacy Forum</b>	A further 3 meetings of the Advocacy Forum were held in quarter 4.
<b>Trust Systems for the protection of patient monies</b>	In quarter 4 all HSC Trusts submitted information to RQIA on their protection and management of patient finances as outlined under Article 116 of the Mental Health Order 1986. An initial analysis of this information has taken place and further assurance has been requested from the trusts.
<b>Part ii and Part iv doctors</b>	In line with the legislation RQIA has continued to maintain a register of part ii and Part iv doctors.

## SECTION 1 - CORE ACTIVITIES QUARTER ENDING 31 MARCH 2010

CA4	<b><u>Influencing Policy:</u> We influence policy and standards in health and social care</b>
CA4.1	<b>Contributed to the development and improvement of regional policies and standards</b>

### CA4.1.1 Contributions to and impact on Policies, Procedures and Protocols

RQIA prepared a report to DHSSPSNI on areas of legislation, regulations and standards requiring review in the light of our experience. After consideration and approval by Executive Team this report was forwarded to DHSSPSNI, who acknowledged that the comments regarding the standards would be considered in any future review. In terms of the legislation and regulations DHSSPSNI has sought greater clarity regarding the issues initially highlighted and a re-submission is being prepared.

RQIA produced guidance leaflets / booklets to support implementation of standards and regulations for the regulated sector and guideline documents were disseminated to all registered providers at a series of road-shows in February 2010. These documents have also be placed on the RQIA website.

RQIA activity has also impacted the following regional policies and guidance in the last quarter:

- DHSSPSNI guidance on the management of mastitis
- Guidelines for care homes on the care of residents with diabetes
- Regional standards for environmental hygiene and infection control
- Development of formal guidelines for the discharge of patients from secondary care into primary care (to be launched in 2010)
- In line with the unpublished maternity services report recommendation the DHSSPSNI have launched a strategy for maternity services across Northern Ireland
- Following the series of unannounced hygiene inspections the DHSSPSNI have formed a regional advisory team on hospital hygiene and infection control, and are reviewing hygiene standards

## SECTION 2 - VALUE DRIVERS QUARTER ENDING 31 MARCH 2010

<b>D1</b>	<b>We engage effectively with our stakeholders</b>
<b>D1.1</b>	Developed effective communication methods to meet the complex and varied needs of the Northern Ireland public

### D1.1.1 Communications

During 2009/10 there was continued print and broadcast media interest in the work of RQIA, with a focus on regulation, enforcement and review activity across a wide range of services. The profile of the organisation also benefited from the launch of a number of inspection and review reports, including unannounced hygiene inspections and the Child Protection Review.

Engagement with political representatives also continued during the year with the RQIA Chief Executive, Director of Operations and Communications Manager meeting with health spokespersons from the main political parties, and representatives from the NIA Health Committee. RQIA also attended a number of Health Committee meetings, including evidence sessions on hospital hygiene and child protection issues.

To ensure that its staff and service providers were fully informed on H1N1 pandemic influenza (swine flu), significant additional content was added to the RQIA website and appropriate written information was issued to support regulated services in meeting their obligations at that time. This was also supported with regular written and verbal updates for RQIA staff. A business continuity plan and communications plan were prepared to deal with the potential impact of swine flu on RQIA activities.

Work has continued in the development of a new communications strategy for the period 2010-12 to reflect the priorities identified within the Corporate Strategy 2009-2012. Nominations were sought from the board to join a working group to support the development of the strategy.

RQIA has identified Sharepoint as a potential platform for the development of a corporate intranet to improve internal communication. This project will be jointly developed by the ICT, information and communications teams on the appointment of a Communications Officer.

The Annual Report and Accounts for 2008-09 was prepared for publication, and these were laid before the NI Assembly in advance of its publication at the November Board meeting.

## SECTION 2 - VALUE DRIVERS QUARTER ENDING 31 MARCH 2010

<b>D1</b>	<b>We engage effectively with our stakeholders</b>
<b>D1.1</b>	Developed effective communication methods to meet the complex and varied needs of the Northern Ireland public

### D1.1.2 Public Participation

Following the development of the RQIA Public Participation Strategy in 2008-09, an Action Plan was developed. Progress against the action plan is monitored by the Public Participation Implementation and Monitoring Group. There is an increased awareness of public participation across RQIA, which has resulted in a wide range of activities across RQIA regulation and review activities. These include:

- survey of 2,500 mothers in conjunction with the review of intrapartum care.
- public consultation on the RQIA Corporate Strategy 2009-12;
- partnership work with the PCC on the GP Out of Hours Service Review;
- the establishment of an MHLA advocates network;
- patient experience reviews where we engaged directly with detained mental health service users, making recommendations to trusts based on the information gathered;
- work in partnership with VOYPIC to engage with looked after young people and their families as part of Child Protection Review;
- involvement of care experienced young people in the inspection of children's services;
- road-show events to communicate the new methodology for inspection;
- development of user friendly questionnaires for people with learning disabilities in partnership with ARC;
- development of facilitation skills training for Agencies team staff in partnership with ARC and Beeches Management Centre, with input from service users with a learning disability; and,
- annual joint user and carer conference in partnership with the Northern Ireland Social Care Council (NISCC) and the Social Care Institute for Excellence (SCIE).

RQIA is also working closely with other HSC bodies in the newly formed Personal and Public Involvement (PPI) Regional Forum to create opportunities to work collaboratively on PPI issues across Northern Ireland.

## SECTION 2 - VALUE DRIVERS QUARTER ENDING 31 MARCH 2010

<b>D1</b>	<b>We engage effectively with our stakeholders</b>
<b>D1.2</b>	Developed strategic partnerships with stakeholder bodies to support improvement in the quality of health and social care in Northern Ireland

### D1.2.1 Operations Regulation

RQIA continue joint work with VOYPIC to establish and improve the input of young people as peer reviewers in the inspection of children's services. A number of peer reviewers underwent training which includes shadowing exercises with inspectors.

VOYPIC have also commenced work on service user feedback as part of the review of CAMHS.

RQIA are progressing work in gaining service user feedback in learning disability services using expertise from the group the Association for Real Change (ARC).

Proposals for a project aimed at improving access and feedback to users of regulated services was tabled and approved by the Executive Team.

An advocacy forum has been set up for advocacy in mental health and learning disability services. This work is to be further supplemented through the planned capacity building workshop with the US National Institute for Trial Advocacy to be held 13/14 May 2010. The workshop has been planned with the cooperation of the Patient and Client Council and the DHSSPSNI.

Four monthly liaison forums with each of the five health and social care trusts continue. The key issues for discussion at the meetings are the trusts' provision and interface with regulated sectors services. Additional meetings are held with trust managers of mental health and learning disability services on issues pertaining to RQIA's functions under the Mental Health Order. Liaison meetings also commenced with the HSC Board and plans are in place for liaison meetings with the public Health agency and the Patient Client Council. A programme of liaison meetings is also underway with key representative groups from the independent voluntary sector. These include the Independent Health Care Providers and the UK Healthcare Association.

RQIA continues to progress its commitment to establish a forum for effective joint working with other regulatory oversight and training bodies. Work has commenced in relation to revising the joint information sharing protocol with the NI Commissioner for Complaints and a Memorandums of Understanding (MOU) has been revised and agreed with NISCC. A MOU with SCIE is being revised.

Proof reading/plain English training took place during the year for RQIA staff and further training may be planned in the future.

## SECTION 2 - VALUE DRIVERS QUARTER ENDING 31 MARCH 2010

<b>D2</b>	<b>We maintain a robust governance framework</b>
<b>D2.1</b>	Met legislative requirements and best practice in relation to governance, risk management and independent assurance

### **D2.1.1 Complaints**

DHSSPSNI published a revised complaints procedure on 1 April 2009. Responsibility for investigating a complaint about any service provided by a regulated establishment or agency rests, in the first instance, with the provider. The provider is required, by legislation, to ensure that complaints are fully investigated and to make every attempt to achieve local resolution. The HSC Trust that has commissioned the care for a resident has a continuing duty of care to the service user and should assist in resolving complaints by using either 'expert advisors' by use of conciliation or by acting as an honest broker. This is known as enhanced local resolution. If local resolution is unsuccessful, the complainant can refer their concerns regarding the way a complaint was managed and/or the outcome of the complaint to the Northern Ireland Ombudsman. The role of RQIA is to ensure that providers have in place and operate an appropriate complaints procedure. The RQIA will follow up any alleged failure by a provider to comply with regulations and standards.

### **Complaints handling within RQIA**

Nine complaints were outstanding from 2008/09. One of these was a complaint about RQIA and continues to be investigated by the NI Ombudsman. Eight of these complaints were complaints about regulated services. These are all closed to the satisfaction of the complainant.

In 2009/10 five new complaints were made against RQIA. One of these complaints related to the publication of an inspection report. The second complaint related to the publication of a pre-registration report. The third complaint related to a domiciliary care agency and the actions taken by Inspectors following receipt of allegations regarding the service. The fourth complaint related to how a member of staff within RQIA dealt with a complaint made in relation to a residential care home. The fifth complaint related to the attitude of a member of staff at an unannounced inspection. All of the above complaints have been investigated and the complainant has been advised of the outcome.

One complaint made during 2007/08 was under investigation by the NI Ombudsman. The outcome of this has been shared with RQIA and the complainant accordingly.

All Stage 2 investigations regarding complaints against RQIA were completed during 2009/10 and the dissemination of learning from these investigations is ongoing. An updated report will be provided to the RQIA Serious Concerns Group on completion of reviews of untoward incidents and complaints and the report will be disseminated to all staff during complaints handling training sessions.

## SECTION 2 - VALUE DRIVERS QUARTER ENDING 31 MARCH 2010

<b>D2</b>	<b>We maintain a robust governance framework</b>
<b>D2.1</b>	Met legislative requirements and best practice in relation to governance, risk management and independent assurance

### **D2.1.2 Protection of Children and Vulnerable Adults**

All staff employed by RQIA have had the relevant standard and enhanced POCVA checks in advance of employment. A database of all professionally qualified and registered staff is maintained and updated on a monthly basis. As at end March 2010 the profession by category was:

Nursing	38
Social Work	28
Psychology	1
Pharmacy	6
Medical	4
Dental	1
AHP	3

### **D2.1.3 Corporate Risk Register**

The Corporate Risk Register detailing the progress being made to manage risks associated with the delivery of the Corporate Strategy was presented to the Board on a regular basis throughout 2009/10. In addition a Risk Assurance Framework Report was developed and following approval by the Audit Committee in January 2010 a merged Corporate Risk Register and Risk Assurance Framework Report was developed. This new Corporate Risk Assurance Framework report will be presented to the Audit Committee on 6 May 2010.

### **D2.1.4 Controls Assurance Standards**

Self-assessment of the three core Controls Assurance Standards i.e. Governance, Financial Management and Risk Management was completed and it is expected that internal audit will confirm the attainment of substantive compliance with each of these standards. One additional self assessment against the Records Management Controls Assurance Standard has been completed with substantive compliance achieved.

<b>SECTION 2 - VALUE DRIVERS QUARTER ENDING 31 MARCH 2010</b>	
<b>D2</b>	<b>We maintain a robust governance framework</b>
<b>D2.1</b>	Met legislative requirements and best practice in relation to governance, risk management and independent assurance

#### **D2.1.5 DHSSPSNI Assurance Framework**

Work was completed on the development of the RQIA Risk Assurance Report in order to ensure compliance with the requirements of the revised DHSSPSNI Assurance Framework. The first assurance report was presented to the Board in January 2010 and was merged with the Corporate Risk Register in March 2010.

#### **D2.1.6 Audit plan for the Continuous Review of Inspection Activity**

Two meetings were held with Director of Operations and one meeting with Heads of Programme to discuss and agree RQIA inspection audit planning progress. The current standard for inspection was to be reviewed by the end of January 2010 and the Audit Plan was to be agreed by 31 March 2010. These actions have not been progressed as planned due to staff absences.

#### **D2.1.7 Register of Policies / Policy Workshop**

- Appraisal Policy and Procedure
- Procedure for Using File Tracer Cards
- Open Reporting Policy
- Retention and Disposal of Documents Schedule
- Version Control Policy
- Escalation Policy
- Rotation of Inspectors Policy
- Counter Fraud Policy
- Gifts and Hospitality Policy
- Whistle-blowing Policy

A series of policy awareness workshops was conducted for all RQIA staff in December 2009 at which staff was encouraged to make comments in relation to policy needs at RQIA. The resulting action plan was presented to EMT in January 2010.

A Health and Safety Policy has been drafted and is to be submitted to Executive Policy Group.

## SECTION 2 - VALUE DRIVERS QUARTER ENDING 31 MARCH 2010

<b>D2</b>	<b>We maintain a robust governance framework</b>
<b>D2.1</b>	Met legislative requirements and best practice in relation to governance, risk management and independent assurance

### **D2.1.8 Governance**

The Mid-Year Assurance Statement and Statement of Internal Control were produced and made available to the Audit Committee and the Board.

<b>D3</b>	<b>We use evidence and research to underpin all our activities</b>
<b>D3.1</b>	Developed an evidence based culture to our practice across all the functions of RQIA

### **D3.1.1 Guidance Documents**

Work is underway to develop policy and procedure guidance for RQIA staff involved in Finance Inspections and will be brought to Policy Group for comment and approval in due course.

### **D3.1.2 Research Policy and Procedure and Draft Research Strategy**

This was completed in draft form and forwarded to the Policy Group for review and requires approval by Executive Policy Group and Board.

### **D3.1.3 Peer Review by Inspectors and Quality Assurance of Reports by Managers**

This remains as work in progress due to staff vacancies.

### **D3.1.4 Access training for staff in the use of evidence based approaches**

See Section D5.1.4

### **D3.1.5 Up to date evidence base that informs planning and methodology**

See section CA1.2.2

### **D3.1.6 Local/Regional/National Guidelines and Standards**

Up to date guidance is disseminated to staff as and when received.

## SECTION 2 - VALUE DRIVERS QUARTER ENDING 31 MARCH 2010

### D4 We manage our finances and assets effectively

**D4.1** Aligned the financial and business planning processes of RQIA to ensure our resources are focused on strategic priorities & we achieve Value for Money

Funds have been allocated by the Department to meet recurrent costs for the 2009/10 Business Plan. RQIA continues to extend and monitor the reporting system on budgetary and financial performance with monthly reports being presented to EMT & Board. More detailed reports on payroll have been provided to managers and non-pay elements are being developed as the next stage. The annual report, statement of internal control and approved accounts were completed, audited and submitted to NIAO by 31 July 2009 as required. The capital investment plan for 2009/10 has been developed by the Director of Corporate Services and a planned spending profile provided to the Department. Cost reductions have taken place in the expenditure areas identified in RQIA's efficiency programme.

Please see RQIA Annual Accounts 2009/10 - RQIA Board Meeting 13 May 2010 Agenda Item D/03/10

### D4.2 Maintained and made best use of RQIA's non-financial assets

#### D4.2.1 Business Continuity Plan

A draft Business Continuity Strategy has been produced and a Business Impact Assessment exercise is underway. Work is ongoing in the area of ICT Disaster Recovery.

#### D4.2.2 Office Accommodation and Space Efficiency

The RQIA total office accommodation is 1264 square metres. This equates to 9.43 square metres per staff full-time equivalent which exceeds the Office of Government Commerce minimum of 5 square metres. There are 22.6 cubic metres per person which exceeds the Office of Government Commerce minimum 11 cubic metres.

There are 134 full time equivalent staff and 130 workstations. A number of desks are designated as shared desking, i.e. 'hot' desks. The area per workstation equates to 1.44 square metres (1.6m x 0.9m).

## SECTION 2 - VALUE DRIVERS QUARTER ENDING 31 MARCH 2010

<b>D5</b>	<b>We value and develop all our staff</b>
<b>D5.1</b>	Continued to ensure that we have a professionally competent workforce delivering on the objectives set out in the Corporate Strategy

### **D5.1.1 Journal Club**

The Journal Clubs continue to be arranged dependent on staff capacity to arrange and attend. Examples of events include sessions provided to staff on 23 October and 20 November respectively. The 23 October workshop provided staff with an overview of the Independent Safeguarding Authority and this was attended by relevant staff from across all operational programmes. The 20 November event focused on the Belfast Trust Carers' Group and the support offered to carers in the community.

### **D5.1.2 Strategic Training, Learning and Development**

Throughout February 2010 a number of short training sessions have taken place in the area of Attendance Management to both staff and line managers.

Training has continued to take place using RQIA's service level agreement with the Beeches Management Centre whereby several staff have availed of development programmes including:

- Introduction to management
- Understanding projects
- ECDL

Internal training has also taken place in the following areas:

- Managing sickness
- Gifts and hospitality
- Data protection

Other additional training has included:

- Plain English
- Mind Mapping
- Action Learning Facilitation Training
- Bernard Marr - formulating KPIs and KPQs
- Meridian

## SECTION 2 - VALUE DRIVERS QUARTER ENDING 31 MARCH 2010

<b>D5</b>	<b>We value and develop all our staff</b>
<b>D5.1</b>	Continued to ensure that we have a professionally competent workforce delivering on the objectives set out in the Corporate Strategy

### D5.1.3 Sickness absence

RQIA is committed to the proper management of sickness absence and the achievement of the optimum attendance at work. All episodes of sickness must be managed to ensure that the appropriate level of support is in place to meet individual need. Table 18 details short and long term sickness absence by quarter.

<b>Table 18: Working days lost due to sickness</b>				
	<b>Type of sickness</b>	<b>Number of sickness days lost</b>	<b>Occurrence</b>	<b>% sickness rate</b>
<b>2008-2009 Qtr 4</b>	Short term	120	42	
	Long term	74	2	
	<b>Total</b>	<b>194</b>	<b>44</b>	<b>2.66</b>
<b>2009-2010 Qtr 1</b>	Short term	160	34	
	Long term	109	10	
	<b>Total</b>	<b>269</b>	<b>44</b>	<b>3.63</b>
<b>2009-2010 Qtr 2</b>	Short term	203	38	
	Long term	192	11	
	<b>Total</b>	<b>395</b>	<b>49</b>	<b>5.12</b>
<b>2009-2010 Qtr 3</b>	Short term	107.5	32	
	Long term	291	8	
	<b>Total</b>	<b>398.5</b>	<b>40</b>	<b>4.7</b>
<b>2009-2010 Qtr 4</b>	Short term	108	22	
	Long term	322	12	
	<b>Total</b>	<b>430</b>	<b>34</b>	<b>5.02</b>

\* Short-term absenteeism is generally defined as an episode of sickness lasting between 1 day and 4 weeks.

\*\* Long-term absenteeism is defined as an episode of sickness lasting more than 4 weeks.

## SECTION 2 - VALUE DRIVERS QUARTER ENDING 31 MARCH 2010

<b>D5</b>	<b>We value and develop all our staff</b>
<b>D5.1</b>	Continued to ensure that we have a professionally competent workforce delivering on the objectives set out in the Corporate Strategy

The information in table 18 demonstrates an increase in the total number of working days lost due to sickness. However, the period has also seen a decrease in the number of occurrences. This quarter has seen a decrease in short term absence occurrences and a 50% increase in long term episodes. During Quarter 4 a number of Sickness absence staff awareness sessions were conducted, as well as a number of half day workshops on Absence Management for those with line management responsibility. The latter were generally well attended with 24 attendees out of a possible 32 places. Staff awareness sessions for those individuals without line management responsibility were held on 10 and 17 February. Four hour long sessions were delivered with the capacity for 20 places in each. Only 29 places were used.

### **D5.1.4 Action Learning**

A scoping document and business case was sent to Executive Team for approval and a training course on Action Learning sets was commissioned for 6 RQIA staff. Training was undertaken on 2 - 4 March 2010 to enable the cascading of learning across staff groups within RQIA.

### **D5.1.5 HSC Staff Survey**

The Director of Corporate Services represents RQIA on a regional group implementing a new HSC-wide staff survey. The Staff Survey for RQIA was conducted in November/December 2009 and a selection of key performance indicator results are presented below:

- In terms of the % of staff who are satisfied with communication from the Executive Team, 32% of staff who responded agree senior management try to involve staff in decisions and 24% agree that communication between senior management and staff is effective.
- In terms of the % of staff who are satisfied with the opportunities available to engage with their line manager, 63% of staff who responded agreed that their line manager can be counted on to help them with a difficult task at work and 68% agreed their line manager encourages those who work for her/him to work as a team.
- In terms of team working, 75% of staff who responded agree their team meets regularly to discuss team effectiveness and how it could be improved.
- In terms of the commitment employees and RQIA invested in learning and development activities, 68% of staff who responded availed of training paid for by RQIA during 2009
- The % Turnover Rate (the number of 'leavers' in the last year as a % of the average total staff) for RQIA in 2009/10 was 4% in comparison to that of 8-12% typically within the NHS.

## SECTION 2 - VALUE DRIVERS QUARTER ENDING 31 MARCH 2010

<b>D5</b>	<b>We value and develop all our staff</b>
<b>D5.1</b>	Continued to ensure that we have a professionally competent workforce delivering on the objectives set out in the Corporate Strategy

### **D5.1.6 Tele-Working Project**

A consultation process involving managers and staff is currently underway and a number of options will subsequently be developed.

### **D5.1.7 Performance Review and Appraisal System**

RQIA continues to operate its performance review and appraisal system. At the end of Quarter 4 a memo was sent to all staff on behalf of the Director of Corporate Services regarding the performance review cycle and Personal Development Planning (PDP) within RQIA (incorporating objective setting and personal development planning). This is an extremely important basis for future work in implementing The Key Skills Framework (KSF) and Investing in People (IIP) which demand a consistent and unified business planning and appraisal cycle. The percentage of staff with Personal Develop Plans (PDPs) linked to KSF has not been determined to date as work to implement KSF has not commenced due to delays on identifying a staff side representative for RQIA

### **D5.1.8 Promote and Build an Audit/Learning Culture Across Teams**

This has not been progressed due to staff absence.

## SECTION 2 - VALUE DRIVERS QUARTER ENDING 31 MARCH 2010

<b>D6</b>	<b>We plan effectively and actively manage organisational performance</b>
<b>D6.1</b>	Developed a fully integrated planning and performance management cycle enabling improved organisational decision-making and learning

### **Finalise and consult on the new Corporate Strategy**

Following a 13 week consultation period the RQIA Corporate Strategy 2009/12 was approved by the Board and DFP Supply. A performance measurement project has been initiated to review KPQs/KPIs and the format of reporting to the Board. During quarter 4 a published version of the RQIA Corporate Strategy 2009-12 was designed. This document is now available online and hard copies are available on request from RQIA.

### **Develop and agree 2009/10 Business Plan and monitor performance against the objectives set out in this Plan.**

RQIA continues to monitor performance against the objectives set out in the 2009/10 Business Plan with quarterly reports presented to the Board. A draft Business Plan 2010/11 was developed and presented to the Board in March 2010. The Business Plan will be finalised following negotiation and agreement of the 2010/11 allocation. Regular reports are submitted to the Board on performance against strategic objectives.

### **Annual Business Plan aligned to three year Corporate Strategy**

KPI achieved.

### **Percentage of staff with personal objectives clearly linked to RQIA's strategic objectives**

- Half of staff surveyed (50%) said that they had not had an appraisal or Knowledge and Skills Framework (KSF) development review in the last 12 months.
- 61% did not agree a Personal Development Plan (PDP) in the last 12 months
- Of those who agreed a PDP, 36% have received the training that was identified in the plan and 44% said that their immediate manager had supported them in accessing this training, learning or development.
- 66% agreed that they have clear, planned goals and objectives for their job.
- 60% always know what their work responsibilities are.

## SECTION 2 - VALUE DRIVERS QUARTER ENDING 31 MARCH 2010

<b>D6</b>	<b>We plan effectively and actively manage organisational performance</b>
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<b>D6.2</b>	<b>Improved our performance through benchmarking with other organisations involved in regulation and standard setting</b>
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### **D6.2.1 RQIA Networks**

The Director of Quality Assurance and two senior staff have provided expert advice and guidance to the Agency for Social Assistance and the Agency for Child Protection in Bulgaria in October and November 2009 and in January and February 2010.

During quarter 4 RQIA had intended to participate in the revision of UK/ROI regulator networks but attendance at meetings and workshops was prevented by the air travel disruption due to the Icelandic volcanic ash problem.

The review of RQIA governance and service review processes by an external UK regulator has not yet been completed as the Terms of Reference have not yet been agreed.

One of the RQIA Senior Quality Reviewers visited the Scottish Care Commission in September 2009 to benchmark practices in quality assurance. A follow up visit will take place later in 2010.

A revised draft Quality Strategy for RQIA and exemplar of the associated Quality Framework that could be developed was shared with staff in the Authority and the Executive Team. Both documents were discussed at the Board workshop in October 2009. The Centre of Competitive Excellence was commissioned to undertake a diagnostic screening exercise prior to embarking on internal quality assurance accreditation with EFQM. Meetings with Executive Team were held in March 2010 and the exercise will be progressed in April/May 2010. A final report on findings will be submitted to the Board in June 2010.

RQIA joined and continues to be an active partner in the European network European Partnership of Supervisory organisations (EPSO). Contact with the group has involved dialogue on risk management, complaints handling and human rights approaches for health and social care regulators.

### **D6.2.2 Chief Executives Activity**

Please see the Chief Executives Report - RQIA Board Meeting 13 May 2010 Agenda Item C/03/10

## SECTION 2 - VALUE DRIVERS QUARTER ENDING 31 MARCH 2010

### D7 We manage information and our information assets effectively

D7.1 Implemented a strategic approach to information management that supports RQIA's strategic and operational objectives

#### D7.1.1 RQIA Information Team

##### ***Strategic Improvements***

RQIA's Information Strategy continues to be progressed by the information team as they support RQIA's strategic and operational objectives in areas such as the development of a new methodology for inspection and statutory notification of incidents. Ongoing improvement works in the areas of information, records, registration and ICT will be planned and managed in parallel as RQIA develop and implement an integrated informatics strategy in 2010.

##### ***Register***

As per registration improvement plan, the validation of registration information continues, with the details of 78% of services now having been verified by inspection staff during inspections within the last twelve months. The overall aim of the ongoing validation checklist exercise is to ensure that the registration details of all registered services will be checked.

##### ***CIMS***

Phase 1 of the Corporate Information Management System (CIMS) Project has identified and mapped business processes across the organisation. An Initial Requirements Document has been completed and disseminated externally in order to identify indicative costs. A draft business case will be submitted for consideration to the Business Case Unit and DFPNI in Quarter 2 2010/11.

##### ***EDRMS***

Records management system options are being explored and work is ongoing in terms of the production of an EDRMS business case.

##### ***Records Management Strategy***

This strategy is being progressed through a number of initiatives relating to data protection, file management and staff training. Please refer to Section D7.2.1 for further detail.

## SECTION 2 - VALUE DRIVERS QUARTER ENDING 31 MARCH 2010

<b>D7</b>	<b>We manage information and our information assets effectively</b>
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<b>D7.1</b>	Implemented a strategic approach to information management that supports RQIA's strategic and operational objectives
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### **D7.1.1 RQIA Information Team (ctd)**

#### ***IAMS***

Usage of the new version of IAMS commenced at the beginning of April 2009. The updated system enables the more efficient monitoring of inspection activity against individual services to ensure that the minimum legislated number of inspections per service have been carried out. In addition the system also enables tighter management of key performance indicators by automatically generating a target date for the issue and publication of draft and open reports. In addition to this it was also agreed within the New Inspection Methodology Project to continue to use IAMS as a means of recording some information pertaining to the outcome of inspections relating to any requirements and recommendations made.

#### ***EU Services Directive***

The project team established to assess the potential impact of the EU Services Directive continues to work with the DHSSPSNI and the Department for Business, Innovation & Skills (BIS) to ensure that the RQIA is able to meet its obligations under the Directive. The RQIA is awaiting further guidance from the department as to the scope of the Directive and in the interim continues to work with BIS to ensure that if required the RQIA's administrative procedure can be adjusted for compliance.

<b>D7.2</b>	Complied with best practice and the highest standards of information governance
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### **D7.2.1**

RQIA has developed and implemented a Data Protection/Confidentiality Policy, Records Management Policy and the Retention and Disposal Schedule in 2009/10. File identification and tracking mechanisms are now being utilised by all staff. RQIA has achieved substantial compliance against the HSC Controls Assurance Standards in Records Management.

## SECTION 2 - VALUE DRIVERS QUARTER ENDING 31 MARCH 2010

<b>D8</b>	<b>We optimise the use of ICT to support our work</b>
<b>D8.1</b>	A reliable, appropriate and effective ICT infrastructure that makes best use of emerging technology & is aligned to RQIA's changing business needs

### **D8.1.1 ICT Infrastructure**

RQIA's internal capacity for the management of ICT was enhanced with the recruitment of an ICT Delivery manager in July 2009. A Post Project Review of the ICT service to date is to be presented to RQIA Board in July 2010. RQIA has also commissioned an ICT Health Check exercise which is due for completion in April 2010. The ICT strategy and action plan will be progressed following presentation of an options paper for the future delivery of ICT to the RQIA Board in July 2010.

## SECTION 2 - VALUE DRIVERS QUARTER ENDING 31 MARCH 2010

<b>D9</b>	<b>Position RQIA as a respected, independent regulator</b>
<b>D9.1</b>	Increased awareness of the work of RQIA & achieved public and peer recognition as an organisation leading regulatory practice

### **D9.1.1 Awareness of the work of RQIA**

RQIA continued its engagement with key stakeholders including service providers and service users and carers. A series of roadshows on the new methodology of inspection took place in February, attended by almost 900 providers from nursing homes, residential care homes, day care settings and domiciliary care agencies. In addition, RQIA organised a joint conference for service users and carers, attended by over 170 people, in partnership with NISCC and SCIE. The Conference entitled 'Is Partnership Working?' showcased examples of best practice in public participation and user engagement. The findings from this event can be found on the RQIA website.

RQIA has committed to designing an assessment template to monitor success in raising the organisation's profile. In future quarters, this may be considered as part of the development of a communications strategy for RQIA.

### **D9.1.2 External Accreditation**

Work on scoping opportunities for external accreditation (such as ISO 9001:2008) continues to progress and a scoping paper will be presented to the Board in due course.

The Regulation and Quality Improvement Authority is an independent organisation which aims to ensure the public in Northern Ireland has access to the best possible standards of health and social care.

The Authority was set up by the Department of Health, Social Services and Public Safety in 2005. It has a remit to regulate, inspect, and monitor statutory, private and voluntary sector bodies which provide health and social care services and to promote, and in certain areas enforce, improved standards wherever they are needed.

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