

AGENDA

RQIA Board Meeting
Boardroom, RQIA
Monday 30 April 2018

Board members only 9.30am

BUSINESS IN CONFIDENCE

Paper Ref

- | | | | |
|---|--|-----------------------|---------------------------|
| 1 | Welcome and Apologies | | 10.00am |
| 2 | Minutes of the private meeting of the Board held on 22 March and matters arising | Min/ March/18 private | 10.05am
APPROVE |
| 3 | Declaration of Interests | | 10.15am |
| 4 | Amended minutes of Board Workshop held on Thursday 12 October 2017 | Min/Oct17/ workshop | 10.20am
APPROVE |
| 5 | Chair's Confidential Brief
Acting Chair | | 10.30am
NOTE |
| 6 | Chief Executive's Confidential Brief
Chief Executive | | 10.40am
NOTE |
| 7 | Business Plan 2018-19 Revised
Chief Executive | A/03/18 | 10.50am
APPROVE |

Coffee Break

PUBLIC SESSION

- | | | | |
|---|--|----------------------|---------------------------|
| 1 | Minutes of the public Board meeting held on 22 March and matters arising | Min/March/18/ public | 11.10am
APPROVE |
| 2 | Declaration of Interests – Register of Interests | | 11.15am |
| 3 | Acting Chair's Report
Acting Chair | B/03/18 | 11.20am
NOTE |
| 4 | Meeting Attended by RQIA Non-Executives
Acting Chair | | 11.30am
NOTE |

OPERATIONAL ISSUES

- | | | | |
|----|---|---------|---------------------------|
| 5 | Chief Executive's Report
Chief Executive | C/03/18 | 11.40pm
NOTE |
| 6 | Finance Update
Chief Executive | D/03/18 | 11.50pm
APPROVE |
| 7 | Approved Audit Committee Minutes of meeting held on 19 October 2017 | E/03/18 | 12.00pm
NOTE |
| 8 | Draft RQIA Information Team Work Plan
Chief Executive | F/03/18 | 12.10pm
NOTE |
| 9 | Quarterly communications Report
Malachy Finnegan | G/03/18 | 12.20pm
APPROVE |
| 10 | Proposed changes to the procedure for Appointment to RQIA's List of Part II Medical Practitioners
Director of Assurance | H/03/18 | 12.30pm
APPROVE |
| 11 | Annual Update of Appointment Panel
Director of Assurance | I/03/18 | 12.40pm
NOTE |

Date of next meeting: 5th July 2018, Boardroom, RQIA

RQIA Board Meeting

Date of Meeting	30 April 2018
Title of Paper	Public Session Minutes
Agenda Item	1
Reference	Min/Mar18/public
Author	Saoirse Wilson
Presented by	Prof. Mary McColgan
Purpose	To share with Board members a record of the previous meeting of the RQIA Board.
Executive Summary	The minutes contain an overview of the key discussion points and decisions from the Board meeting on 22 March 2018.
FOI Exemptions Applied	None
Equality Impact Assessment	Not applicable
Recommendation/Resolution	The Board is asked to APPROVE the minutes of the Board meeting of 22 March 2018.
Next steps	The minutes will be formally signed off by the Chair and will be uploaded onto the RQIA website.

PUBLIC SESSION MINUTES

RQIA Board Meeting
HSC Leadership Centre
22 March 2018, 11.30am

Present

Prof Mary McColgan OBE
(Acting Chair) (**MMcC**)
Patricia O'Callaghan (**POC**)
Lindsey Smith (**LS**)
Gerry McCurdy (**GMcC**)
Denis Power (**DP**)
Robin Mullan (**RM**)
Sarah Havlin (**SH**)
Dr Norman Morrow OBE (**NM**)
Seamus Magee OBE (**SM**)

Officers of RQIA in attendance

Olive Macleod (Chief Executive) (**OM**)
Theresa Nixon (Director of Mental Health, Learning
Disability and Social Work) (**TN**)
Kathy Fodey (Director of Regulation and Nursing)
(**KF**)
Dr Lourda Geoghegan (Medical Director and
Quality Improvement Lead) (**LG**)
Malachy Finnegan (Communications Manager)
(**MF**)
Saoirse Wilson (Acting, Board and Executive
Support Manager)

Apologies

Maurice Atkinson, Director of
Corporate Services

Welcome and Apologies

MMcC welcomed all members and Officers of the Board to this meeting. Apologies were acknowledged from Maurice Atkinson, Director of Corporate Services and the Board welcomed Sandra McElhinney who is deputising on his behalf. Alan McCracken was also in attendance to present the GDPR action Plan

- 1.0 Agenda Item 1 - Minutes of the public meeting of the Board held on Thursday 11 January 2018 and matters arising**
- 1.1 The Board APPROVED the minutes of the meeting of the Board held on Thursday 11 January 2018**
- 1.2 The Board noted that actions 159, 170, 177, 178 are now completed.**
- 1.3 Resolved Action (180)**
Board and Executive Support Manager to add section 9.5 of the minutes to the action list

- 1.4 OM provided an update in relation to action 159 advising the Board the number of questionnaire used throughout RQIA has been reduced from 28 to 3. Questions are now based against a scale to allow identification of trends.
- 1.5 OM informed the Board action 176 has been deferred until the next meeting of the Board. This paper is ready to be presented but was deferred due to time limitations.
- 1.6 TN updated the Board in relation to action 179. TN advised Power to People – Proposal to Reboot Adult Social Care and Support in NI by Expert Advisory Panel was shared at the end of the last Board meeting. This cannot be progressed as the paper has not yet been accepted by the Department of Health.

2.0 Agenda Item 2 – Declaration of Interests

- 2.1 MMcC asked Board members if, following consideration of the agenda items, any interests were required to be declared in line with Standing Orders. RM declared he was on the Board of the Equality Commission Northern Ireland in relation to agenda item 5. No other declarations were made.

3.0 Agenda Item 3 – Acting Chair's Report

- 3.1 MMcC presented the Acting Chair's report and Board members noted the meetings attended since the last Board meeting.
- 3.2 MMcC to confirm if it is possible for Board members to attend the NICON conference discussed.
- 3.3 GM advised board members he also attended the joint RQIA and NISCC workshop in Mossley Mill where he sought participant's views of RQIA. GM reported feedback was very positive and was clear of a significant change in culture and approach of inspections.
- 3.4 The Board **NOTED** the Acting Chair's Report.

4.0 Agenda Item 4 – Meetings attended by RQIA Non-Executives

- 4.1 MMcC advised Board members of an agreement with the Department of Health that meetings attended by RQIA Non Executives will be reported to the Department through the Acting Chair.
- 4.2 The Chair of the Audit Committee, DP advised Board members that he and Olive Macleod, Chief Executive attended a Public Accountability and Governance training course for Audit and Risk Committees hosted by the Chief Executives Forum on 8 March 2018.

- 4.3 The Board **NOTED** the Meetings attended by RQIA Non-Executives.
- 5.0 Agenda Item 5 – Equality and Disability Action Plan and Consultation**
- 5.1 The Board are being asked to approve the Equality and Disability Action Plan that was developed by eight arms-length bodies with help from the equality unit from Business Services Organisation. The action plan consists of two parts, the first part addresses obligations under equality legislation and the second addressed obligations under disability legislation. The action plan will be monitored by an internal group in RQIA, chaired by the Communications Manager.
- 5.2 POC noted the actions plans were quite generic and found it was unclear exactly who was responsible, members agreed there was a lack of specificity. OM advised this would be monitored internally through the internal group.
- 5.3 Board members noted this a compliance document largely for legislative reasons and noted it did not drive strategy.
- 5.4 DP informed he would like to see a document that specifically sets out RQIA's responsibilities.
- 5.5 **Resolved Action (181)**
RQIA specific Equality Action Plan to be revised based on BSO agreed policy.
- 5.6 MMcC asked that the Health and Wellbeing Hub is referenced in the Equality and Disability Action Plan.
- 5.7 **Resolved Action (182)**
Health and Wellbeing Hub to be referenced in the Equality and Disability Action Plan.
- 5.8 NM noted some of the intended outcomes listed in the Equality and Disability Action Plan when drilled into did not provide any measures. NM queried if we are aware of what intended outcomes are, why can we not specify performance levels. The Equality and Disability Action Plan was based on a regional approach as were the outcomes and it was agreed this would be raised at the next meeting of the regional group.
- 5.9 LS discussed the desire for a document outlining a strategic theme in relation to diversity. OM advised she and the Communications Manager would meet to discuss the issue further.
- 5.10 GMcC suggested when finalised, this information should be included as part of the induction programme for Board members and members of staff.
- 5.11 The Board **APPROVED** the RQIA Equality and Disability Action Plans 2018-23 in principle anticipating further discussion at regional level.

6.0 Agenda Item 6 - Corporate Risk Assurance Framework Report

- 6.1 The Board are asked to approve the Corporate Risk Assurance Framework Report.
- 6.2 The Chair of Audit Committee, DP advised the Corporate Risk Assurance Framework has been considered at Audit Committee and now included two new risks in relation to O'Hara (CR15) and CONPI (CR14).
- 6.3 DP noted he was satisfied this was a true and accurate presentation of RQIA's risk and was happy to support this framework which is presented for adoption by the board.
- 6.4 NM noted CR15 had been amended on page 14 but not on page 4. This will be amended.
- 6.5 The Board **APPROVED** the Corporate Risk Assurance Framework Report
- 6.6 The Chair of Audit Committee, DP provided Board members with a verbal update of the Audit Committee meeting held on 8 March 2018 and advised all key outstanding issues have been completed on the Audit Action Plan for the first time.
- 6.7 DP advised minutes of the Audit Committee meeting on 19 October will be require to be circulated after the meeting and tabled for final sign off at next Board meeting.
- 6.8 **Resolved Action (183)**
Audit Committee Minutes of meeting held on 19 October 2017 to be circulated to Board members and added to the next Board meeting agenda.
- 6.9 OM advised the Board of limited assurance from an Information Governance report in relation to the asset register. OM assured the Board that failings identified have been corrected. The Board were satisfied that the Chief Executive would address this and report to Audit Committee.

7.0 Agenda Item 7 – Gifts and Hospitality Policy and Procedure

- 7.1 The Board were asked to approve the Gifts and Hospitality Policy and Procedure which replaces the October 2012 version. If approved the Gifts and Hospitality Policy and Procedure will be shared with all staff at the next staff meeting.
- 7.2 GM noted that titles in the policy will require to be updated in line with the organisational restructure.
- 7.3 NM queried if the gift register detailed in the Gifts and Hospitality Policy and Procedure is brought before the Board. OM advised that the register very rarely requires to be updated and agreed that a nil return can be reported to the board.
- 7.4 RM queried why an act of bribery or noncompliance with the policy would be reported through the Whistleblowing Policy and Procedure for Raising Concerns at Work. OM explained the policy is regionally agreed with Trade Unions.
- 7.5 DP referenced previously released circulars relating to bribery and corruption and noted the need for regional policies be cross referenced. DP noted that section 5 of the policy should now reference the Chief Executive.
- 7.6 Board members **APPROVED** the Gifts and Hospitality Policy and Procedure, subject to minor amendments.

8.0 Agenda Item 8 – Business Plan 2018-19

- 8.1 The Board were asked to approve the Business Plan 2018-19. If approved by the Board, the Business Plan will then sent to the Department of Health for approval.
- 8.2 The Board were advised the finance section requires further detail which will be updated when savings targets are confirmed by the Department. A suite of outcome measures detailed on page 6 is a new addition to the Business Plan.
- 8.3 GMcC noted that many RQIA policies are now co owned with BSO. GMcC highlighted that the policies are not specific in terms of who is the responsible officer and felt it could be stated more clearly. OM agreed amendments would be made and shared again with the Board for final approval.
- 8.4 SH referenced that strategic themes detailed in the Business Plan and queried the appropriateness of using the word *encourage*, OM informed this was a direct lift from the strategy agreed last year.

- 8.5 DP noted that percentage expectations should be added to the business plan and added that the business plan should reflect on recommendations from the O'Hara report.
- 8.6 LS discussed the need to develop core measures that can be carried across and tracked to develop a base line and allow incremental changes to be mapped.
- 8.7 GM referenced outcomes measures 7 and 8 in this business plan and queried if for example, completing performance appraisals on time would be a more accurate demonstration that managers are performing. OM advised work is ongoing to develop a consistent approach to appraisals as part of the organisational development programme.
- 8.8 DP advised that a generic statement relating to measuring staff performance should be included and noted that measure 7 should be reworded to reflect the discussion relating to appraisals.
- 8.9 NM noted he would like to see patient/client focused outcomes captured in the Business Plan and advised of the need for an additional comment to be added to page six of the business plan to highlight that the improvement and assurance directorates are linked.
- 8.10 DP advised he would like to see enforcement action filtered through into the outcomes measures and discussed how he would like a measurement added in relation to the number of visits and engagement undertaken by RQIA. OM advised this would be added under strategic theme 3.2.
- 8.11 Board members **APPROVED** the Business Plan subject to minor amendments being made. The Acting Chair clarified that Board members would like to view the Business Plan 2018-19 before it is sent to the Department.
- 9.0 Agenda Item 9 – Chief Executives Report**
- 9.1 OM advised the Board that three providers are currently challenging RQIA's approach to discontinuing dual registration of nursing and residential homes. Legal advice has been sought and RQIA will continue to work to find a local resolution.
- 9.2 OM updated the Board regarding the recent workshop relating to the Risk Assessment Framework and the development of a mathematical model to identify risk. The framework developed with Professor Brian Taylor will be tested from now until June and presented to the Board in July. OM advised the Board that the workshop was recorded and will be uploaded to RQIA's website.
- 9.3 MMcC advised she will presenting a paper at a bi-annual international conference organised by Professor Brian Taylor in relation to RADAR.

- 9.4 The Chief Executive advised Four Seasons Healthcare have agreed an interim financial arrangement and have received funding to secure services to the 57 homes they currently operate within Northern Ireland.
- 9.5 The Communications Manager shared recent newspaper coverage regarding NIAS with members of the Board. OM informed of a recent meeting with Michael Bloomfield the new Chief Executive of NIAS who has thanked RQIA for the support and approach taken. LG advised the frontline improvement notice for Craigavon ambulance station has expired and will be inspected in due course to evidence improvements made.
- 9.6 OM updated the Board of ongoing work to support care homes in relation to winter planning and advised a desire for additional support and training has been clearly articulated by providers.
- 9.7 OM advised the Board the first project board meeting regarding the MHLDT IT System will take place on 28 March 2018. The project board will be chaired by OM and the project will be completed in December.
- 9.8 OM informed of ongoing work between RQIA and the HSCB in relation to Looked After Children who are being accommodated in unregistered facilities. This issue arises from the need to accommodate young people aged sixteen plus with complex needs who are unable to be accommodated in main stream children's homes. TN advised RQIA are in the process of ensuring that this issue is identified on trust risk registers.
- 9.9 RM queried what alternative options are available. TN advised RQIA and the HSCB are exploring new models in terms of supported care but these would require new standards and regulations and will be built in the Department of Health's review of children's services.
- 9.10 LS enquired what has change has occurred as a result of ISO 9001 being introduced OM advised this will be clearer once the first audit is completed in June.
- 9.11 OM advised she had met with NIPSA on 27 February and RCN on 28 February to further discuss the implications of the restructure and reform programme. A joint meeting is scheduled twice a year which may increase as the restructure progresses.
- 9.12 MF shared recent documentation produced that had been referenced in the Chief Executives report and has been designed to highlight RQIA's role and increase public profile. MF advised that every care home and nursing home in Northern Ireland have received posters to display which will be supported by small calling cards that will be left by inspectors asking for feedback.
- 9.13 Board members **NOTED** the Chief Executive's Report

10.0 Agenda Item 10 – Finance Report

- 10.1 Sandra McElhinney presented the RQIA finance report and detailed two easements returned to Department amounting to £367k in total. Following the two easements the position regarding the balance of accounts was positive however the impact of having £55k of VES monies which cannot be returned to the Department could lead to accounts being qualified.
- 10.2 OM advised the Finance Director in the Department understands that RQIA are not in this position as a result of not managing accounts. The current position is directly related to unreturnable VES monies. OM advised the Board that a bid has not been made for VES in 2018-19.
- 10.3 DP noted an amendment was required to page three of the report to read as 'Investigation commissioned by RQIA Acting Chair.'
- 10.5 Board members **NOTED** the Finance Report

11.0 Agenda Item 11 – GDPR Action Plan – Progress Update

- 11.1 Alan McCracken presented a progress update on the GDPR Action Plan and highlighted key changes and high level implications. Alan advised that BSO are RQIA's data processor.
- 11.2 Sandra McElhinney explained ALB'S agreed an overall action plan and advised columns have been added detailing responsibilities pertaining to RQIA and BSO.
- 11.3 OM provided assurances to the Board that compliance with the GDPR Action Plan will be monitored through the Executive Management Team
- 11.4 LS queried the risk aspect of non-compliance given the amount of data held. Alan explained the main implication is evidencing what information RQIA hold and being able to document our legal basis for doing so.
- 11.5 SH noted the importance of ensuing processes are in place and best efforts have been made to comply. SH highlighted the corporate responsibility to ensure staff understand their individual responsibilities. Sandra McElhinney advised that all staff will be required to undertake mandatory training relating to GDPR compliance by year end.
- 11.6 Chair of Audit Committee, DP queried if e-learning was available that staff could access as a matter of urgency given that GDPR comes into effect from 25 May 2018. HSC Leadership centre have advised that the E-learning training module is intended to be available from 4 April.
- 11.7 RM queried potential implications likely to arise post Brexit. Alan advised GDPR will be in effect for any country that processes data on EU citizens. DP advised of a dedicated department within the executive office who are reviewing all legislation impacted by Brexit.






- 11.8 Board members **NOTED** the GDPR Action Plan Progress Update.
- 12.0 **Agenda Item 12 – RQIA's Communication and Engagement Strategy 2018-2021.**
- 12.1 MF advised the Board that RQIA's Communications and Engagement Strategy is the overarching strand and the work plan is the detail behind communication engagement activity. Board members will review the work plan and return any comments to MF.
- 12.2 Board members asked that a quarterly communication report is provided to the Board reflecting on the previous three months, what is planned for the next three months and what we hope to have achieved.
- 12.3 **Resolved Action (184)**
A quarterly communications report is to be presented to the Board.
- 12.4 DP advised that where the strategy references the five main political parties 'other' should also be added. DP also noted reference should be made to communications strategy with the UK based regulators and HQIA. A suggestion was also made that a strategy for dealing with social media is included.
- 12.5 Board members **APPROVED** RQIA's Communication and Engagement Strategy 2018-2021.
- 13.0 **Agenda Item 13 – Q3 Corporate Performance Report**
- 13.1 Sandra McElhinney presented the Q3 Corporate Performance Report and advised that by the end of quarter 3, 95% of actions are on target for completion.
- 13.2 Board members discussed the how information was presented within the report. GM noted in order to ensure clarity and a consistent approach the on key on page nine should be amended to once, twice, three times.
- 13.3 LS sought clarity on how many separate services were subject to enforcement activity as the information on page nine only detailed overall figures. LS also advised it would be useful if the figures relating to enforcement activity were benchmarked against previous year's figures in order to gauge if activity was rising or falling. LS agreed to provide details related to a range of benchmarking activities for inclusion in subsequent reporting to the Board.
- 13.4 Board members **APPROVED** Q3 Corporate Performance Report.






Date of next meeting:
30 April 2018, RQIA Boardroom

Signed _____
Professor Mary McColgan
Acting Chair

Date _____

Board Action List

Action number	Board meeting	Agreed action	Responsible Person	Date due for completion	Status
159	23 March 2017	The Chief Executive will provide an update to Board members on the standardisation of questionnaires across the organisation	Chief Executive (OM)	22 February 2018	
170	6 July 2017	The Corporate Risk Assurance Framework Report will be presented to a Board Workshop for further consideration.	Director of Corporate Services (MA)	22 February 2018	
176	6 November 2017	Paper to be presented to the Board outlining developments in the use of ICT.	Director of Corporate Services (MA)	30 April 2018	
177	6 November 2017	Inclusion of a headline section to be included in the Corporate Performance Report.	Director of Corporate Services (MA)	22 March 2018	
178	11 January 2018	The Chief Executive will share Ms Stewart's (professional lead for intelligence) paper regarding the development of a mathematical approach to quantitative risk assessment with Board members.	Chief Executive (OM)	22 March 2018	

179	11 January 2018	Power to People – Proposal to Reboot Adult Social Care and Support in NI by Expert Advisory Panel	Director of Mental Health, Learning Disability and Social Work (TN)	22 March 2018	Verbal updated provided and paper shared with Board.
180	11 January 2018	HR report to be devised regarding the movement of people, sickness, litigation, grievances, and basic statistics.	Chief Executive (OM)	5 July 2018	
181	22 March 2018	RQIA specific Equality Action Plan to be devised based on BSO agreed policy.	Chief Executive (OM)	5 July 2018	
182	22 March 2018	Health and Wellbeing Hub to be referenced in the Equality and Disability Action Plan.	Chief Executive (OM)	5 July 2018	
183	22 March 2018	Audit Committee Minutes of meeting held on 19 October 2017 to be circulated to Board members and added to the next Board meeting agenda.	Board and Executive Support Manager	30 April 2018	
184	22 March 2018	A quarterly communications report is to be presented to the Board.	Communications Manager (MF)	30 April 2018	

Key

Behind Schedule	
In Progress	
Completed or ahead of Schedule	

RQIA Board Meeting

Date of Meeting	30 April 2018
Title of Paper	Acting Chair's Report
Agenda Item	3
Reference	B/03/18
Author	Prof. Mary McColgan
Presented by	Prof. Mary McColgan
Purpose	To inform the RQIA Board of external engagements and key meetings since the last Board meeting of RQIA.
Executive Summary	External engagements and key meetings since the last Board meeting of RQIA.
FOI Considerations	None
Equality Impact Assessment	Not applicable
Recommendation/Resolution	The Board is asked to NOTE this report.
Next steps	Not applicable

Acting Chair's report for Board meeting on 30th April 2018.

Update on Care Tribunal appeal.

It has been confirmed that the Care Tribunal Appeal has been withdrawn and the Chairman of the Care Tribunal dismissed proceedings on 13/4/2018. This has been an important outcome for RQIA as it vindicates the enforcement action taken in response to the serious concerns raised and reaffirms the professional approach taken by RQIA inspectors who acted to safeguard the well being of older people living in care homes.

Update from COPNI.

The Board has received a final update from Commissioner indicating that the Review is progressing to the final stage of investigation and he anticipates publication by mid June 2018.

NICON conference 17th April 2018.

NEDs were offered an opportunity by NICON to attend by invitation a discussion by Sir Steven Dorrell on 'Top Tips for NEDS- the role of NEDS in Healthcare Transformation'. Several Board members (Lindsey Smith and Gerry McCurdy attended the NICON conference itself and Denis Power and myself attended the evening session facilitated by Sir Dorrell. The key emphasis appeared to be on working collaboratively and engaging in co-production, co-design strategies. The Trusts and other ALB's were presented at this event and several participants highlighted the importance of additional opportunities for NEDs to meet and discuss strategic issues on a regional basis.

RADAR project.

Ulster University has accepted an abstract for presentation at their International biannual DARE conference in July 2018. Olive, Katy and myself will present details of the project, its progress and anticipated outcomes.

Makaton training

I have undertaken initial workshop on Makaton training and found it very useful. It has introduced me to an understanding of the communication needs of individuals and their families and raised awareness of how dissemination of this communication process is limited.

Board Development Workshop

As part of our ongoing development, RQIA Board and SET have participated in a bespoke program developed by the Leadership Centre. The program has combined specific inputs with individual and group exercises aimed at raising awareness about how personal, interpersonal and group behaviours impact on Board effectiveness.

RQIA Board Meeting

Date of Meeting	30 April 2018
Title of Paper	Chief Executive's Update
Agenda Item	5
Reference	C/03/18
Author	Chief Executive
Presented by	Chief Executive
Purpose	The purpose of the paper is to update the Board on strategic issues which the Chief Executive and EMT has been dealing with since the Board meeting in March and to advise Board members of other key developments or issues.
Executive Summary	This paper provides an update to the Board of the key developments for RQIA since the last board meeting.
FOI Exemptions Applied	None
Equality Impact Assessment	Not applicable
Recommendation/Resolution	It is recommended that the Board should NOTE the Chief Executive's Update.
Next steps	A further update will be provided at the July Board meeting.

Office of the Chief Executive

1. RQIA's Online Presence

RQIA's Twitter account @RQIANews continues to attract significant interest, with some 2,500 followers. Since the last board meeting, around 20 tweets have been posted providing details of our latest news, statements, publications, events, and training and learning opportunities.

2. Publications/about to be Published

RQIA's communications team has developed a new calling card, "Have we missed you...?" which is being distributed by RQIA's inspectors as part of inspections to encourage service users and their friends and families to contact RQIA to provide their views on the provision of care within the service. This will provide RQIA with an invaluable and unique insight into the care provided through the views of service users.

In April, Issue 15 of RQIA's e-zine "Assurance, Challenge and Improvement" - which provides an overview of RQIA's activities over the past three months - was distributed to over 1,500 stakeholders. This e-zine is also available on our website and via our Twitter account.

3. Media Interest

Since the last board, RQIA responded to a range of online, print and broadcast media queries relating to enforcement and public concerns in respect of regulated services. This included: coverage of ongoing enforcement action at the NI Ambulance Service; action in respect of Glenabbey residential care home, Glengormley; Runwood Homes Ltd decision to withdraw its appeal to the Care Tribunal resulting in proceedings being dismissed; and the current status of Dunmurry Manor Nursing Home.

4. Engagement

Since the March board meeting RQIA has attended four Pensioners' Parliaments – in Belfast, Craigavon, Bangor and Newtownabbey - with further events taking place in each council area across Northern Ireland. These events provide RQIA with an opportunity to engage directly with older people and their representative organisations. RQIA has also met with the chief executives of a number of organisations representing older people, including Age Sector Platform and Age NI, to discuss opportunities for joint working. In late March and early April, RQIA attended the Alliance and SDLP party conferences in partnership with GMC, NISCC, Pharmaceutical Society, NICON and the PCC. RQIA also exhibited at the annual NICON conference where we met with a wide range of delegates across health and social care in Northern Ireland.

5. Complaints and Compliments

RQIA received a complimentary letter from a relative of a patient who lived in Ashbrooke Care Home. The relative thanked RQIA for moving her father and detailed how well he has been doing since the move. This letter has been shared with the Western Trust.

6. Current Legal Actions

An appeal was lodged by Runwood Homes Ltd against the decision to cancel registration of Ashbrooke Care Home. On 9 April 2018 Runwood Homes Ltd withdrew their appeal to the Care Tribunal. The Chairman of the Tribunal dismissed these proceedings on 13 April 2018.

Litigation has been ongoing in relation to Owenvale Residential Home since June 2017.

7. Workforce Review

A senior children's inspector has been appointed, and is expected to commence work on 8 May 2018. A children's inspector has also been recently appointed and a start date is to be confirmed this week.

Three vacancies exist on the nursing home team. An advertisement will be placed in the Belfast Telegraph shortly for all inspection vacancies.

8. Trust Chief Executives Forum

On 21 March 2018 RQIA received an invitation for the Chief Executive to attend the Trust Chief Executives Forum on a set number of occasions to discuss a range of issues as a collaborative. The forum is focused on continuing improving collaborative working within the wider system and between trusts. The first meeting with the Trust Chief Executives Forum will take place on 4 June 2018.

9. Governance and Board Effectiveness audit

Internal audit have completed the Governance and Board Effectiveness Audit. This will be noted at Audit Committee scheduled for 3 May and scheduled for approval at the subsequent Board Meeting to be held on 5 July.

10 Financial Allocation 2018-19

RQIA's budget allocation has been received and a 2% reduction (£134k) has been applied.

11 Four Seasons Healthcare

FSHC continue to provide regular updates to RQIA in respect of their process of refinancing of debt which has received ongoing media attention. The previously agreed standstill arrangement has been extended until 31 July 2018.

Assurance Directorate

12 Residential Care Beds in Nursing Homes

Position as at 23 March 2018	
Services still undecided (2 providers)	5
Application forms issued and still to be returned	2
Application forms received and being processed	25
Certificates issued	80
Applications withdrawn (homes closed)	2

The project team are reviewing the updated information received and will agree next steps. We will continue to work with the remaining two providers to reach a mutually agreeable solution.

13 Review of Regional Children and Young People's Facilities including Lakewood Secure Care Centre; Beechcroft Child and Adolescent In Patient Unit; Donard, Glenmona Resource Centre and Woodlands Juvenile Justice Centre

A review of Children's and Young People's facilities was commissioned by the HSCB in February 2017. RQIA contributed to the Project Board. The final confidential review report was submitted to the DoH on 23 March 2018. The recommendations will be subject to consideration by the Departments of Health and Justice in the first instance.

14 Looked After Children (LAC) Consultation Workshops

The Department of Health and the Department of Justice have developed a joint strategy for Looked After Children which aims to improve the outcomes for children and young people in care. RQIA will attend a consultation workshop on 12 June 2018.

15 Unregistered Facilities Accommodating Looked After Children

The Assistant Director of Children's Services and the Director of Assurance met with the HSCB to agree terms of reference to take forward a joint piece of work exploring how best to move forward with unregistered facilities accommodating Looked After Children. The work may require the development of standards for the inspection of these facilities similar to other jointly commissioned projects for the 16 plus age group. An options paper will be presented to the DoH in due course.

16 Inspection

RQIA met their statutory minimum number of inspections for 2017/18 inspection year across all registered services.

17 Enforcement Action

RQIA publish details of all enforcement (with the exception of children's services) on our website.

Since the last Board meeting, we have held five enforcement meetings with service providers.

These include:

- Serious concerns meetings have taken place with providers of a children's home, a day care centre and a nursing home to discuss issues arising from inspection. In each case RQIA received assurance from the registered providers on their action plan to deliver improvement. RQIA will follow up progress at each service at the next inspection.
- Intention meetings were held with two nursing home providers with a view to issuing notices of failure to comply with regulations in respect of governance and audit issues in one home and wound care in the second home. In both cases RQIA was presented with detailed and robust action plans and assurances by the service providers and enforcement notices were not served. In each case RQIA will continue to monitor these services closely to ensure ongoing compliance with regulations.

Enforcement action is currently ongoing at two regulated services. These are:

- Leabank Nursing Home, Ballycastle: one improvement notice relating to patient records on 26 February, with compliance required by 12 June 2018.
- TW Care Services Ltd. domiciliary care agency, Ballymena: one failure to comply notice relating to recruitment practices and AccessNI checks, with compliance required by 7 May 2018.

Since the last board meeting Glenabbey Manor residential care home in Newtownabbey achieved compliance with three notices of failure to comply with regulations and one notice of proposal.

Quality Improvement Directorate

18 HSC Healthcare Team

Northern Ireland Ambulance Service (NIAS) Inspections: 1 Improvement Notice relating to safe and effective care (Craigavon station) has been lifted. 3 Improvement Notices relating to corporate leadership and organisational accountability have been extended until end of October 2018 (Broadway, Bangor and Craigavon stations). RQIA recommended to the Department of Health that it should place NIAS on a special measure.

We met with NIAS newly appointed Chief Executive and newly appointed Public Health Agency secondee on 9 April 2018 to discuss RQIA's support in relation areas for improvement.

An editor has been employed on a trial basis to facilitate report writing and is currently drafting the report of the Causeway inspection.

19 Independent Healthcare Team

For 2018/2019 we had requested that dental inspections be reduced to one inspection every two years. This is not possible due to there being no Assembly to facilitate the changes to the legislation. This year we will undertake shorter, more focused inspections in relation to four areas:

- Medical Emergencies
- Infection Prevention and Control
- Decontamination
- Radiology and Radiation Safety

20 Review Programme

We are nearing completion of the fieldwork in the DoH-commissioned Review of Implementation of Clinical Guideline CG174 Intravenous Fluid Therapy in Adults in Hospital.

Meetings with HSC Trusts and HSC Board (Senior Management Teams) during 30 April 2018 will complete the fieldwork phase, with a view to possibly instigating a Quality Improvement Working Group to address emerging themes prior to reporting.

21 Clinical Audit, Guidelines and Quality Improvement Programme

The programme is due to commence in May, with four audits agreed for funding a decision on a fifth pending.

22 Hospital Inspection Programme Report

Last month RQIA drafted a summary version of a mock hospital inspection report and circulated for comment. The majority of respondents felt the report was easy to understand and presented all the information they would like in terms of a hospital inspection. Comments about tone and content have been noted and will be accommodated. RQIA has engaged an editor to draft the next hospital report and the Director of Quality Improvement will liaise with her to produce a summary report in line with the draft and comments received.

MHLD

23 Review of Delayed Discharge

The review regarding delayed discharge has been finalised and will be signed off this week. The purpose of the review was to look at delayed discharge from a patient, family and professional perspective. The Department of Health will be formally advised of findings in the delayed discharge review before the next bimonthly meeting.

24 Prison Healthcare

An announced joint CJI, ETI and RQIA inspection of Woodlands Youth Agency took place November 2017 with report expected by beginning of May 2018.

A further inspection of Maghaberry was undertaken from 20 to 23 April 2018 conjointly with HMIP, CJI and ETI. A number of areas have been identified for improvement in relation to governance, access to services, mental health and completion of SAI and complaints management.

The UK NPM meeting is being held in Belfast at the Policing Authority on the 25-26 April 2018. RQIA staff are delivering two presentations at this event.

25 Letter of Serious Concern Issued re Ross Thompson Unit

One letter of serious concern was issued on 13 March 2018 to the Northern Trust regarding the use of inpatient treatment facilities for outpatient appointments in the Ross Thompson Unit. RQIA asked the Trust to review the access arrangements in this facility as a priority. RQIA will follow up progress at the next inspection.

26 Annual joint RQI/RCPSYCH conference involving part ii and part iv conference

RQIA and Royal College of Psychiatrists are organising a further joint workshop on 6 June 2018 to address issues of consent and information sharing between professionals and families. This workshop will be attended by the five trusts and learning from a recent SAI will be disseminated in term of improvements made.

27 Review of former GAIN guidelines Mental Health (Northern Ireland) Order 1986

It is expected that the revised GAIN guidelines will be completed at the end of May 2018. A future workshop will be organised involving all relevant stakeholders to disseminate the revised RQIA guidelines.



The Regulation and
Quality Improvement
Authority

RQIA Board Meeting

Date of Meeting	30 April 2018
Title of Paper	Summary Finance Report
Agenda Item	6
Reference	D/03/18
Author	Lesley Kyle
Presented by	Olive Macleod
Purpose	To present RQIA's summary financial position as at 31 March 2018.
Executive Summary	<p>The implementation of the Workforce Review has necessitated holding a number of vacant posts unfilled in order to ensure flexibility in re-structuring the organisation and achieving the benefits of the Review. This has created slippage in the pay budget which, coupled with non-pay slippage, has resulted in RQIA having a significant underspend. A non-recurring easement £300k was confirmed by DoH in Nov 17 and a further surrender of £67k was notified to DoH in March 18. The DoH has accepted a second easement of £16k only, which will result in RQIA not achieving a break-even position at year-end.</p> <p>RQIA has received HSC Voluntary Exit Scheme (VES) ring-fenced funding of £178,993 in 2017-18 to assist with the implementation of the workforce review. In Feb a balance of £55,207 remained unallocated however an additional member of staff accepted VES in March 18 and additional £16k funding was received. The total VES ring fenced funding has been fully utilised in 17/18.</p>
FOI Exemptions Applied	None

Equality Screening Completed and Published	Not applicable
Recommendation/ Resolution	The Board is asked to NOTE this update.
Next steps	None.

FINANCE REPORT

Funding – Revenue Resource Limit (RRL) and other Income

The Department of Health (DoH) advised of an indicative Revenue Resource Limit (RRL) amount of £6,706,866 representing a recurrent reduction of £136,875 (2%) from the opening 2016/17 position. In order to achieve a year-end breakeven position a non-recurring easement of £300,000 was made in Nov 17 and RQIA advised the DoH of a further non-recurring easement of £67,000 on 14th March 18. The DoH confirmed 5th April 18 there would be approval for a non-recurrent retraction of £16k only. The revised 2017/18 RRL is £6,390,866.

Since the full easement has not been approved by DoH RQIA will not breakeven at year-end. The DoH has however advised the accounts will not be qualified as RQIA will have a year-end surplus and not be in a deficit position.

Annual fee income generated through the charging of registered establishments is £764k for the year and includes pro-rata invoices issued in March. This is a reduction of £3.3k against budget. Registration fee income is a variable income stream and the total registration fee income received is £144k, £21k increase against budget.

RQIA received HSC Voluntary Exit Scheme (VES) ring-fenced funding to assist with the implementation of the workforce review. £178,993 was initially received with a further £15,793 confirmed 5th April 18. The total VES funding is £194,786 and the full amount will be paid or accrued for at the financial year end. Two members of staff accepted VES with one leaving 31 March 18. The second member of staff will not be leaving until 31 December 18 and this VES payment will be accrued for within the 2017/18 accounts and paid in December 18.

Financial Position March 18

The table below summarises the financial position at March 2018 and includes VES ring fenced funding and expenditure. It also includes the year-end forecast position at Feb 18 as a comparison.

	Year End Est at Feb 18			Year End at 31 March 18		
	Forecast £	Budget £	Variance £	Forecast £	Budget £	Variance £
Total Income (including VES)	7,409,856	7,775,846	(365,990)	7,493,624	7,775,846	(282,222)
Total Expenditure (including VES)	7,354,507	7,775,846	421,339	7,446,682	7,775,846	329,164
Total Surplus/(Deficit) including VES	55,349			46,942		

The table below details separately the income and expenditure (funded from recurring RRL and other income) and ring fenced VES income and expenditure for the same period.

	Year End Est at Feb 18			Year End at 31 March 18		
	Forecast £	Budget £	Variance £	Forecast £	Budget £	Variance £
Revenue Resource Limit	6,706,866	6,706,866	0	6,706,866	6,706,866	0
Non Recurring Easement	(300,000)		(300,000)	(300,000)		(300,000)
2nd Non Recurring Easement	(67,000)		(67,000)	(16,000)		(16,000)
Income - HSC Voluntary Exit Scheme ring fenced and reported separately						
Annual Fees	761,657	766,987	(5,330)	763,653	766,987	(3,334)
Registration Fees	129,340	123,000	6,340	144,319	123,000	21,319
Other			0			0
Total Income	7,230,863	7,596,853	(365,990)	7,298,838	7,596,853	(298,015)
Pay	5,767,699	6,078,263	310,564	5,792,316	6,078,263	285,947
Pay	5,767,699	6,078,263	310,564	5,792,316	6,078,263	285,947
Expenditure - HSC Voluntary Exit Scheme ring fenced and reported separately						
Non Pay	1,463,022	1,518,590	55,568	1,459,244	1,518,590	59,346
Non Pay	1,463,022	1,518,590	55,568	1,459,244	1,518,590	59,346
Total Expenditure	7,230,721	7,596,853	366,132	7,251,560	7,596,853	345,293
Surplus/(Deficit)	142			47,278		

	Year End Est at Feb 18			Year End at 31 March 18		
	Forecast £	Budget £	Variance £	Forecast £	Budget £	Variance £
Income - HSC Voluntary Exit Scheme VES	178,993	178,993	0	178,993	178,993	0
VES Surrender				(55,207)		(55,207)
Additional VES Funding				71,000		71,000
	178,993	178,993	0	194,786	178,993	15,793
Expenditure - HSC Voluntary Exit Scheme	123,786	178,993	55,207	195,122	178,993	(16,129)
Surplus/(Deficit)	55,207			(336)		

The forecast year- end position in Feb 18 assumed a second easement of £67k creating an estimated surplus of £142 against recurring RRL and other income. Also, a surplus of £55k against VES RRL ring fenced funding.

The March year-end financial position is reporting a surplus of £47k against recurring RRL and other income. Pay costs in March increased by £24.6k due to additional usage of bank staff which was partly offset by additional Annual and Registration fee income £16.9k and a small reduction in non-pay

expenditure of £(3.7)k. Also, the DoH approval of £16k non-recurring easement rather than the requested £67k has resulted in a year-end surplus of £47k.

VES year-end forecast in January estimated £55k underspend. During March 18 a second member of staff accepted VES and additional ring fenced funding £16k was provided. The VES funding has been fully allocated in 17/18.

The table below summarises the movement in income and expenditure from February to March.

	Year end forecast Feb 18	Year end forecast March 18	Movement
Income			
RRL	6,706,866	6,706,866	-
1st RRL Retraction	(300,000)	(300,000)	-
2nd RRL Retraction	(67,000)	(16,000)	51,000
Annual Fees	761,657	763,653	1,996
Registration Income	129,340	144,319	14,979
	7,230,863	7,298,838	67,975
Expenditure			
Pay	5,767,699	5,792,316	24,617
Non pay	1,463,022	1,459,244	(3,778)
	7,230,721	7,251,560	20,839
Surplus/(Deficit) excluding VES	142	47,278	47,136
VES RRL Ring Fenced Income	178,993	194,786	15,793
VES RRL Ring Fenced Expenditure	123,786	195,122	71,336
Surplus/(Deficit) VES	55,207	(336)	(55,543)
Total Surplus/(Deficit)	55,349	46,942	(8,407)

➤ Other Income

Total Annual Fee income in 2017/18 was £764k and the total Registration and other income was £144k.

➤ **Pay**

The implementation of the Workforce Review has necessitated holding a number of vacant posts unfilled in order to ensure flexibility in restructuring the organisation and achieve the benefits of the review. This has largely contributed to the forecast year-end underspend of £286k. Other factors contributing to the year-end slippage include:

- In year leavers
- Temporary reduction in individuals' wte
- Use of bank staff, agency staff and secondments (cost pressure)
- Apprenticeship levy (cost pressure)

The pay expenditure includes a 1% increase in respect of agenda for change and medical staff 2017/18 pay award. The 2016/17 and 2017/18 pay award remains outstanding for the senior executive team, an estimate/creditor has been included in the year costs.

➤ **Non Pay**

The non-pay underspend is £59k.

The following are the significant underspend areas against budget:-

- Staff travel and Subsistence £(19)k
- Rent £(20)k
- Training £(10)k
- General Services - Part iv Doctors £(15)k
- General Services - AUDIT £(62)k
- General Services £(2)k

The following are additional one off expenditure items:-

- Legal QC costs £9k
- UU Risk Assessment £5k
- Investigation Commissioned RQIA Chair £18K
- HR Investigation £3.6k
- Hyponatraemia Enquiry £10k
- Health & Wellbeing £1.6k
- Mis Furniture, Fan Coils, Stationary & Equipment £22k

RQIA operates within a breakeven tolerance, a deficit is not permissible and a surplus cannot exceed £20k. The March 18 Monitoring Return to be submitted to DoH 24 April 18 will report a surplus of £46,942. There will be a full review of all income and expenditure and adjustments made were necessary prior to the completion of the yearend accounts.

Capital Resource Limit (CRL)

RQIA has received notification of £25,200 CRL funding for 2017/18 in respect of Mental Health and Learning Disability Information System. The full amount was incurred by financial year-end.

Prompt Payment Compliance

The prompt payment target requires the payment of 95% of invoices within 30 days of receipt of goods/service or receipt of invoice, whichever comes later. A second target was agreed with the Department to pay 70% of invoices within 10 days.

The position as at 31 March 18 was as follows:

	Number Invoices			In Month		Cum	
	Total	10 Days	30 Days	10 Day %	30 Day %	10 Day %	30 Day %
Target				70%	95%	70%	95%
April	117	105	116	89.74%	99.15%	89.74%	99.15%
May	117	78	106	66.67%	90.60%	78.21%	94.87%
June	85	68	83	80.00%	97.65%	78.68%	95.61%
July	66	58	65	87.88%	98.48%	80.26%	96.10%
Aug	105	88	100	83.81%	95.24%	81.02%	95.92%
Sept	91	74	86	81.32%	94.51%	81.07%	95.70%
Oct	82	61	78	74.39%	95.12%	80.24%	95.63%
Nov	75	59	67	78.67%	89.33%	80.08%	94.99%
Dec	34	31	34	91.18%	100.00%	80.57%	95.21%
Jan	122	67	110	54.92%	90.16%	77.07%	94.52%
Feb	110	92	101	83.64%	91.82%	77.79%	94.22%
March	129	103	121	79.84%	93.80%	78.02%	94.17%
Total	1133	884	1067				

Outstanding Annual Fees (Debtors)

At the end of March £745k (97%) of fee income has been received leaving £19.4k still to be recovered. This amount is currently being pursued and it is anticipated the full amount will be recovered. The additional £17k pro-rata invoices issued in March 18 are included in the overall outstanding debt.

Recommendation

It is recommended that the Board **NOTE** the Finance report.

Olive Macleod
Chief Executive

MINUTES

RQIA Audit Committee Meeting, 19 October 2017 Boardroom, 9th Floor, Riverside Tower, Belfast, 14:00pm

Present

Denis Power (Chair)
Patricia O'Callaghan
Seamus Magee
Lindsey Smith
Robin Mullan

In attendance

Olive Macleod (Chief Executive)
Maurice Atkinson (Director of Corporate Services)
Stuart Crawford (Planning and Corporate
Governance Manager)
John Murray (Business Services Organisation,
Internal Audit)
Catherine James (Northern Ireland Audit Office)
Hayley Barrett (Board & Executive Support
Manager)

Apologies

Gerry McCurdy
Catherine McKeown (Business Services Organisation, Internal Audit)
Richard Ross (Northern Ireland Audit Office)

1.0 Welcome and Apologies

- 1.1 The Chair welcomed all members and officers to the Audit Committee meeting. Apologies were noted from Gerry McCurdy, Catherine McKeown and Richard Ross.

2.0 Declaration of Interests

- 2.1 The Chair of the Audit Committee asked Committee members if, following consideration of the agenda items, any interests were required to be declared in line with Standing Orders. No declarations of interests were made.

3.0 Chairman's Business

- 3.1 The Chair informed members that a list of RQIA Audit Committee dates for the remainder of 2017-18 and for 2018-19 are included in the Audit Committee packs. The Chair advised that the dates will be formally sent to NIAO and BSO Internal Audit.

3.2 Resolved Action (358)

Formally write to NIAO and BSO Internal Audit with all RQIA Audit Committee dates for 2017-18 and 2018-19.

- 3.3 The Chair noted the letters received from the Department of Health (DoH) in relation to Controls Assurance Standards and advised that the Controls Assurance Standards will cease with effect from 1 April 2018. The

Director of Corporate Services advised that the completion of Controls Assurance Standards causes an administrative overhead for RQIA and that the use of the internal audit programme as well as external audit is a more effective assurance mechanism. John Murray advised that the processes for Controls Assurance Standards is well embedded in organisations and will be picked up by Internal Audit.

- 3.4 The Chair asked that a brief paper is presented to Audit Committee in March 2018 to provide an understanding of how proportionate assurances can be provided following the removal of Controls Assurance Standards, particularly in relation to the core standards (Governance, Risk Management and Financial Management).

3.5 Resolved Action (359)

The Director of Corporate Services will present a brief paper providing an understanding of how proportionate assurances can be provided following the removal of Controls Assurance Standards in 2018-19.

- 3.6 Committee members **NOTED** Chairman's Business.

4.0 Minutes of previous meeting (AC/Min17/June)

- **Matters Arising**
- **Notification of AOB**
- **Action List Review**

- 4.1 Committee members **APPROVED** the minutes of the meeting of 22 June 2017, for onward transmission to the Board on 6 November 2017.

4.2 Resolved Action (360)

Board & Executive Support Manager to bring the Audit Committee minutes of 22 June 2017 to the November meeting of the Board for noting.

- 4.3 The Chair advised that in relation to action 338 progress is ongoing. The Chair advised that Audit Committee members have agreed that during enforcement decision making panels if there is a conflict of interest this will be declared and the member will step aside.

- 4.4 The Chair noted that actions 350, 351, 352, 354, 356 and 357 are all completed.

- 4.5 The Chief Executive advised that in relation to action 353 RQIA await receipt of the DoH Risk Register.

5.0 Chief Executive Update on key risks

- 5.1 The Chief Executive informed members that since the last Audit Committee meeting in June 2017 an Urgent Order was obtained through a Lay Magistrate seeking closure of Ashbrooke Care Home, Enniskillen. The Chief Executive advised that patients' safety and wellbeing was put at

risk. The Chief Executive advised that Runwood Homes Ltd have submitted an appeal to the Care Tribunal and an initial directional hearing meeting is due to take place on 2 November 2017.

- 5.2 The Chief Executive informed members that Four Seasons Healthcare has advised RQIA that they will commence a financial restructure.
- 5.3 The Chair requested that the Four Seasons Healthcare financial restructure is considered to be included on the Regulation Directorate Risk Register, as this could have a significant impact on Nursing Homes in Northern Ireland.
- 5.4 The Chief Executive informed members that following a meeting with COPNI, RQIA have been advised that RQIA should expect to receive their section of their report for factual accuracy at the end of October 2017. The Chief Executive advised that COPNI do not have to take comments provided by RQIA into consideration.
- 5.6 Audit Committee members **NOTED** the Chief Executive's Update on Key Risks.
- 6.0 Update on Audit Action Plan**
- 6.1 The Planning and Corporate Governance Manager presented the Update on Audit Action Plan to members and noted that the document includes the progress and implementation of recommendations from the 2016-17 Audit Plan.
- 6.2 The Planning and Corporate Governance Manager noted that risk awareness training is behind target, however has been scheduled for November 2017 through the staff meeting and individual team meetings.
- 6.3 The Planning and Corporate Governance Manager noted that recommendations in relation to the RQIA Clinical Audit Team this recommendation is on-going with the view to be completed by November 2017.
- 6.4 The Planning and Corporate Governance Manager advised that in relation to the external audit recommendation on collaborative planning all names have been submitted to BSO for approval and access. The Director of Corporate Services advised that collaborative planning will allow for all budgetholders to access and retrieve information relating to their budgets.
- 6.6 The Planning and Corporate Governance Manager noted that in relation to an outstanding recommendation from 2016/17 RQIA are awaiting further comments on the revised business case for a new information system in MHL. A revised date of March 2018 is being used for approval of the business case.
- 6.8 The Planning and Corporate Governance Manager requested the removal

of the revised capacity legislation due to the significantly extended timescales for implementation of the Mental Capacity Act. Audit Committee confirmed and advised this should remain on the MHLD Directorate Risk Register.

6.9 Committee members **NOTED** the Audit Action Plan.

7.0 Internal Audit Update

To include:

- Internal Audit Progress Report
- Internal Audit Mid-Year Follow Up on Implementation of Previous Recommendations
- Shared Service Audit Summary
- Head of Internal Audit Mid-Year Assurance Report
- General Internal Audit Annual Report 2016/17

7.1 John Murray, Business Services Organisation Internal Audit, presented the Internal Audit Progress Report and advised that it now follows a new format. John Murray advised that 30% of the Audit Plan is completed.

7.2 John Murray advised that the Financial Review has been completed which received satisfactory assurances with no recommendations. John Murray advised that the previous recommendations have been fully implemented. John Murray noted that the Regulated Services audit is currently in progress.

7.3 Committee members **NOTED** the Internal Audit Progress Report.

7.4 John Murray presented the Internal Audit Mid-Year Follow Up on Implementation of Previous Recommendations and advised that 49 recommendations are fully implemented, with 8 partially implemented.

7.5 John Murray advised that the prioritisation of recommendations has been reviewed and re-defined; therefore going forward limited assurance audit reports would have more priority two recommendations.

7.6 Committee members **NOTED** the Internal Audit Mid-Year Follow up on Implementation of Previous Recommendations.

7.7 John Murray presented the Shared Service Audit Summary and noted that Income Shared Services and FPL have received satisfactory assurance. John Murray advised that Payroll Shared Services has received limited assurance on system stability and processes and unacceptable assurance on function stability.

7.8 Committee members **NOTED** the Shared Service Audit Summary.

7.9 John Murray noted that Head of Internal Audit Mid-Year Assurance Report is a summary submitted to the RQIA Chief Executive providing information on shared services and the financial review.

- 7.10 Committee members **NOTED** the Head of Internal Audit Mid-Year Assurance Report.
- 7.11 John Murray presented that General Internal Audit Annual Report 2016/17 and advised that the intention of this report is to share learning and general internal audit issues across the HSC and NIFRS. John Murray advised that this report is being shared with all HSC organisations and NIFRS, for information.
- 7.12 The Chair advised that this report is useful for information.
- 7.13 Committee members **NOTED** the General Internal Audit Annual Report 2016/17.
- 8.0 External Audit – Final Report to those Charged with Governance**
- 10.1 Catherine James, NIAO, advised that the Report to those Charged with Governance has not changed since the June meeting.
- 10.2 Catherine James advised Audit Committee members that NIAO are currently undertaking a tendering process to appoint an external auditor who will be at the next meeting.
- 10.8 Committee members **NOTED** the External Audit – Final Report to those Charged with Governance.
- 9.0 RQIA Mid-Year Assurance Statement**
- 9.1 The Chief Executive presented the mid-year assurance statement to members. Following approval this document will be issued to DoH.
- 9.2 Committee members **APPROVED** the RQIA Mid-Year Assurance Statement.
- 10.0 Corporate Risk Assurance Framework Report**
- 10.1 The Planning and Corporate Governance Manager presented the Corporate Risk Assurance Framework Report to members and advised that the Chief Executive and the Chair of Audit Committee have made significant changes to the document since the last Audit Committee meeting. The Planning and Corporate Governance Manager noted the change log detailed within this document.
- 10.2 The Planning and Corporate Governance Manager advised members that there are currently nine risks on the Corporate Risk Assurance Framework Report following horizon scanning and a PESTLE analysis that was completed in March 2017.
- 10.3 Audit Committee members welcomed the revised Corporate Risk

Assurance Framework report.

- 10.4 The Chair advised that the Corporate Risk Assurance Framework Report will be presented to the meeting of the Board on 6 November 2017.

- 10.5 **Resolved Action (361)**
The Corporate Risk Assurance Framework Report will be presented to the meeting of the Board on 6 November 2017.

- 10.6 The Chair thanked all for their effort in developing the revised Corporate Risk Assurance Framework Report.

- 10.7 Committee members **APPROVED** the Corporate Risk Assurance Framework Report.

11.0 RQIA Anti-Fraud Policy and Fraud Response Plan

- 11.1 The Director of Corporate Services presented the RQIA Anti-Fraud Policy and Fraud Response Plan and advised that there have been minor revisions. The Director of Corporate Services advised that the RQIA Fraud Liaison Officer would be himself, Maurice Atkinson.

- 11.2 The Director of Corporate Services advised that the template for the Fraud Response Plan has been developed by BSO Counter Fraud and Probity Services. The Director of Corporate Services informed members that the RQIA Anti-Fraud Policy and Fraud Response Plan were approved by the Executive Management Team on 25 July 2017 and following approval by the Audit Committee it would be presented at a Board meeting for approval.

- 11.3 An Audit Committee member, Seamus Magee, asked if training would be provided for staff and Board members. The Director of Corporate Services advised that Anti-Fraud training is mandatory for all staff to complete.

- 11.4 Audit Committee members requested that the Director of Corporate Services seeks clarification in relation to the 'outcome of initial enquiry' section of the Fraud Response Plan.

- 11.5 **Resolved Action (362)**
The Director of Corporate Services to seek clarification from BSO Counter Fraud and Probity Services in relation to the 'outcome of initial enquiry section' of the Fraud Response Plan.

- 11.6 Committee members **APPROVED** the RQIA Anti-Fraud Policy and Fraud Response Plan for onward approval to the Board, subject to clarification.

- 11.7 **Resolved Action (363)**
The RQIA Anti-Fraud Policy and Fraud Response Plan will be presented to the Board on 6 November 2017.

12.0 Whistleblowing Report 2017-18

- 12.1 The Director of Corporate Services advised Audit Committee members that an anonymous whistleblowing complaint was received by BSO Counter Fraud and Probity Services.
- 12.2 The Director of Corporate Services advised that RQIA were asked to undertake an initial investigation to ascertain if the whistleblowing complaint should be referred as a case to the BSO Counter Fraud and Probity Services for further investigation. The Director of Corporate Services noted that there was no substance to the whistleblowing allegations and the case was closed.
- 12.3 Committee members **NOTED** the Whistleblowing Report.

13.0 Review of Standing Orders

- **Letter from CMO Dr McBride**

- 13.1 The Chief Executive advised Audit Committee members that the DoH have written to RQIA to advise that Fergal Bradley will be reviewing the RQIA Standing Orders and have asked for a preliminary meeting with the Acting Chair, Mary McColgan and the Chief Executive to discuss a way forward.
- 13.2 The Chair asked if RQIA were aware of what was driving this review. The Chief Executive advised that it was her understanding that the Review of Governance and Board Effectiveness is the reason for the review. The Chair asked if there would be Board representation during the review of Standing Orders. The Chief Executive confirmed that after the initial meeting a Board representative would be appointed.
- 13.3 Committee members **NOTED** the Review of Standing Orders.

14.0 Write-off of Fees 2016/17

- 14.1 The Director of Corporate Services informed members a write-off of fees for 2016/17 is required for £2607.64 of irrecoverable debt. The Director of Corporate Services advised committee members that this outstanding debt for 2016/17 is irrecoverable from seven providers due to most of the providers being either not operational or de-registered. Other outstanding debt for 2016/17 is currently being pursued by the Business Services Organisation (BSO).
- 14.2 Committee members **APPROVED** the Write-off of Fees 2016/17

15.0 Direct Award Contracts (DAC's) & External Consultancy

- 15.1 The Director of Corporate Services informed committee members that to date in 2017/18 there have been no DAC's. The Director of Corporate Services informed committee members that External Consultancy has

been used for the completion of ISO9001:2015.




- 15.2 An Audit Committee member asked if the external consultancy has proven to be value for money. The Chief Executive confirmed that it is value for money. The Chief Executive advised that further training on risk management has been arranged for 8 November 2017 and the ISO9001:2015 assessment will take place in December 2017.
- 15.3 Committee members **NOTED** the Direct Award Contracts (DAC's) and External Consultancy Reports.
- 16.0 **Update on DoH Circulars**
- 16.1 The Director of Corporate Services asked members to note the Circulars issued by DoH.
- 16.2 Committee members **NOTED** the Update on DoH Circulars.
- 17.0 **Any Other Business**
- 17.1 As there was no further business the Chair of the Audit Committee brought the Audit Committee meeting to a close and thanked all for their participation.






Date of Next Meeting: **Thursday 8 March 2018, RQIA Boardroom, 2.00pm**



ACTION LIST

RQIA Audit Committee Meeting 19 October 2017

Action	Minutes Ref	Agreed Action	Responsible Person	Due date for completion	Status
338	12.2	Clarification to be sought from the Board Chairman in relation to Audit Committee member involvement in Executive Decision Making, for example Enforcement Decision Making Panels.	Audit Committee Chair	10 November 2016	
353	8.4	The Chief Executive will enquire with the DoH in relation to their Risk Register to identify risks that may impact RQIA.	Chief Executive	19 October 2017	
358	3.2	Formally write to NIAO and BSO Internal Audit with all RQIA Audit Committee dates for 2017-18 and 2018-19.	Board and Executive Support Manager	8 March 2018	

359	3.5	The Director of Corporate Services will present a brief paper providing an understanding of how proportionate assurances can be provided following the removal of Controls Assurance Standards in 2018-19.	Director of Corporate Services	8 March 2018	
360	4.2	Board & Executive Support Manager to bring the Audit Committee minutes of 22 June 2017 to the November meeting of the Board for noting.	Board and Executive Support Manager	6 November 2017	
361	10.5	The Corporate Risk Assurance Framework Report will be presented to the meeting of the Board on 6 November 2017.	Director of Corporate Services	6 November 2017	
362	11.5	The Director of Corporate Services to seek clarification from BSO Counter Fraud and Probity Services in relation to the 'outcome of initial enquiry section' of the Fraud Response Plan.	Director of Corporate Services	6 November 2017	
363	11.7	The RQIA Anti-Fraud Policy and Fraud Response Plan will be presented to the Board on 6 November 2017.	Director of Corporate Services	6 November 2017	

Key

Behind Schedule	
In Progress	
Completed or ahead of Schedule	

RQIA Board Meeting

Date of Meeting	30 April 2018
Title of Paper	Information Team Workplan
Agenda Item	8
Reference	F/03/18
Author	Rachel Stewart
Presented by	Olive Macleod
Purpose	Workplan for RQIA Information Team
Executive Summary	This paper sets out the priorities for the RQIA Information Team in 2018/19. It has been agreed in conjunction with NISRA management.
FOI Exemptions Applied	None
Equality Impact Assessment	N/A
Recommendation/ Resolution	Board members are asked to note the content of this plan.
Next steps	The plan will be implemented and monitored under the management of Rachel Stewart who will provide updates to EMT and the Board as necessary.

Information Team Work Plan 2018/19

Ref	Key Deliverable	Actions	Target Date
1	Develop and quality assure a suite of relevant risk factors in order to inform the targeting of resources to nursing and residential home inspections.	<ul style="list-style-type: none"> Assess the suitability of information held both internally and externally in relation to deaths, notifiable events, manager changes, duty calls, questionnaires and hospital admissions to identify the level of risk within nursing and residential homes. Quality assure the data available in terms of accuracy, consistency and relevance. Produce baseline information in relation to the above risk factors for quarter 1 and 2 of 2018 to inform the development of the risk model for defining frequency of inspections in conjunction with findings from inspections carried out during the same period. Develop dashboards which will enable inspectors to monitor risk factors within specific services clearly and concisely as well as reporting to senior managers on regional performance. Provide appropriate training in the use and interpretation of dashboards in order that they are of maximum benefit. 	October 2018
2	Ensure information collected centrally within RQIA is fit for purpose and deliver a consistently high standard of timely and appropriate analysis to meet the needs of the business.	<ul style="list-style-type: none"> Carry out a programme of quality assurance checks on information submitted to RQIA including notifiable events and inspection reports and take action both to correct current data and implement system and process changes where possible for example formatting fields as numeric or creating mandatory fields to assure the quality of future data entered meets the agreed definitions and data standards. Develop the skills of the Information Analysts in methods of data interrogation, and presentation and discussion of results in order that they have detailed awareness of the datasets within iConnect, and are able to advise their colleagues of the potential for this information to inform the regulation and quality improvement of services. Review all routine performance monitoring reports beginning with Director Level followed by Head of Programme and Inspectors in order that they are of maximum benefit to the users. Review the information gathering process prior to inspections with a view to identifying potential for increasing efficiency and highlighting gaps in information provision with a view to providing more comprehensive and user friendly briefing. 	<p>October 2018</p> <p>March 2019</p> <p>March 2019</p> <p>March 2019</p>

3	Implement and oversee central monitoring of all statistical information requests	<ul style="list-style-type: none"> Design and implement a central repository for all information requests received into RQIA in order that - there is no duplication of work - there is consistency of responses - we can identify information which is requested frequently and Establish whether it would be possible to make statistical information publicly available 	June 2018
4	Develop strategic alliances with other organisations to promote the use of information collected and analysed internally within RQIA and exploit potential for collaborative working.	<ul style="list-style-type: none"> To implement Data Access Agreements with HSC Trusts in order to access information to inform the Acute Hospital Inspection Programme including surgical site infections, antimicrobial resistance and hospital acquired infections. Investigate the potential within the Acute Hospital Inspection Programme process to collaborate with the PHA in order to inform their work on antibiotic prescribing and surgical site infection and facilitate liaison between inspection teams and relevant colleagues within the PHA. In conjunction with DoH, facilitate matching of registration and regulation data held within RQIA with administrative data available on hospital inpatients and emergency care in order to further inform policy development within DoH and Quality Improvement work within RQIA. By working with NISRA colleagues in the General Registry Office to identify irregularities in reporting of deaths in nursing homes, including underreporting of notifications submitted to RQIA and quality of death information recorded on death certificates in line with key DoH policy area. 	<p>June 2018</p> <p>March 2019</p> <p>December 2018</p> <p>December 2018</p>
5	Produce an official statistics output on high level metrics.	<ul style="list-style-type: none"> Review of current published data using feedback from users, website traffic and ONS guidelines with a view to:- <ul style="list-style-type: none"> - ensuring that data is relevant - information is clearly presented - widening the scope of information provided 	March 2019
6	Provide analytical support to the Office of the Chief Executive	<ul style="list-style-type: none"> Provision of ongoing strategic analytical support and advice to the Office of the Chief Executive of RQIA including detailed timeline and regulatory information to support enforcement action. Provision of briefing to inform meetings with DoH and RQIA Board. 	Ongoing

7	Ensure that the work of the information team is in line with NISRA and DoH standards	<ul style="list-style-type: none">• Maintain professional training in line with NISRA requirements.• Ensure that any relevant statistical developments are disseminated to the team.• Continue regular liaison with NISRA colleagues both within DoH and NISRA.	Ongoing
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RQIA Board Meeting

Date of Meeting	30 April 2018
Title of Paper	Quarterly Communications and Engagement Update
Agenda Item	9
Reference	G/03/18
Author	Malachy Finnegan
Presented by	Olive Macleod
Purpose	To provide an overview of key communications and engagement activities over the past quarter and current activities, which board members are invited to note
Executive Summary	This paper provides a summary of key communications and engagement activities, including: Media Interest; Engagement; Events; Partnership Working; Digital Communications; Publications; and Looking Forward.
FOI Exemptions Applied	n/a
Equality Impact Assessment	n/a
Recommendation/Resolution	Board members are asked to note this paper.
Next steps	Further update to be provided in Quarter 2 2018-19.

Quarterly Communications and Engagement Update: April 2018

At the Board meeting on 22 March 2018, board members approved RQIA's Communications and Engagement Plan 2018-21. Board members requested regular (quarterly) communications updates to be provided at future meetings.

January – April 2018

1. Media Interest

There has been significant print, broadcast and online media interest in the work of RQIA in recent months – both proactive and reactive - primarily relating to enforcement and regulatory action and public concerns. Two issues received particular attention:

- (i) Enforcement in respect of the Northern Ireland Ambulance Service Trust, which resulted in The Department of Health accepting RQIA's recommendation to place NIAS on a special measure. The main television and radio news programmes covered this issue extensively and included interviews with RQIA's Chief Executive.
- (ii) The decision by Runwood Homes Ltd to withdraw its Care Tribunal appeal to challenge the decision to close Ashbrooke Care Home in Enniskillen, as a result of systemic care failings identified by RQIA inspectors, and serious concerns in relation to its management, attracted significant print and online coverage.

When RQIA responds to media queries, detailed briefings are provided to journalists, to ensure a clear understanding of the extent of our powers and the context of decision making processes are communicated.

2. Engagement

Since January 2018, RQIA's Chief Executive and Communications Manager have met with a number of groups to discuss the role of RQIA and opportunities to increase engagement with those in receipt of health and social care services. These included: Sinn Féin's health team and the Newry and Mourne Older People's Forum. RQIA has also committed to attending the 2018 Pensioners Parliament programme, with events to be held in each council area across Northern Ireland from March to June. To date, RQIA has attended the first four Pensioners Parliaments – in Belfast, Craigavon, Bangor and Newtownabbey, which have provided RQIA with an opportunity to engage directly with older people and their representative organisations.

RQIA has also met with the chief executives of a number of organisations representing elderly people, including Age Sector Platform and Age NI, to discuss opportunities for joint working. In late March and early April, RQIA attended the Alliance and SDLP party conferences, in partnership with GMC, NISCC, Pharmaceutical Society, NICON and the PCC. RQIA also exhibited at the annual NICON conference, where we met with a wide range of delegates across health and social care in Northern Ireland.

3. Events: Partnership Working

In January, RQIA and the Royal College of Psychiatrists in Northern Ireland held our annual joint workshop, Working Towards Improvement, with a range of presentations from consultant psychiatrists, and a personal perspective from Hamish Elvidge founder of the Matthew Elvidge Trust on sharing information to save lives.

In March, in partnership with the Northern Ireland Social Care Council (NISCC) and the Nursing and Midwifery Council (NMC), RQIA held two information sessions for managers of regulated services providing a range of guidance to support them in their work. There was an excellent turnout of care service managers, with both events booked out.

For those unable to attend these events, copies of presentation materials are available on our website.

4. Digital Communication

RQIA's website continues to attract significant traffic, with the inspection, enforcement and provider guidance sections receiving particular attention. The content is refreshed on an ongoing basis, with new content added daily.

Our social media presence on Twitter has also continued to increase, with over 2,500 @RQIANews followers, an increase of almost 500 in the past four months. Since January we have posted over 60 updates, providing details of our latest news, public statements, publications; events; and training and learning opportunities.

In April, Issue 15 of RQIA's ezine Assurance, Challenge and Improvement, which provides an overview of RQIA's activities over the past three months was distributed to over 1,500 stakeholders. This ezine is also available on our website, and via our Twitter account.


5. Publications

This year, RQIA's communication team has been working on developing new materials to help support those in receipt of care raise any concerns they may have about the quality of their care. In February RQIA published two guidance leaflets on how to raise concerns in relation to independent HSC services (i.e. regulated services) and services operated by trusts (hospital and mental health wards). In March, a new poster entitled "Did you know ...?" was issued to every care home in Northern Ireland, highlighting the role of RQIA and to encourage service users and visitors to care homes to contact RQIA with their views on these services.

RQIA's communications team has also developed a new calling card, "Have we missed you ...?", which is being distributed by RQIA's inspectors following inspections to encourage service users and their friends and families to contact RQIA to provide their views on the provision of care within the service. This will provide RQIA with an invaluable and unique insight into the care provided through the views of service users.

Looking Forward

At present, RQIA's communications team is working to deliver RQIA's Communications and Engagement Plan 2018-21. Our current focus is attendance at the ongoing 2018 Pensioners Parliament events and preparation of RQIA's Annual Report 2017-18.



Malachy Finnegan
Communications Manager

RQIA Board Meeting

Date of Meeting	30 April 2018
Title of Paper	Proposed changes to the Procedure for Appointment to RQIA's List of Part II Medical Practitioners
Agenda Item	10
Reference	H/03/18
Author	Theresa Nixon, Director of Quality Assurance and Patricia O'Callaghan, Chair of RQIA's Appointment Panel
Presented by	Theresa Nixon, Director of Assurance
Purpose	<p>The purpose of this paper to ask the Board to Approve the proposal to amend the Part II appointment procedure.</p> <p>Approve the consultation with key stakeholders.</p> <p>Approve, making the new procedure operational in July 2018</p>
Executive Summary	<p>In November 2017, RQIA consulted with the Royal College of Psychiatrists regarding consultant psychiatrist's views on RQIA's process for applying for Part II status.</p> <p>The feedback identified areas where RQIA could streamline its application process. The Appointment Panel is proposing that, instead of RQIA seeking evidence to support all applications, the trust Clinical Directors should indicate that the applying medical practitioner has been approved to practice and under take Part II work following revalidation, and confirm that they already meet the revised criteria</p>
FOI Exemptions Applied	n/a
Equality Screening Completed and Published	n/a
Recommendation/Resolution	n/a

Next steps	<p>Seek approval from the Board to the proposed changes to the current Part II appointment procedure.</p> <p>RQIA's Medical Director & Director of Quality Improvement, Director of Assurance and Sessional Professional Officer will consult with identified key stakeholders regarding the proposed changes to the procedure for appointment and the logistical management, by Clinical Director, of aligning this process with revalidation.</p>

Proposed changes to the Procedure for Appointment to RQIA's List of Part II Medical Practitioners

Background

The functions of the Mental Health Commission were transferred to RQIA in April 2009.

One of the transferred functions was the power to appoint Part II medical practitioners to authorise admission and detention of a patient in hospital for assessment under Part II of The Mental Health (Northern Ireland) Order 1986.

A Part II Medical Practitioner has the following responsibilities:

- Signing all prescribed forms, for which they are authorised, in relation to the legal detention and treatment of patients;
- Providing reports for a court under Part III of the Mental Health (Northern Ireland) Order 1986

New Part II Procedure

In 2013, RQIA was asked to discuss their appointment process with three high court judges. Following legal advice from the Department of Legal Services, a new and definitive procedure was written to clearly set out the general principles, procedures and processes that RQIA were to follow in relation to appointing Part II medical practitioners. A set of criteria was drafted; this included a list of conditions that must be met before appointment can be approved (see appendix 1).

The procedure was underpinned by RQIA's Standing Order Five which provided a facility for a Board sub-committee to be established, as well as permitting medical practitioners to make representation about any decision regarding non-appointment, suspension or removal made by the appointment panel.

The Appointment Panel

In 2013, RQIA's Chairman sought expressions of interest from five Board members to sit on the Appointment Panel. Following approval by the Board, RQIA's Chairman agreed the appointment of four Board members and one Chairperson.

The Panel chair is responsible for convening meetings of the Panel and for ensuring the accuracy of recording any decisions made.

All Part II applications are scrutinised by a Sessional Medical Officer to ensure compliance with appointment criteria before they are brought to the attention of the Panel.

Proposed Changes to the Appointment Process

In September 2017, RQIA consulted with the Royal College of Psychiatrists and the Northern Ireland Medical and Dental Agency (NIMDTA) regarding consultant psychiatrist's views on RQIA's process for applying for Part II status (see appendix 2).

The feedback, whilst mainly positive, identified areas where RQIA could streamline its application process. The Appointment Panel are proposing that, instead of RQIA seeking all the evidence required in Appendix 1, the trust's Clinical Directors should indicate that the medical practitioner has been approved to practice and undertake Part II work following revalidation and confirm that they already meet the revised criteria (see appendix 3).

Following this confirmation the Panel, on advice from RQIA's Sessional Medical Officers, will make their decision to appoint.

There is no legal impediment to amending this process and there are no identified risks, as Clinical Directors will not permit doctors to undertake Part II duties unless they have been granted Part II status by RQIA.

The Chair of the Appointment Panel will review the proposed changes to the procedure and advise the Board if this is working satisfactorily, by January 2019.

Next steps and Way Forward

- 1) Seek approval from the Board to the new changes proposed to the appointment procedure.
- 2) Consult with identified key stakeholders regarding the proposed changes to the procedure for appointment.
- 3) If agreed, revise the procedure and commence operation of same by 30 June 2018.

Recommendations

The Board is asked to:

- 1) Approve the proposal to amend the Part II appointment procedure.
- 2) Approve the consultation with key stakeholders.

- 3) Approve, if agreed, and following consultation, the revised procedure commencing operationally on 30 June 2018.

Ms Patricia O'Callaghan
Chair of RQIA's Appointment Panel

Mrs Theresa Nixon
Director of Mental
Health, Learning
Disability and Social
Work

DRAFT

Appendix 1

Eligibility Criteria for the Initial Appointment to the RQIA List of Part II Medical Practitioners - 2013

The following information must be sent to RQIA in order that appointment can be considered by the appointment panel:

- a fully completed application form;
- evidence of recent appointment to the post of consultant psychiatrist in the specialism of mental health, learning disability, old age psychiatry, child and adolescent mental health services;
- or**
- evidence of being or having past relevant medical experience as a consultant psychiatrist, within the last four years (in one of the specialisms above) completing applications for and/or renewal of detention/ guardianship of patients, under Part II of the Mental Health (Northern Ireland) Order 1986;
- evidence of working as or intending to work as a private medical practitioner giving evidence or preparing reports or assessments for a court under Part III of the Mental Health (Northern Ireland) Order 1986;
- evidence of working as a consultant psychiatrist currently for the Mental Health Review Tribunal (Northern Ireland) or equivalent body;
- evidence of appointment as a sessional consultant psychiatrist for RQIA;
- and**
- confirmation of full registration with the General Medical Council (GMC) and hold a current licence to practise for your last academic year
- evidence of a valid Certificate of Specialist Training (CST) and/or be on the Specialist Register of GMC;
- evidence of satisfactory participation in continuing professional development, including demonstration of registration with and provision of Continuing Professional Development (CPD) Good Standing certificate from the Royal College of Psychiatrists or equivalent body (please state name of body);
- evidence of certificates demonstrating completion of GAIN e-learning modules 1-4 on the Mental Health (Northern Ireland) Order 1986 within the last two years;

- if a medical practitioner working within a trust, a reference from the medical director of the trust or his or her authorised nominee, usually a clinical director or associate medical director;
- if a medical practitioner working in an independent hospital, a reference from the medical director or his or her authorised nominee, usually a clinical director or associate medical director;
- if an independent medical practitioner giving evidence to or preparing reports or assessments for the court under Part III of the Mental Health (Northern Ireland) Order 1986, a reference from the Medical Practitioner's Responsible Officer under The Medical Profession (Responsible Officers) Regulations (Northern Ireland) 2010;
- if Part II duties are not indemnified as part of a contract of employment, applicants must provide a copy of their current insurance certificate of indemnity, with a recognised medical defence organisation, or similar body, providing adequate cover to undertake work in respect of the functions of the Mental Health (Northern Ireland) Order 1986;
- for medical practitioners not employed by a trust or independent Hospital, an AccessNI Enhanced Disclosure application form with Part B, D, E, F and G only completed and valid identification documents (3 or 5) as per AccessNI guidance document, together with AccessNI Fee payment of £33 to RQIA;
- if employed by a trust or independent hospital a copy of the most recent AccessNI Enhanced Disclosure Certificate
If an AccessNI Enhanced Disclosure check was not undertaken on taking up current employment, applicants should submit relevant documents as required in Section 5, item 11 of the application form.
- If an applicant is applying to the list of medical practitioners from outside Northern Ireland they are required to submit to RQIA a copy of their most recent Disclosure and Barring Service (DBS) (previously CRB) Certificate.

INTRODUCTION

AIMS

Psychiatrists who have Part II Status have particular powers under the mental health legislation. We are conducting this survey in order to seek your views on three aspects of Part II Status.

1. Your views on the process of applying for Part II Status to RQIA.
- 2 Your views on the level of training and need for ongoing training for those with Part II Status in the use of the mental health legislation, taking into account how frequently you use the legislation in your daily work.
- 3 A trainee survey identified some deficits in their training with regard to the use of mental health legislation. One idea to improve this that has been suggested is for trainees, in the later part of their training, to be allowed to complete Forms 8 and 9 under the supervision of a Consultant.

CONFIDENTIALITY

This is a confidential survey and no person's individual details will be identified. Please do not record any identifiable patient's or other person's details.

SECTION 1 - GENERAL DETAILS

1. When did you receive Part II Approval?

- ☐ Within the past 0-2 years
- ☐ Between 2-5 years ago
- ☐ Between 5-10 years ago
- ☐ More than 10 years ago

2. In which specialty do you mainly practice?

- ☐ General Adult
- ☐ Old Age
- ☐ Child and Adolescent
- ☐ Forensic
- ☐ Intellectual Disability
- ☐ General Adult and Psychotherapy
- ☐ General Adult and Old Age
- ☐ CAMHS & ID

SECTION 2 - RQIA PROCESSES

3. If you have recently applied to RQIA (i.e. within last 5 years) please comment on how you found the process.

4. Was the application form user friendly? (Part II Application Form)

- ☐ YES
- ☐ NO
- ☐ CAN'T REMEMBER

5. The criteria set by RQIA for Part II Status are fair.

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

6. Please comment

7. Have you any suggestions as to how RQIA might improve the Part II Application process?

8. Locum Consultants without CCT should have an opportunity to apply for Part II Status.

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

9. One criterion set by RQIA is that Part II Status is only awarded to those who have obtained a CCT. This is in contrast to other UK jurisdictions where a trainee can be Section 12/22 approved after three years' training and obtaining the MRCPsych. It has been stated that the RQIA requirement for CCT for Part II Approval is a barrier to Higher Psychiatry Training.

Do you agree with this statement?

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

Appendix 3

Clinical Directors Application for Part II Appointment



RQIA is the independent body responsible for monitoring and inspecting the availability and quality of health and social care services in Northern Ireland, and encouraging improvements in the quality of those services.

Consultant psychiatrist wishing to be appointed to RQIA's list of Part II medical practitioners are required to make application to RQIA's Appointment Panel.

The consultant psychiatrist's responsible medical officer is required to provide evidence and assurance to RQIA that the applicant meets the eligibility criteria set out in the Policy for Appointment to the RQIA List of Part II Medical Practitioners.

The reference you provide will be used to assist in appointing the medical practitioner. RQIA may be required to contact you to further clarify or verify details provided in your reference.

Medical practitioners seeking appointment are required to declare all convictions subject to the Rehabilitation of Offenders (Exceptions) Order (Northern Ireland) 1979. It is essential therefore that you inform RQIA of any convictions or other matters known to you which may render the applicant unsuitable for working with vulnerable people.

I would be pleased if you would complete the form below and add any other comments or documentation that you consider to be relevant and return to team.mentalhealth@rqia.org.uk or

The Regulation and Quality Improvement Authority
Mental Health and Learning Disability Team
9th Floor, Riverside Tower
5 Lanyon Place
Belfast
BT1 3BT

Should you have any queries, please do not hesitate to contact the Mental Health and Learning Disability Team on (028) 95 361111

Patrick Convery
Head of Programme
Mental Health and Learning Disability

Please complete all sections. Use page overleaf if necessary

Name of the Applicant	
Position	
Name of Trust/ Practice area	
Type of Appointment Appointment as locum or substantive post holder	
Requested <u>duration of appointment</u> e.g. 12 months (locum) / 5 years (substantive post) *For locum medical practitioner, please indicate the effective dates from which Part II approval is required	
In what capacity is the applicant known to you? (please delete as appropriate)	I am the applicants: Medical director or medical director's authorised nominee (i.e. associate medical director or applicant's clinical director or RMO) in the trust/ practice area
The length of time the applicant has been known to you	
Please confirm that the applicant is actively engaged in annual appraisal of practice and fulfilling the requirements of their post	

I, _____ confirm that the Medical Practitioner:

Has been appointed to the post of Consultant Psychiatrist, is currently on the specialist register, and completes applications for and/or renewal of detention of patients, under Part II of the Mental Health (Northern Ireland) Order 1986	<input type="checkbox"/>
Is registered with the General Medical Council (GMC) and holds a current licence to practice for the last academic year.	<input type="checkbox"/>
Has a valid Certificate of Specialist Training (CST) and is on the Specialist Register of GMC.	<input type="checkbox"/>
Is engaged in satisfactory participation in continuing professional development, and has continuing Professional Development (CPD) Good Standing Certificate from the Royal College of Psychiatrists or equivalent body within the last academic year.	<input type="checkbox"/>
Can demonstrating completion of GAIN e-learning modules 1-4 on the Mental Health (Northern Ireland) Order 1986 within the last two years.	<input type="checkbox"/>
Is an Independent Medical Practitioner giving evidence to or preparing reports/assessments for the court under Part III of the Mental Health (Northern Ireland) Order 1986	<input type="checkbox"/>
Has a valid AccessNI Enhanced Disclosure Certificate (or equivalent)	<input type="checkbox"/>

Please add any other comments you consider to be relevant to the application for the above individual

Name	Signature of medical director or medical director's authorised nominee	Date

RQIA Board Meeting

Date of Meeting	30 April 2018
Title of Paper	Annual Report of Appointment Panel April 2018
Agenda Item	11
Reference	I/03/18
Author	Ms Patricia O'Callaghan, Chair of RQIA Appointment Panel and Mrs Theresa Nixon, Director of Assurance
Presented by	Ms Patricia O'Callaghan
Purpose	The purpose of this report is to advise the Board of the activity of the Appointment Panel in 2017/18.
Executive Summary	<p>The power to appoint to the List of Part II and Part IV Medical Practitioners is vested in RQIA following the transfer of functions from the former Mental Health Commission under Article 25(1) Health and Social Care (Reform) Act (Northern Ireland) 2009.</p> <p>A Panel was established in 2013, by RQIA's Chairman, to appoint Part II and Part IV medical practitioners. Each year an update is brought to the Board, in accordance with procedure, to outline the activity of the Panel and any issues of concern.</p>
FOI Exemptions Applied	N/A
Equality Screening Completed and Published	N/A
Recommendation/Resolution	N/A
Next steps	The Board should consider if another Board member should be co-opted to the Appointment Panel, following the resignation of Stella Cunningham

Annual Report on the Activity of RQIA's Appointment Panel April 2018

1.0 Purpose of Report

The purpose of this report is to advise the Board of the activity of the Appointment Panel in 2017/18.

2.0 Background

The power to appoint to the List of Part II and Part IV Medical Practitioners is vested in RQIA following the transfer of functions from the former Mental Health Commission under Article 25(1) Health and Social Care (Reform) Act (Northern Ireland) 2009.

A Panel was established in 2013, by RQIA's Chairman, to appoint Part II and Part IV medical practitioners. Each year an update is brought to the Board, in accordance with procedure, to outline the activity of the Panel and any issues of concern.

Part II Medical Practitioners

Consultant psychiatrists, with specialist experience in the diagnosis or treatment of mental disorder, who meet the conditions set out by RQIA, are eligible to apply for appointment to the list of Part II medical practitioners. Approval of appointment is not automatic. The suitability of each applicant is considered by RQIA's Appointment Panel, with account taken of the relevant experience, training, professional standing and qualifications of the practitioner.

Second Opinion Appointed Doctors (Part IV doctors)

The Mental Health (Northern Ireland) Order 1986 (the Order), provides for the appointment of independent medical practitioners, ensuring a safeguard of the rights of patients detained under the Order. This safeguard enables patients, who refuse the treatment prescribed by the approved clinician, or are deemed incapable of providing consent, to have a second opinion concerning their treatment. The role of the Second Opinion Appointed Doctor is not to give a second clinical opinion, in the conventionally understood medical form of expression, but to decide whether the treatment recommended is clinically defensible and to indicate if due consideration has been given to the views and rights of the patient.

3.0 Current Membership of the RQIA's Appointment Panel

The Appointment Panel comprises a chair, Ms Patricia O'Callaghan, who is responsible for convening meetings of the Panel and for ensuring the accuracy of recording any decisions made.

The Panel consists of a further 3 Board Members:

- Ms Sarah Havlin
- Mr Denis Power
- Mr Seamus Magee

The Appointment Panel also has in attendance

- Patrick Convery, Head of Programme, Mental Health and Learning Disability
- Claire Henry, Panel Administrator

The Director of Mental Health, Learning Disability and Social Work will attend a Panel meeting, if required. An RQIA Sessional Medical Officer may also attend the panel meeting. A Sessional Medical Officer is required to scrutinise all applications to ensure compliance with appointment criteria before they are brought to the attention of the Panel.

4.0 Activity of the Appointment Panel 2017/18

Since April 2017 the Panel has made 49 appointments to RQIA's List of Part II Medical Practitioners (see Appendix 1 for details of appointments).

There have been no appointments made to RQIA's List of SOADs.

In November 2017, RQIA and the Royal College of Psychiatrists undertook a joint survey regarding the current eligibility criteria for appointment as a Part II medical practitioner.

Following the results of this survey the Appointment Panel agreed that RQIA's current application process should be reviewed. RQIA will consult on any proposed changes with The Royal College of Psychiatrists and The Clinical Directors in each trust.

A paper of the proposed changes will be presented to Board on 30 April 2018 for approval.

5.0 Concerns of the Appointment Panel

RQIA continues to find it difficult to recruit SOADs, despite an open advertisement on our website. At our annual Part II/IV Conference (jointly badged by the Royal College of Psychiatrists, NI Division) RQIA continues to encourage all consultant psychiatrists to consider applying to become a SOAD.

RQIA propose that the fee to fund the activity of SOADs should be raised from £156.16 to £180, per second opinion.

6.0 Next Steps

Based on the results of a trainee survey undertaken by the Royal College of Psychiatrists, the Appointment Panel will meet to consider amendment to our current eligibility criteria. We will consult on any proposed changes with:

- The Royal College Psychiatrists
- Northern Ireland Medical and Dental Training Agency (NIMDTA)
- Clinical and Medical Directors of the five trusts.

Theresa Nixon, Director of Assurance will seek a revised circular from the DoH to support an increase in payment for SOADs.

Ms O'Callaghan will provide a further update in September 2018.

7.0 Action Required of the Board

Board members are asked to note the activity of the Panel and approve next steps above.

The Board Chair is asked to consider if another Board member should be co-opted to the Appointment Panel, following the resignation of Stella Cunningham

Ms Patricia O'Callaghan
Chair of RQIA Appointment Panel

Theresa Nixon
Director of Quality
Assurance

Appendix 1

Appointments made to Part II List since April 2017.

May 2017	<ul style="list-style-type: none">• 2 Locum Appointments• 1 Initial Appointment• 1 Reappointment
July 2017	<ul style="list-style-type: none">• 9 Reappointments
August 2017	<ul style="list-style-type: none">• 2 Initial Appointments• 7 Reappointments
September 2017	<ul style="list-style-type: none">• 5 Initial Appointments• 1 extension• 2 Reappointments
October 2017	<ul style="list-style-type: none">• 5 Reappointments• 1 Locum Appointment
November 2017	<ul style="list-style-type: none">• 2 Locum Appointments
December 2017	<ul style="list-style-type: none">• 4 Initial Appoints• 2 Reappointments
January 2018	<ul style="list-style-type: none">• 1 Reappointment
February 2018	<ul style="list-style-type: none">• 4 Appointments
March 2018	<ul style="list-style-type: none">• 2 Locum Appointments
April 2018	<ul style="list-style-type: none">• 3 Initial Appointments

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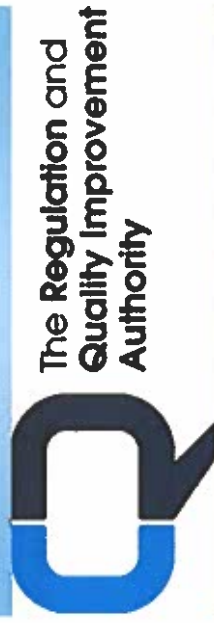
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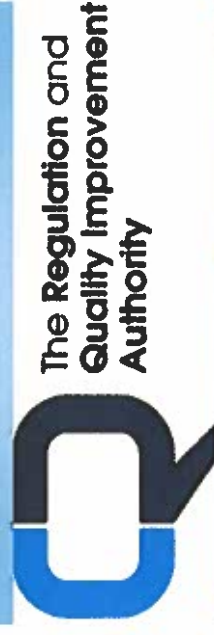
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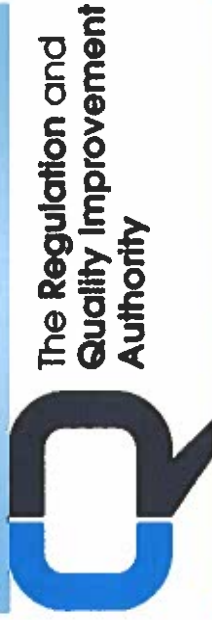
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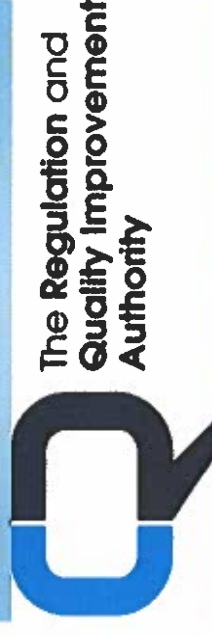
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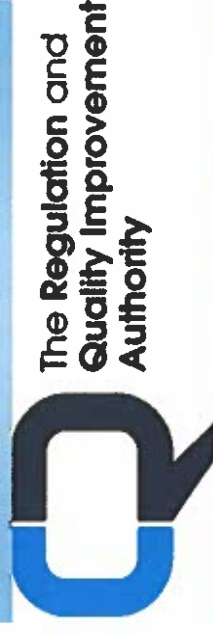
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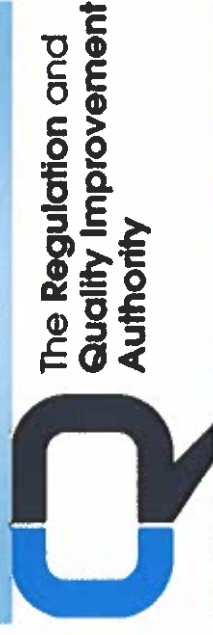
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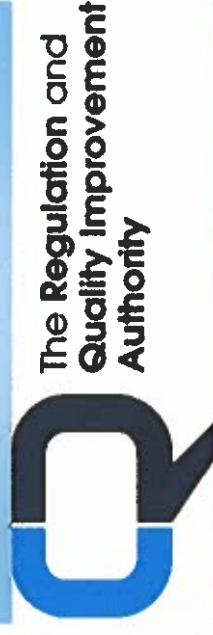
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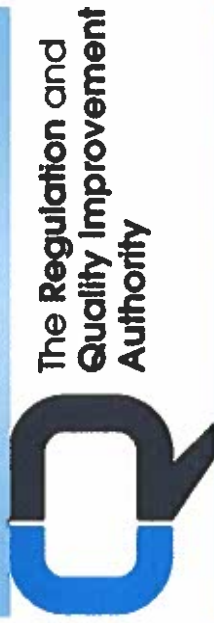
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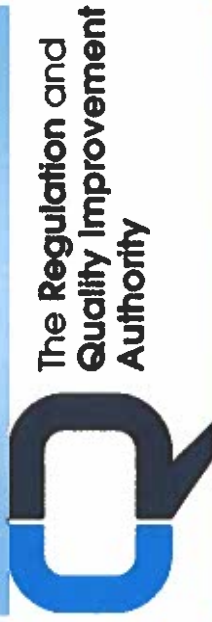
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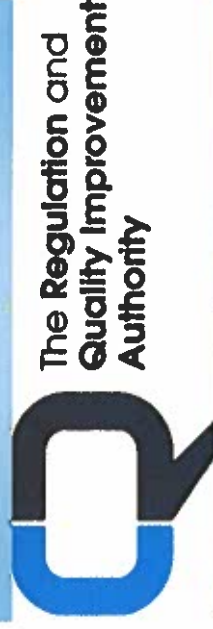
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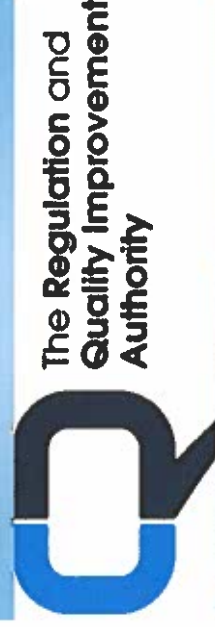
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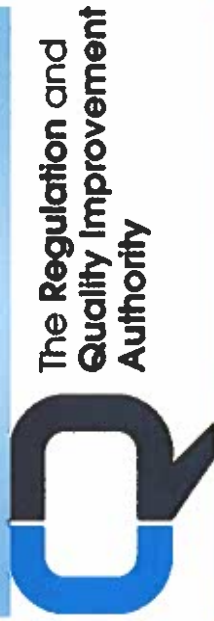
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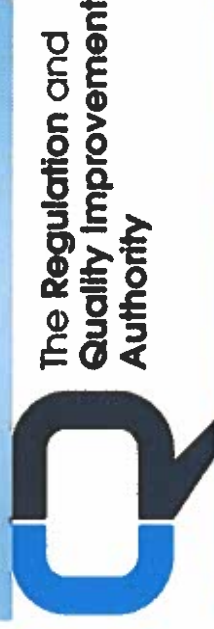
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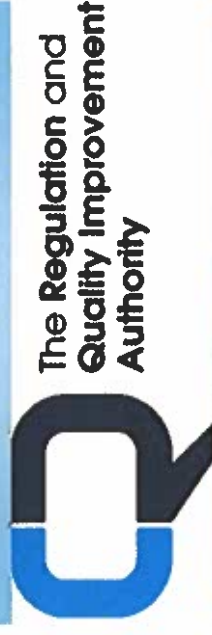
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