

**PARTNERSHIP AGREEMENT BETWEEN THE
DEPARTMENT OF HEALTH AND THE REGULATION
AND QUALITY IMPROVEMENT AUTHORITY**

CONTENTS

Introduction	3
1. The Partnership Agreement	3
RQIA Establishment and Purpose	6
2. Statutory Purpose and Strategic Objectives	6
RQIA Governance Arrangements	7
3. Organisational Status	7
4. Corporate Governance Framework	7
5. The Regulation and Quality Improvement Authority	7
6. RQIA Audit and Risk Assurance Committee (ARAC)	9
7. The Chair of the Authority	10
8. The Chief Executive	11
Role of the DoH	13
9. Partnership Working with RQIA	13
10. Lead Official	14
11. Annual Engagement Plan	14
12. Departmental Accounting Officer	15
13. Attendance at Public Accounts Committee	16
Assurance Framework	17
14. Autonomy and Proportionality	17
15. Authority Effectiveness	18
16. Authority Member Appraisals	18
17. Internal Audit Assurance	19
18. Externally Audited Annual Report and Accounts	20
Signatories	21
Annex 1 - Applicable Legislation	22
Annex 2 – Annual Engagement Plan	23
Annex 3 - Delegations	29
Annex 4 – System of Assurance	30
Annex 5 – Concerns/Complaints in respect of Authority members	32
Annex 6 - Applicable Guidance	33
Annex 7 – Role of the Minister	34
Annex 8 –Partnerships between Department and Arm’s Length Bodies: NI Code of Good Practice	35

1. [The Partnership Agreement](#)

- 1.1 This Agreement sets out the partnership arrangements between the Regulation and Quality Improvement Authority (RQIA) and the Department of Health (DoH and Department), relating to governance and accountability. Whilst RQIA is accountable to the Department, as set out in this Agreement, RQIA is operationally independent from the Department.¹ It is also recognised that RQIA's powers, duties and functions are set by statute. In particular, this Agreement explains the overall governance framework within which the Authority operates, including the framework through which the necessary assurances are provided to stakeholders. Roles/responsibilities of partners within the overall governance framework are also outlined.

The partnership is based on a mutual understanding of strategic aims and objectives; clear accountability; and a recognition of the distinct roles each party contributes.

Underpinning the arrangements are the principles set out in the ['Partnerships between Departments and Arm's-Length Bodies': NI Code of Good Practice](#)

(HYPERLINK ADDED) which should be read in conjunction with this document. The principles which are laid out in the Code are:

- Leadership;
- Purpose;
- Assurance;
- Value; and
- Engagement

- 1.2 Guidance on proportionate autonomy has been considered in determining the extent of engagement and assurance to be established between the Authority and the Department and this is reflected in this Agreement.

DoH and the Authority are committed to:

- Working together within distinct roles and responsibilities;
- Maintaining focus on successful delivery of Programme for Government outcomes and Ministerial priorities;
- Maintaining open and honest communication and dialogue;

- Keeping each other informed of any issues and concerns, and of emerging areas of risk;
- Supporting and challenging each other on developing policy and delivery [when developing policy this may cut across more than one department];
- Resolving issues quickly, constructively and collaboratively (subject to resource constraints); and
- Acting at all times in the public interest and in line with the values of integrity, honesty, objectivity and impartiality.

1.3 The effectiveness of the partnership and the associated Engagement Plan will be reviewed each year by the Department and the Authority in order to assess whether the partnership is operating as intended and to identify any emerging issues/opportunities for enhancement. This can be carried out as part of existing governance arrangements. The Partnership Agreement will be reviewed formally at least once every three years to ensure it remains fit for purpose and up to date in terms of current governance frameworks.

1.4 The formal review will be proportionate to the Authority's size and overall responsibilities and will be published on departmental and ALB websites as soon as practicable following completion.

1.5 A copy of this Agreement has been placed in the Assembly Library and is available on the DoH and RQIA websites.

Establishment and Purpose of the RQIA

2. Statutory Purpose and Strategic Objectives

- 2.1 The RQIA is a body corporate established by the Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003. It is a Non-Departmental Public Body (NDPB); and for national accounts purposes, the RQIA is classified to the central government sector.
- 2.2 The RQIA's core purpose is to work together with others to secure and improve safety and quality in health and social care services in Northern Ireland. Relevant statutory provisions are set out in Annex 1.
- 2.3 The Minister for the Department of Health is answerable to the Assembly for the overall performance and delivery of both the Department and the RQIA.
- 2.4 The Executive's outcome-based approach to delivery recognises the importance of ALBs and Departments working collaboratively in a joined-up approach to improve overall outcomes. The aims, objectives and expected outcomes of the RQIA and the Department are strategically aligned.
- 2.5 The strategic aims of the RQIA in respect of its role in the HSC are:
- To conduct its statutory duties and exercise its powers and functions to support the Department of Health's statutory duty to provide an integrated system of health and social care designed to:
 - Secure improvement in the physical and mental health of people in Northern Ireland;
 - Secure improvement in the prevention, diagnosis and treatment of illness; and
 - Secure improvement in the social well-being of people in Northern Ireland.

RQIA Governance Arrangements

3. Organisational Status

- 3.1 As a legal entity in its own right, RQIA employs its own staff and operates at arm's-length from the Department. RQIA will comply with all relevant legislation.

4. Corporate Governance Framework

- 4.1 The Authority has an established Corporate Governance Framework which reflects all relevant good practice guidance. The Framework includes the corporate governance structures established within the Authority and the internal control and risk management arrangements in place. This includes its Authority Structure. The Department should be satisfied with the framework.
- 4.2 An account of this Corporate Governance Framework is included in the Authority's annual Governance Statement together with the Authority assessment of its compliance with the extant Corporate Governance Code of Good Practice (NI). Any departure from the Corporate Governance Code must be explained in the Governance Statement. The extant Corporate Governance Code of Good Practice (NI) is available on the Department of Finance (DoF) website.
- 4.3 The Authority is required to follow the principles, rules, guidance and advice in Managing Public Money Northern Ireland. A list of other applicable guidance and instructions which the Authority is required to follow is set out in Annex 6. Good governance should also include positive stakeholder engagement, the building of positive relationships and a listening and learning culture.

5. The Regulation and Quality Improvement Authority (RQIA)

- 5.1 The RQIA is an Authority, consisting of members appointed by the Department in accordance with The Regulation and Improvement Authority (Appointments

and Procedure) Regulations (Northern Ireland) 2004. The appointment process for Authority members complies with the Code of Practice on Public Appointments for Northern Ireland.

- 5.2 As Public Appointees, Authority Members are office holders rather than employees; they are not subject to employee terms and conditions. Authority appraisal arrangements are set out in paras 16.1 and 16.2 and matters for consideration in dealing with concerns/complaints in respect of Authority members are provided in Annex 5.
- 5.3 The Authority's Standing Orders provide further detail on roles and responsibilities and align with this Partnership Agreement. A copy is available on the RQIA website.
- 5.4 The purpose of the Authority is to regulate; and encourage improvement in the safety, quality, and availability of health and social care in Northern Ireland, providing effective leadership, informing strategic direction and ensuring that the RQIA's statutory duties, powers and functions are conducted as fully as possible in support of the policies and priorities set by the Minister of Health. It is responsible for ensuring that the organisation has effective and proportionate governance arrangements in place and an internal control framework which allow risks to be effectively identified and managed. It is the responsibility of the Authority to set the culture and values of the organisation and the tone for the organisation's external engagement.
- 5.5 The Authority is responsible for holding the Chief Executive to account for the management of the organisation and the delivery of agreed plans and outcomes. However, the Authority should also support the Chief Executive as appropriate in the exercise of their duties.
- 5.6 Authority members act solely in the interests of the RQIA and must not use the Authority as a platform to champion their own interests or pursue personal agendas. They occupy a position of trust and their standards of action and behaviour must be exemplary and in line with the seven principles of public life (the Nolan principles). The RQIA has a Code of Practice for Authority Members in place which is based on the Code of Conduct for Board Members of Public Bodies. There are mechanisms in place to deal with any disputes/conflicts to ensure they do not become wider issues that impact on the effectiveness of the Authority. A Register of Interests is

maintained, kept up to date and is publicly available to help provide transparency and promote public confidence in the Authority.

- 5.7 Communication and relationships within the Authority are underpinned by a spirit of trust and professional respect. The Authority recognises that using consensus to avoid conflict or encouraging Authority members to consistently express similar views or consider only a few alternative views does not encourage constructive debate and does not give rise to an effective Authority dynamic.
- 5.8 It is for the Authority to decide what information it needs, and in what format, for its meetings/effective operation. If the Authority is not confident that it is being fully informed about the organisation, this will be addressed by the Chair of the Authority with the Chief Executive as the Authority cannot be effective with out-of-date or partial/incomplete information.
- 5.9 In order to fulfil their duties, Authority Members must undertake initial training, and regular ongoing training and development. Review of Authority members' skills and development will be a key part of the annual review of the Authority's effectiveness.

6. RQIA Audit and Risk Assurance Committee (ARAC)

- 6.1 The Authority's Audit and Risk Assurance Committee (ARAC) has been established in line with the Audit and Risk Assurance Committee Handbook (Northern Ireland).
- 6.2 ARAC supports the Authority and the Accounting Officer on governance issues, with a particular focus on:
- Assurance arrangements over financial reporting and internal controls, corporate governance arrangements; the Annual Report and Accounts, including the Annual Governance Statement; and
 - Ensuring that there is an adequate and effective risk management and assurance framework in place.
- 6.3 The Authority and the Department have agreed arrangements which include:
- attendance by departmental representatives in an observer capacity at one of the Authority's Audit and Risk Assurance Committee meetings each financial year;

- access to the Authority's Audit and Risk Assurance Committee papers and minutes; and
- any input required from the Authority's Audit and Risk Assurance Committee to the departmental Audit and Risk Assurance Committee.
- completion by the Audit and Risk Assurance Committee of the National Audit Office Checklist on an annual basis. Assurance on completion of the checklist will be provided through the mid-year assurance statement and any exception issues should be reported to DoH; and
- review of the Authority's Audit and Risk Assurance Committee's terms of reference by DoH; the Authority shall notify DoH of any subsequent changes to these terms of reference.

6.4 Full compliance with the Audit and Risk Assurance Committee Handbook (NI) is an essential requirement. In the event of significant non-compliance with the handbook's five good practice principles (or other non-compliance), discussion will be required with the Department and a full explanation provided in the annual Governance Statement.

7. The Chair of the Authority

- 7.1 The Chair of the Authority is appointed by the Department, and is personally accountable to the Minister, through the Department, for:
- Providing effective leadership and strategic direction to the Authority and, with the Members and the Chief Executive, setting the culture of the organisation;
 - Ensuring that the RQIA's statutory duties, powers and functions are exercised efficiently and effectively; and
 - Keeping the Minister and Department informed of significant findings arising from the RQIA's performance of its statutory duties and functions.
- 7.2 The Chair is responsible for:
- Setting the agenda and managing the Authority to enable collaborative and robust discussion of issues and effective decision making;
 - Developing and motivating the Authority;

- Ensuring effective relationships so that the Authority works collaboratively through free and frank discussion to reach robust, evidence-based consensus on decisions;
- Representing the Authority and the RQIA in links with Ministers, the Northern Ireland Assembly and the public;
- Obtaining professional advice for the Authority when needed, in particular when the Authority is taking a decision on matters that pose a significant operational or reputational risk; and
- Ensuring effective communication with RQIA staff, service users, health and social care service providers, professional and service regulators, the media and public.

7.3 To achieve this, he or she should ensure that:

- the Minister is advised when Authority Member vacancies arise and that RQIA advise and support the relevant skills audit when required;
- Authority Members are fully briefed on terms of appointment, duties, rights and responsibilities;
- Authority Members receive and maintain appropriate training;
- there is an Authority operating framework (Standing Orders) in place setting out a clear and comprehensive set of operational rules to govern the operation of the RQIA, in line with relevant guidance; and
- there is a code of practice for Authority Members in place, consistent with relevant guidance.

7.4 The role of the Chair requires the establishment of an effective working relationship with the Chief Executive that is both collaborative and challenging. It is important that the Chair and Chief Executive act in accordance with their distinct roles and responsibilities as laid out in Managing Public Money and their appointment letters.

7.5 The Chair has a presence in the organisation and cultivates external relationships which provide useful links for the organisation while being mindful of overstepping boundaries and becoming too involved in day-to-day operations or executive activities.

8. The Chief Executive

- 8.1 The Chief Executive of the RQIA is appointed by the Authority, with the approval of the Department, and is a member of the Authority's staff. The Chief Executive is not a member of the Authority. The Chief Executive is:
- responsible for all executive management matters affecting the organisation and for leadership of the executive management team.
 - designated as the Authority's Accounting Officer by the departmental Accounting Officer (see section 14). As Accounting Officer, the Chief Executive is responsible for safeguarding the public funds in their charge and ensuring they are applied only to the purposes for which they were voted and more generally for efficient and economical administration.
 - accountable to the Authority for the performance and delivery of outcomes and targets and is responsible for implementing the decisions of the Authority and its Committees. The Chief Executive maintains a dialogue with the Chair on the important strategic issues facing the organisation and proposes Authority agenda items to the Chair to reflect these; and
 - ensures effective communication with stakeholders and communication on this to the Authority; and ensures that the Chair is alerted to forthcoming complex, contentious or sensitive issues, including risks affecting the organisation.
- 8.2 The Chief Executive acts as a role model to senior staff by exhibiting open support for the Chair and Authority Members and the contribution they make. The Chair and Chief Executive should agree how they will work together in practice, understanding and respecting each other's role, including the Chief Executive's responsibility as Accounting Officer.
- 8.3 The role and responsibilities of the Chief Executive as Accounting Officer are laid out in Managing Public Money NI and their Accounting Officer appointment letter.

The Chief Executive's role as Principal Officer for Ombudsman Cases

- 8.4 The Chief Executive is the Principal Officer for handling cases involving the NI Public Sector Ombudsman. He/she shall advise the Departmental Accounting Officer of any complaints about the Authority accepted by the Ombudsman for investigation, and about the proposed response to any subsequent recommendations from the Ombudsman, via their Sponsor Branch.

Role of the Department of Health

9. Partnership Working with RQIA

- 9.1 The Department of Health and the RQIA are part of the HSC total delivery system, within the same Ministerial portfolio. The partnership between DoH and RQIA should be open, honest, constructive and based on trust. There should be mutual understanding of each other's objectives and clear expectations on the terms of engagement.
- 9.2 In exercising its functions RQIA has absolute clarity on how its purpose and objectives align with those of the DoH. There is also a shared understanding of the risks that may impact on each other and these are reflected in respective Risk Registers.
- 9.3 There should be a regular exchange of skills and experience between DoH and RQIA and where possible, joint programme/project delivery boards/ arrangements. RQIA may be involved as a partner in policy/strategy development and provides advice on policy implementation/ the impact of policies in practice.
- 9.4 The Department of Finance has established, on behalf of the Assembly, a delegated authority framework which sets out the circumstances where prior approval is required by the Department of Finance before expenditure can be incurred or commitments entered into. The Accounting Officer of the Department of Health has established an internal framework of delegated authority for the Department and its ALBs which applies to the RQIA, found here - HSC(F) 09-2024 - Revised HSC & NIFRS Delegated Limits and requirements for Departmental / DoF

approval. Other specific approval requirements established in respect of the RQIA are set out at Annex 3.

- 9.5 Once the RQIA's budget has been approved by the Department / Minister [and subject to any restrictions imposed by statute], the RQIA shall have authority to incur expenditure approved in the budget without further reference to the Department. Inclusion of any planned and approved expenditure in the budget shall not however remove the need to seek formal departmental approval where proposed expenditure is outside the delegated limits (as laid out in Annex 3) or is for new schemes not previously agreed. Nor does it negate the need to follow due processes laid out in guidance contained in Managing Public Money NI and the Better Business Cases NI.

10. Executive Board Member and Lead Official

- 10.1 The Department has appointed an Executive Board Member (Deputy Secretary, Healthcare Policy Group) and a Lead Senior Official (Director of Quality, Safety and Improvement) to manage the relationship with the RQIA and ensure effective partnership working. The EBM has specific roles and responsibilities as detailed in this Partnership Agreement, including carrying out the annual appraisal of the Chair and approving the Authority's business plan.
- 10.2 Engagement between the Department and the RQIA will be co-ordinated, collaborative and consistent. A clear sense of collaboration and partnership will be communicated to staff in both the Department and the RQIA in order to promote mutual understanding and support.
- 10.3 The Lead Senior Official has a clear understanding of the RQIA's duties and functions and the relevant audiences/stakeholders involved; and an appreciation of the organisation's wider role and responsibilities.

11. Annual Engagement Plan

- 11.1 The Department and the Authority will agree an Engagement Plan before the start of each business year. The Annual Engagement Plan (Annex 2) will set out the timing and nature of routine engagement between the RQIA and the Department. The

engagement plan will be specific to the Authority and must not involve operational oversight.

11.2 Engagement between the Department's Senior Lead Official/their teams and the Authority will be centred on partnership working, understanding of shared risks and working together on business developments that align with policy objectives.

11.3 In line with relevant guidance² the Authority will work in collaboration and partnership with the Department to prepare multi year strategic, and annual business, plans. There should be good high level strategic alignment between departmental and Authority plans. The Department will engage with the RQIA on areas of strategic interest, linking departmental policy and the RQIA delivery of policy intent. This will include engagement on wider policy beyond that of the QSID, as appropriate.

11.4 The Annual Engagement Plan will specify the management and financial information to be shared over the course of a year to enable the Department to undertake its sponsorship duties.

12. Departmental Accounting Officer

12.1 The Departmental Accounting Officer (Permanent Secretary) is accountable to the NI Assembly for the issue of grant in aid to the RQIA. They have designated the Chief Executive of the RQIA as the Accounting Officer for the organisation. The respective responsibilities of the Departmental Accounting Officer and the RQIA Accounting Officer are set out in Chapter 3 of Managing Public Money Northern Ireland. The Departmental Accounting Officer may withdraw the RQIA Accounting Officer designation if he/she concludes that the RQIA Accounting Officer is no longer a fit person to carry out the responsibilities of an Accounting Officer or that it is otherwise in the public interest that the designation be withdrawn. In such circumstances, the Authority will be given a full account of the reasons for withdrawal and a chance to make representations. Withdrawal of the RQIA Accounting Officer status would bring into question employment as Chief Executive. The Chair should engage with the Department should such circumstances arise.

² Guidance issued by TEO on NICS Work Programme which includes guidance on business planning for an outcomes-based PfG/ODP

- 12.2 The RQIA Chief Executive is accountable to the Authority for their stewardship of the RQIA's funds. This includes advising the Authority on matters of financial propriety, regularity, prudent and economical administration, efficiency and effectiveness.
- 12.3 The Departmental Accounting Officer must be informed if the judgement of the RQIA Accounting Officer (on matters for which they are responsible) is over-ridden by the Authority. The RQIA Accounting Officer must also take action if the Authority is contemplating a course that would infringe the requirement for financial propriety, regularity, prudent and economical administration, efficiency or effectiveness. In all other regards, the Departmental Accounting Officer has no day-to-day involvement with the RQIA or its Chief Executive.
- 12.4 In line with DoF requirements, the RQIA Accounting Officer will provide an annual declaration of fitness to act as Accounting Officer to the Departmental Accounting Officer and this will be incorporated into the existing reporting arrangements within the mid-year assurance statement.

13 Attendance at Public Accounts Committee

- 13.1 The RQIA Chief Executive/Accounting Officer may be summoned to appear before the Public Accounts Committee to give evidence on the discharge of their responsibilities as Accounting Officer (as laid out in their Accounting Officer appointment letter) on issues arising from the Comptroller & Auditor General (C&AG) studies or reports following the annual audit of accounts.
- 13.2 The Chair may also, on occasion, be called to give evidence to the Public Accounts Committee on such relevant issues arising within the C&AG's studies or reports, in relation to the role and actions taken by the Authority, where appropriate.
- 13.3 In addition, the DoH Accounting Officer may be summoned to appear before the Public Accounts Committee to give evidence on the discharge of their responsibilities as Departmental Accounting Officer with overarching responsibility for the RQIA. In such circumstances, the Departmental Accounting Officer may therefore expect to be questioned on their responsibilities to ensure that:
- there is a clear strategic control framework for the RQIA;

- sufficient and appropriate management and financial controls are in place to safeguard public funds;
- the nominated Accounting Officer of the RQIA is fit to discharge their responsibilities;
- there are suitable internal audit arrangements;
- accounts are prepared in accordance with the relevant legislation and any accounting direction; and
- intervention is made, where necessary, in situations where the RQIA Accounting Officer's advice on transactions in relation to regularity, propriety or value for money is overruled by the body's Authority or its Chair.

Assurance Framework

14 Autonomy and Proportionality

- 14.1 The DoH will ensure that the Authority has the autonomy to deliver effectively, recognising its status as a separate legal entity which has its own Authority and governance arrangements. Guidance on proportionate autonomy has been considered in determining the extent of engagement and assurance established between RQIA and the DoH and is reflected in this Agreement.
- 14.2 A proportionate approach to assurance will be taken based on the RQIA's overall purpose, business and budget and a mutual understanding of risk. The approach will include an agreed process through which the RQIA Accounting Officer provides written assurance to the Department that the public funds and organisational assets for which they are personally responsible are safeguarded, have been managed with propriety and regularity, and use of public funds represents value for money.
- 14.3 Recognising the governance arrangements in place within the organisation, the RQIA Accounting Officer will arrange for their written assurance to be discussed at the Authority Audit and Risk Assurance Committee and presented to the Authority prior to submission to the Department where possible. If not possible, or practicable, the Chair should have sight of the assurance statement, prior to being submitted to the Department.

14.4 The Authority Chair will provide written confirmation that the RQIA Accounting Officer's formal assurance has been considered by the Authority and is reflective of the current position.

14.5 In addition to the RQIA Accounting Officer's written assurance, the Department will take assurance from the following key aspects of the Authority's own governance framework:

- Annual Review of Authority Effectiveness;
- Completion of Authority Member Appraisals which confirm Authority member effectiveness;
- Internal Audit assurance and External Quality Assessment of the Internal Audit function; and
- Externally audited Annual Report and Accounts, reviewed/considered by the Authority Audit and Risk Assurance Committee.

15 Authority Effectiveness

15.1 The Authority Chair will ensure that the Authority undertakes an annual review of Board Effectiveness³ which encompasses committees established by the Authority.

15.2 The Chair will discuss the outcome of the annual review of Board Effectiveness with the lead senior official to ensure a partnership approach to any improvements identified. This will inform the annual programme of Authority training/development and discussions in respect of Authority composition and succession.

15.3 In line with any parameters set out in founding (or other relevant) legislation, the Department in conjunction with the Chair, and Ministers where appropriate, will consider the size and composition of the Authority, to ensure that it is proportionate to the size and complexity of the RQIA and keep this under review.

15.4 In addition to the annual review of Authority Effectiveness, the Authority will undertake an externally facilitated review of Authority effectiveness at least once every three years covering the performance of the Authority, its committees and individual Authority members. The Chair will liaise with the Department to identify a suitably skilled facilitator for the external review (this can be a peer review and should

³ NIAO Good Practice Guide on Board Effectiveness

be proportionate) and will share the findings/outcome report with the Department on completion of the review.

16 Authority Member Appraisals

- 16.1 The Chair of the Authority will conduct an annual appraisal in respect of each Authority Member which will also inform the annual programme of Authority training/development. The Chair will engage with the Chief Executive/lead official as appropriate on improvements identified through the appraisal process and the annual training/development programme.
- 16.2 The Chair's annual appraisal will be completed by the EBM Deputy Secretary within the Department. The appraisal will take account of the key characteristics of a good chairperson (particularly for the Chair to have well developed interpersonal skills) set out in the NIAO Good Practice Guide on Board Effectiveness available on the NIAO website. There will be close engagement between the Chair and the lead official on improvements identified through the appraisal process.

17 Internal Audit Assurance

- 17.1 In line with the requirement to establish and maintain arrangements for an internal audit function that operates in accordance with the [Public Sector Internal Audit Standards \(PSIAS\)](#), the RQIA utilises BSO Audit services. BSO discharges functions, such as Internal Audit to the RQIA, on behalf of DoH in accordance with an overarching Service Level Agreement and Memorandum of Understanding with the Department.
- 17.2 The RQIA will provide its internal audit strategy, periodic audit plans and annual audit report, including the Head of Internal Audit's opinion on risk management, control and governance to the Department. RQIA will ensure the BSO's internal audit team have complete right of access to all relevant records. This applies whether the internal audit function is provided in-house or is contracted out by BSO.
- 17.3 Self-assessments are the responsibility of BSO, who will ensure regular, periodic self-assessments of the internal audit function in line with PSIAS and the RQIA will ensure these are shared with the Department. The RQIA will also liaise with the Department on the External Quality Assessment (EQA) of the internal audit function which (in line with PSIAS) is required to be conducted at least once every five years

by a qualified independent assessor. The current arrangement for the RQIA's Internal Audit will be led by the Head of Internal Audit at BSO.

17.4 The RQIA will alert the Department to any less than satisfactory audit reports at the earliest opportunity on an ongoing basis. The RQIA will also alert the Department to a less than satisfactory annual opinion from the Head of Internal Audit at the earliest opportunity. The RQIA and the Department will then engage closely on actions required to address the less than satisfactory opinion in order to move the RQIA to a satisfactory position as soon as possible.

17.5 The Department will take assurance from the fact that the RQIA has met the requirements of PSIAS and has a satisfactory annual opinion from the Head of Internal Audit at BSO as part of its overall assurance assessment.

18 Externally Audited Annual Report and Accounts

18.1 Under Article 7 (1) of the 2003 Order, the Authority must prepare an Annual Report and Accounts. The Accounts must comply with the **Government Financial Reporting Manual (FReM)** issued by the Department of Finance and the specific Accounts Direction issued by the Department and be submitted in accordance with the deadlines specified

18.2 The Comptroller & Auditor General (C&AG) will arrange to audit the RQIA's Annual Accounts and will issue an independent opinion on them. The C&AG lays the Annual Accounts before the NI Assembly together with the RQIA's Annual Report.

18.3 The C&AG will also provide the Authority with a Report to Those Charged with Governance; this will be shared with the Department.

18.4 The Authority will alert the Department to any likely qualification of the accounts at the earliest opportunity. In the event of a qualified audit opinion or significant issues reported in the Report to Those Charged with Governance, the Department will engage with the Authority on actions required to address the qualification / significant issues.

18.5 The Department will take assurance from the external audit process and an unqualified position as part of its overall assurance assessment.

- 18.6 The C&AG may carry out examinations into the economy, efficiency and effectiveness with which the RQIA has used its resources in discharging its functions. The C&AG may also carry out thematic examinations that encompass the functions of the RQIA.
- 18.7 For the purpose of audit and any other examinations, the C&AG has statutory access to documents as provided for under Articles 3 and 4 of the Audit and Accountability (Northern Ireland) Order 2003.
- 18.8 Where making payment of a grant, or drawing up a contract, the RQIA should ensure that it includes a clause which makes the grant or contract conditional upon the recipient or contractor providing access to the C&AG in relation to documents relevant to the transaction. Where subcontractors are likely to be involved, it should also be made clear that the requirements extend to them.

Signatories

The RQIA and the Department agree to work in partnership with each other in line with the NI Code of Practice “Partnerships between Departments and Arm’s-Length Bodies” and the arrangements set out in this Agreement.



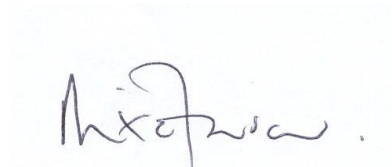
Signed (RQIA Chair)

Date 3 July 2025



Signed (RQIA Chief Executive)

Date 3 July 2025



Signed (Department –Permanent Secretary])

Date 04 July 2025

Annex 1: **Applicable Legislation**

Hyperlinks are provided to the primary legislation under which RQIA operates:

- [The Mental Health \(Northern Ireland\) Order 1986](#)
- [The Health and Personal Social Services \(Quality, Improvement and Regulation\) \(Northern Ireland\) Order 2003](#)
- [The Health and Social Care \(Reform\) Act \(Northern Ireland\) 2009](#)
- [The Mental Capacity Act \(Northern Ireland\) 2016](#)
- [The Health and Social Care Reform Act \(Northern Ireland\) 2022](#)

RQIA also works under secondary legislation and regulations, links to which can be found on the RQIA website here: [Regulation and Quality Improvement Authority - RQIA](#)

See also:

- [The Ionising Radiation Regulations \(Northern Ireland\) 2017](#)
- [The Ionising Radiation \(Medical Exposure\) Regulations \(Northern Ireland\) 2018](#)
- [Optional Protocol to the UN Convention against Torture and Other Cruel, Inhumane or Degrading Treatment or Punishment](#)
- [National Preventive Mechanism](#)

Annex 2 – Annual Engagement Plan

The following Engagement Plan outlines the key areas of engagement between Department and RQIA.

Engagement Plan 2025/2026

Policy Development and Delivery

Add details of the planned engagement between the RQIA and the DoH in relation to development and monitoring of existing and new areas of policy.

Policy Area	Frequency/Timing	Lead DoH/RQIA Officials
Review of Regulation; Full Cost Recovery Model (Fees and Frequency of Inspections); Mental Health Services: RQIA's Responsibilities under the Mental Capacity Act; Mental Health Services: Community; Registration of Independent Medical Agencies; Registration of Independent Clinics; and RQIA's Role in the Oversight of HSC Trusts' Duty of Quality.	At a minimum quarterly.	RQIA and the DoH will continue to take forward policy discussions during 2025/2026 with appropriate personnel and Policy Leads in relation to topics listed (not exhaustive) under Policy Area. Policy Leads Sponsor EBM & QSID RQIA Directors & CE

Strategic Planning

Activity	Date	Lead Departmental / RQIA Official
RQIA Strategic Planning Workshops – encompassing strategic planning and risk identification. Informed by input on Departmental priorities/plans and risk areas	Sufficiently well in advance of the Business Year to inform development of the Business Plan for the year ahead	EBM & QSID Chair, Authority & CE
Engagement on the draft Management Plan and identification of areas of strategic interest to the	Sufficiently well in advance of the Business Year to inform	EBM QSID Sponsor Branch, Policy Areas Chair, Authority & CE

Strategic Planning		
Activity	Date	Lead Departmental / RQIA Official
DoH to inform further scheduled engagement during the year	development of the Management Plan for the year ahead	Head of Corporate Affairs
RQIA will share its Annual Management Plan for 2025/2026 with the Department, to be informed by input on Departmental priorities / plans and risk areas	February – March preceding next Financial year beginning April	EBM QSID Sponsor Branch Policy Areas Chair, Authority & CE Head of Corporate Affairs
Approval of the RQIA Management Plan	March to April	EBM QSID
RQIA will report on progress made in the delivery of the Strategic / Management Plan's aim and objectives via its quarterly Outcomes, Performance Activity Report.	Quarterly	EBM QSID Sponsor Branch Policy Leads Chair, Authority & CE & Directors, and Head of Corporate Affairs

Joint Working Add details of any interchange opportunities, and/or joint programme/project delivery boards		
Activity	Frequency/Timing	Lead DoH/RQIA Official

Authority Appointments Add details of any engagement related to Public Appointment exercises		
Activity	Date	Lead DoH/RQIA Official
During the year, RQIA will engage with the Department, via the Public Appointments Unit, in respect of any forthcoming Authority appointments, such as the need to appoint a nursing and a digital representative.	As scheduled by DoH PAU Delivery of these appointment competitions will be subject to PAU discussion and agreement with PAU regarding timetabling.	RQIA Chair, CE DoH Public Appointments Unit DoH Sponsor Branch

Chief Executive Recruitment Add details of any engagement related to the recruitment of a Chief Executive (if anticipated during the year ahead). RQIA should engage with the DoH at an early stage in the event of the recruitment of a new Chief Executive. While recognising the role of the Authority as employer, the DoH will work closely with the RQIA in the recruitment and selection process in line with extant guidance.		
Activity	Date	Lead DoH/RQIA Official
During the 2025/26 year, RQIA will engage with the Department in respect of the recruitment to the Chief Executive's position.		RQIA Chair, CE DoH Sponsor Branch

Assurances Add details of the timetable for submission of key assurance sources and any other assurance related activity		
Action	Date	Lead DoH/RQIA Official
Chair Appraisal	Following the end of the Business year. After Authority Appraisals have been completed by the Chair and the annual Review of Authority Effectiveness has concluded	EBM Chair
DoH Attendance at ARAC	Attendance as observer Once per Year	ARAC Chair RQIA Head of Corporate affairs Head of Sponsor Branch
BSO HIA Assurance Statements	Mid-Year End Year	EBM QSID Sponsor Branch RQIA Authority, CE and Head of Corporate Affairs (BSO HIA)
Draft Governance Statement	Mid-Year End Year	EBM QSID Sponsor Branch RQIA CE and Head of Corporate Affairs
Annual Report and Accounts	Annually	EBM QSID Sponsor Branch Chair, Authority & CE & Directors, and Head of Corporate Affairs
Report to those Charged with Governance	Annually	EBM QSID Sponsor Branch Chair, Authority & CE & Directors, and

Assurances Add details of the timetable for submission of key assurance sources and any other assurance related activity		
Action	Date	Lead DoH/RQIA Official
Engagement on other planned NIAO reports		Head of Corporate Affairs
Head of Internal Audit Annual report/Opinion	Mid-Year and End year	All items listed in actions are included/reported on in Authority and ARAC papers sent to DoH during year as appropriate during the year.
Internal Audit Strategy and Plans	March to April	
Internal Audit External Quality Assessment	To be conducted at least once every five years	

Budget Management Add details of the information and returns to be provided.		
Item and Purpose	Date	Lead DoH/RQIA Official
Engagement on budget requirements and Forecast Expenditure for the Financial Year	Continual	Accounting Officer Finance Advisor Finance Policy, Monitoring, Planning and Accountable Leads including Counter Fraud Unit EBM QSID Sponsor Branch
DoH approval of the annual budget	Annual	Chair, Authority & CE & Directors, and Head of Corporate Affairs
Monthly Financial Management Returns	Monthly	
Monthly Cash Forecast	Monthly	
Monitoring Round Returns	Quarterly	
Provisional Outturn	Ongoing	
Final Outturn	End year	

Other Tailor as required to reflect the specific requirements		
Item and Purpose	Submission Date	Lead DoH/RQIA Official
Accounting Officer - Fitness to Act as Accounting Officer	Annual within mid-year assurance statement	EBM QSID RQIA CE
Fraud Reporting	Immediate reporting of all frauds (proven or	RQIA CE Fraud Liaison Officer

Other Tailor as required to reflect the specific requirements		
Item and Purpose	Submission Date	Lead DoH/RQIA Official
	suspected including attempted fraud	DoH will report frauds immediately to DoF and C&AG.
Fraud Reporting	Annual fraud return commissioned by DoF on fraud and theft suffered by RQIA.	Accounting Officer / Financial Advisor Fraud Liaison Officer
Media management protocols – independence of RQIA to engage with media/announcements of corporate and policy communications significant to RQIA - arrangements to share press releases where relevant – ensure no surprises.	As Required	Press Office RQIA Senior Communications Manager/Information Manager
Preparation of business cases – Department and RQIA to consider working together to share expertise where appropriate.	As Required	Chief Executive Directors Financial Advisor / BSO Finance EBM QSID Sponsor Branch
Whistleblowing cases/ Speaking Up/Raising Concerns.	As Required	Governance Unit RQIA Chair RQIA Speak Up Champion (Authority Member) Chief Executive Head of Corporate Affairs

Review of the Partnership Arrangement Tailor as required to reflect the specific requirements		
Item and Purpose	Date	Lead DoH/RQIA Official
Light touch review of the Partnership Agreement Updating of Annexes specifically Engagement Plan	Schedule following the end of the Business Year	EBM QSID Sponsor Branch RQIA CE and Head of Corporate Affairs
Formal review of the	To be conducted	DoH Permanent secretary

Review of the Partnership Arrangement Tailor as required to reflect the specific requirements		
Item and Purpose	Date	Lead DoH/RQIA Official
Partnership Agreement	once every three years	EBM RQIA Chair and CE

Meetings Schedule 2025/2026

Engagement Opportunities		
Nature	Frequency/Timing	Lead Departmental/ALB Officials
Biannual Liaison Meetings (Formal)	17 April 2025 8 October 2025	QSID and QRIB RQIA Chief Executive RQIA Directors, Head of Corporate Affairs, Head of Business Services
Stock-Take Meeting (Formal)	1 May 2025 1 October 2025	Deputy Secretary, Healthcare Policy Group, QSID RQIA Chair RQIA Chief Executive
Ground Clearing: Governance (Formal Governance Process)	End Year (2024/2025) 7 May 2025 Mid-Year (2025/2026) 12 November 2025	Deputy Secretary, Healthcare Policy Group, QSID, QRIB RQIA CEx, Directors, Head of Corporate Affairs, Head of Business Services
Accountability Meeting: Governance (Formal Governance Process)	End Year (2024/2025) 29 July 2025 Mid-Year (2025/2026) 10 December 2025	Permanent Secretary Deputy Secretary, Healthcare Policy Group QSID RQIA Chair RQIA Chief Executive

Annex 3: Delegations

Delegated authorities

RQIA shall obtain the DoH's prior written approval before:

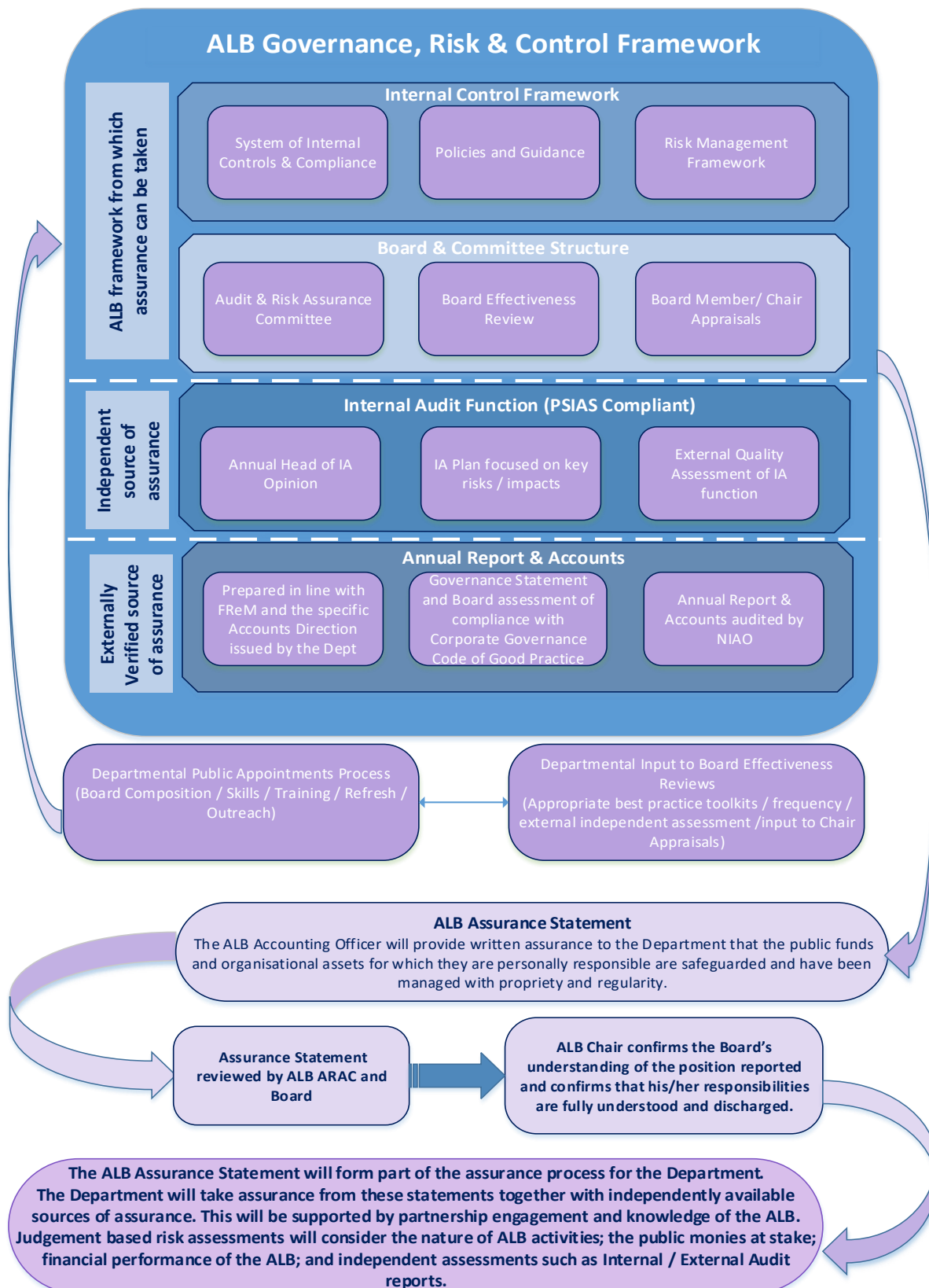
- entering into any undertaking to incur any expenditure that falls outside the delegations or which is not provided for in the RQIA's annual budget as approved by the DoH;
- incurring expenditure for any purpose that is or might be considered novel or contentious, or which has or could have significant future cost implications;
- making any significant change in the scale of operation or funding of any initiative or particular scheme previously approved by the DoH;
- making any change of policy or practice which has wider financial implications that might prove repercussive or which might significantly affect the future level of resources required; or
- carrying out policies that go against the principles, rules, guidance and advice in Managing Public Money Northern Ireland.

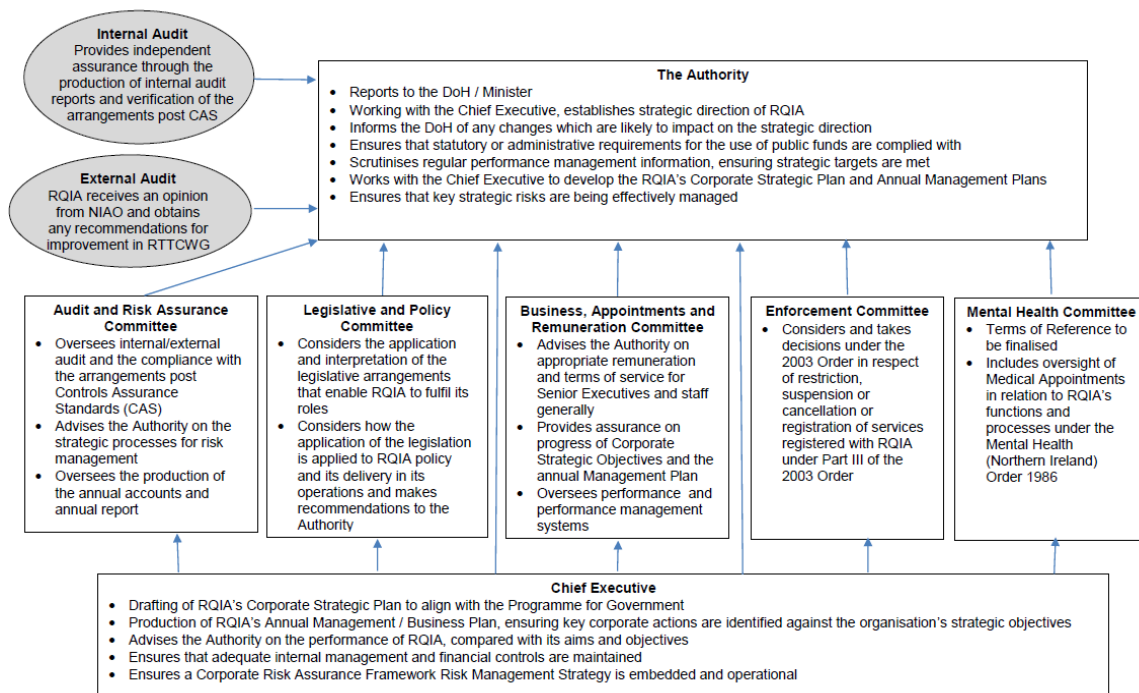
The Department's internal framework of delegated authority applies to the RQIA [HSC\(F\) 09-2024 - Revised HSC & NIFRS Delegated Limits and requirements for Departmental / DoF approval](#)

There are no other specific delegated authorities applicable to the RQIA.

These delegations shall not be altered without the prior agreement of the DoH and, where applicable, DoF.

Annex 4: System of Assurance





Annex 5 – Concerns/Complaints in respect of Authority Members

In line with the NI Code of Good Practice and the arrangements in this Partnership Agreement the approach to concerns/complaints raised in respect of RQIA Authority members should be transparent and collaborative. The principle of early and open engagement is important, with the DoH made aware of any concerns/complaints as soon as practicable.

While Authority Members are Public Appointees/office holders rather than RQIA employees, an RQIA employee may utilise [RQIA's] grievance procedure/other HR procedure to raise a complaint against an Authority member. The RQIA employee raising the grievance should expect this to be handled in line with [RQIA's] HR procedures.

Concerns/complaints might also be raised through:

- Raising Concerns/Whistleblowing arrangements;
- Complaints processes; and
- Directly with RQIA or the DoH.

Where a concern/complaint is received within RQIA in respect of an individual Authority Member this should be provided to the RQIA Chair who should notify the DoH at the outset in order that lead responsibility for handling the complaint/concern is clear in advance.

Where a concern/complaint relates to the RQIA Chair, RQIA should notify the DoH at the outset for the DoH to determine the approach to handling the complaint/concern.

Differences of view in relation to matters which fall within the Authority's responsibilities are a matter for the Authority to resolve through consensus-based decision making in the best interests of the RQIA.

Exceptionally, a concern/complaint may be raised by an Authority Member about a fellow Authority Member or a senior member of RQIA staff. The RQIA Chair should notify the DoH at the outset to ensure that arrangements for handling the concern/complaint are clear. The DoH may determine that it should make arrangements to deal with the concern/complaint. This will be agreed at the outset.

Arrangements for concerns/complaints in respect of Authority Members should be reflected in all relevant procedures, including Standing Orders.

Annex 6 Applicable Guidance

Guidance Issued by the Department of Finance

- Managing Public Money NI
- Public Bodies – A Guide for NI Departments
- Corporate Governance in Central Government Departments – Code of Good Practice
- HMT Orange Book
- The Audit and Risk Assurance Committee Handbook
- Public Sector Internal Audit Standards
- Accounting Officer Handbook – HMT Regularity, Propriety and Value for Money
- Better Business Cases NI from
- Dear Accounting Officer Letters
- Dear Finance Director Letters
- Dear Consolidation Officer and Dear Consolidation Manager Letters
- The Consolidation Officer Letter of Appointment
- Government Financial Reporting Manual (FReM)
- Guidance for preparation and publication of annual report and accounts
- Guidance on annual reports and accounts - GOV.UK (www.gov.uk)
- Procurement Guidance

Other Guidance and Best Practice

- Specific guidance issued by the Department
- HSC Board Member Handbook
- Recommendations made by NI Audit Office / NI Assembly Public Accounts Committee
- NIAO Good Practice Guides
- Guidance issued by the Executive's Asset Management Unit
- NI Public Services Ombudsman Guidance

Annex 7 – Role of the Minister

Role of the Minister

The Chair of the Authority is responsible to the Minister of Health. Communication between the Authority and the Minister should normally be through the Chair.

The Departmental Accounting Officer is responsible for advising the Minister of Health on a number of issues including the Authority's objectives and targets, budgets and performance.

In addition to being answerable to the Assembly as laid out in paragraph 2.3, the Minister of Health is also responsible for:

- Setting the strategic direction and overall policies and priorities for the ALB as reflected in the PfG;
- Approving the ALB's Business Plan (as part of DoH Strategic Planning process this is delegated to Permanent Sec and EBM's);
- Setting the ALB's budget; and
- Appointment of Authority members. The Minister may also be involved in considering the size and composition of the Authority— see para 15.3.

Annex 8–

Partnerships between Departments and Arm's Length Bodies: NI Code of Good Practice

NI Code of Good Practice (version 3)

<https://www.finance-ni.gov.uk/sites/default/files/publications/dfp/NI%20Code%20of%20Good%20Practice%20v3%20%28300323%29.pdf>



NI Code of Good
Practice Version 3 (M: