RQIA Corporate Performance Report 2018-19

Quarter 1 April to June 2018

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

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Introduction

The Corporate Performance Report summarises our performance for the last financial year. In a change from previous Corporate Performance Reports this paper will focus on providing evidence on how well RQIA is delivering the actions identified within the annual Business Plan, linked to its strategic objectives and priorities as described in the Corporate Strategy 2017-21.

Traffic Light Rating System

RQIA has adopted a Traffic Light Rating System to demonstrate how well the business actions are performing or have been delivered. The Traffic Light rating operates as follows:



action has not been achieved by the completion date. A brief exception report should be produced detailing the remedial action required to ensure achievement of action by year end.



action unlikely to be achieved by the completion date. A brief exception report should be produced detailing the remedial action required to ensure achievement of action by the completion date or by when the action will be achieved.

action forecast to be completed by the completion date

action delivered

Summary of Traffic Light Rating System (Period Ending March 2018)

Traffic Light	June 2018	Actions that require exception reports
	0	
	0	
	34 (100%)	
	0	

Summary of Achievements

- The RADaR database has been developed and is currently being piloted by the Nursing & Residential Team.
- The RQIA Membership Scheme was launched on 7 June 2018
- A project has been initiated by day care and domiciliary care agency inspectors to provide information about RQIA and inspections in a format that is accessible to service users with a range of communication needs.
- A total of 622 inspections were completed in Quarter 1 which represents 27% of year's scheduled inspections completed within the quarter.
- 3 quality improvement initiatives and 3 audits commenced in Quarter 1.
- 17 inspections were completed with lay assessor involvement which is on target.
- The information request database has been built on a Microsoft Access platform and was rolled out to the information team in late June 2018. The database holds all the required information and meets the team's needs.
- RQIA published the findings of its Review of the Governance Arrangements for Child Protection in the HSC in Northern Ireland, which assessed the effectiveness of governance arrangements to support child protection across the five health and social care (HSC) trusts and the HSC Board.
- RQIA published the findings of a regional clinical audit of the use of midurethral tapes for management of stress urinary incontinence in Northern Ireland.

			S	STR	ATE	GIC THEME 1						
	Encourage quality improvement in health and social care services											
Action	Measures	Q1	Deli Q2	very Q3	Q4	Performance						
Action 1.1 We will lead an independent assurance process overseeing the sustainable implementation of the recommendations of the report of the Inquiry into Hyponatraemia-Related Deaths.	Implementation of workstream 9 arising from the O'Hara report.				X	On track for achievement. The project group has been established and first meetings planned.						
Brag Rating: On track for achievement												
Action 1.2 We will produce our first annual summary of the quality of services we inspected, audited and reviewed in 2017/18.	 First annual summary report of services we inspected, audited and reviewed 				x	This work will be completed by Quarter 4						
Brag Rating: 🦲												
On track for achievement												

			S	STR	ATE	GIC THEME 1
	Encourage qu	ality	' imp	orove	eme	nt in health and social care services
Action	Measures	Q1	Deli [®] Q2	very Q3	Q4	Performance
Action 1.3 We will implement the steps outlined in our action plan arising from our internal review of steps taken in respect of Dunmurry Manor Care Home and consider recommendations made by the Commissioner in respect of actions arising for RQIA in the report of his investigation Brag Rating:	Implementation of the steps outlined in RQIA's action plan arising from our internal review of Dunmurry Manor				x	DoH is leading on the response to the COPNI report and RQIA submitted the input as requested by the required deadline. The DMCH Action Plan remains in place with several actions completed to date.
On track for achievement Action 1.4 Where we identify gaps in the quality of services in care homes, we will support improvement, for example by providing or signposting to best practice guidance. Brag Rating:	Number of RQIA initiatives for supporting improvement to overcome gaps identified in the quality of services which RQIA inspects				x	In Quarter 1, work began on the development of a resource pack for care homes on planning for winter pressures The aim of the project is to have a resource pack developed and supported by events in the autumn to assist with winter planning. Work is Other opportunities have also been sought including working with the NICE Implementation Facilitator for NI to increase awareness of NICE resources for the regulated sector.
On track for achievement						

			S	STR	ATE	GIC THEME 2				
		Use	SOL	irce	ces of information effectively					
Action	Measures	Q1	Deli Q2		Q4	Performance				
Action 2.1 We will develop and quality assure a range of relevant risk factors to inform the targeting of resources to nursing and residential home inspections.	 Complete detailed quality assurance on the 8 data sources identified as part of the Dynamic Data Workstream for RADaR Complete a pilot using 				x	External data sources (hospital admissions, ambulance call outs, GRO deaths and GP register data) are currently being sourced and validated as part of the Dynamic Data Workstream for RADaR. Information has now been received in relation to hospital admissions and ambulance call outs. Significant work has been undertaken to assess the suitability of these for inclusion in the model. Meetings have been held with BSO who have agreed to provide us with an initial extract of data from the GP NHAIS system for validation.				
Brag Rating: On track for achievement	the above data sources in order to try and predict risk as set out in the RADaR model					The RADaR database has been launched and is currently being piloted by the Nursing & Residential Team.				
Action 2.2 We will ensure information collected centrally within RQIA is fit for purpose and delivers a consistently high standard of timely and appropriate analysis.	 Develop self service capability for validation, performance and quality reports Deliver training in the use of self-service reporting 			x x		The self-service reports have developed through SQL programming software and are scheduled for roll-out onto iConnect during Quarter 3. The training schedule for the RQIA Assurance Directorate staff is currently being developed and will be rolled out during Quarter 3.				
Brag Rating: On track for achievement										
Action 2.3 We will publish an annual summary of high level statistical information in relation to the regulatory activities carried out by RQIA. The publication will be in line with official statistics guidance and as such we will seek national statistics accreditation.	• Produce an agreed draft publication using information for the 2017/18 year by the end of 2018/19				x	Initial discussions were held in Quarter 1. The majority of the work involved in producing the summary report is on target for completion by the end of Quarter 4.				
Brag Rating:										

			Ş	STR	ATE	GIC THEME 2					
Use sources of information effectively											
Action	Measures		Deli	very		Performance					
		Q1	Q2	Q3	Q4						
Action 2.4 We will ensure that the work of the Information Team is in line with the Northern Ireland Statistics and Research Agency (NISRA) and Department of Health standards.	 Information Team Business Plan to be incorporated within the NISRA DoH Business Deliver training to the information team on DoH and NISRA standards Plan 	X			x	The RQIA Information Team Business Plan has been incorporated within the NISRA DoH Business Plan. Training in relation to DoH and NISRA standards will be provided to the information team by the end of Quarter 4.					
Brag Rating:											
On track for achievement											

			S	STR	ATE	GIC THEME 3
	Engag	rvice users and stakeholders				
Action	Measures		Deli	very		Performance
Action 3.1 We will increase the profile of RQIA with the public. Brag Rating:	Number and % of people who were surveyed in the Household Survey that are aware of RQIA's role and responsibilities	Q1	Q2	Q3 X	Q4	A number of questions in relation to the public's perception of RQIA's role and responsibilities were incorporated in to the (NISRA) Continuous Household Survey during 2017/18. The results of the survey are due in Quarter 2 and an analysis of the results will be completed in Quarter 3.
On track for achievement Action 3.2 We will launch a membership scheme to involve service users, families and carers in our work.	Successful launch of RQIA Membership Scheme			x		The Membership Scheme was launched on 7 June 2018. During Quarter 1 we asked for volunteers to join the scheme with a view to an event or series of events in the autumn to co-produce terms of reference and a work-plan for the group.
Brag Rating: On track for achievement Action 3.3 We will actively develop partnerships with academia	 Analysis of RQIA's active involvement with academia and service 				x	RQIA has been engaging with Professor Brian Taylor (Ulster University), on the development and implementation of 'RADaR'. RQIA will deliver a presentation on RADaR at the University of Ulster DARE Conference, on 3 July. RQIA has also met with
and service improvers to enhance our processes and procedures.	 Number of inspections completed with student nurses involvement 					representatives from the Association for Real Change (ARC), Independent Health and Care Providers (IHCP) for the purposes of information sharing and planning partnership working events. A training programme on rights of children is currently being developed with Queens
Brag Rating:						University Belfast and the RQIA Children's Team to be delivered in November. No inspections were planned or completed with student nurses involvement in Quarter1.
Action 3.4 We will work collaboratively to report on the lived experience of users of health and social care.	We will work with a range of representative groups to best assess lived experience.				x	In Quarter 1, RQIA engaged with the Voice of Young People in Care organisation (VOYPIC) to initiate processes to increase user involvement in children's homes inspections. This work will involve training ex care experienced young people as peer reviewers, whose explicit role will be to elicit the views of the young people on their lived experience of care homes.
Brag Rating: On track for achievement						

	STRATEGIC THEME 3 Engage and involve service users and stakeholders											
Action	Measures		Deli		Performance							
		Q1	Q2	Q3	Q4							
Action 3.5 We will increase the involvement of lay assessors in our work programmes.	Meaningful lay assessor involvement to increase in all work programmes				X	The target for 2018/19 is 70 inspections to include a lay assessor. In Quarter One 17 inspections have been carried out with a lay assessor present - 10 within a nursing home and 6 within a residential care home. One inspection which involved a lay assessor within a MHLD service.						
Brag Rating:												

			S	STR	ATE	GIC THEME 4
					ational excellence	
Action	Measures	Q1	Deli Q2	very Q3	Q4	Performance
Action 4.1 We will implement the actions set out in our Transformation, Modernisation and Reform framework. Brag Rating: On track for achievement	Implementation of the actions set out in our Transformation, Modernisation and Reform framework				x	By the end of Quarter 1 arrangements were in place to recruit externally for the Head of Business Support Unit. Job descriptions for additional new posts such as a Business Manager have been drafted for banding. Plans are in place to move the information, registration and MHLD forms team to the BSU under the management of the information manager
Action 4.2 We will develop and implement an organisational development plan to give our staff the skills they need to support transformation, modernisation and reform.	Implementation of the RQIA Organisational Development Plan				x	Discussions have been held with the HSC Leadership Centre to develop a bespoke programme of organisational development for RQIA staff. A draft programme has been received in Quarter 1 for assessment with the intention of rolling out a programme to senor staff by the end of the year.
Brag Rating:						
Action 4.3 We will develop and implement a charter of RQIA's vision and values					x	RQIA is currently reviewing its vision and values which will define our culture and capture what we do when we are at our best. This work is on target for completion by the end of Quarter 4.
Brag Rating:						
Action 4.4 We will develop and implement a suite of customer service standards.	Development and implementation of a suite of customer service standards				x	During Quarter 1 a benchmarking exercise was undertaken to ascertain customer service standards in comparable organisations.
Brag Rating: On track for achievement						

			Ę	STR	ATE	GIC THEME 4
			Deli	ver	ational excellence	
Action	Measures	Q1	Deli Q2	very Q3	Q4	Performance
Action 4.5 We will align our range of provider guidance to ensure it reflects our vision, values and commitment to customer service.	Aligned provider guidance which reflects our vision, values and commitment to customer service		QZ	43	X	This exercise will follow on foot of the development of customer service standards.
Brag Rating:						
Action 4.6 We will pilot the risk-adjusted, dynamic and responsive (RADaR) model designed in 2017/18 to support a risk- based, intelligence-led approach to inspection planning for care homes and other services.	Pilot and review RADaR with Nursing and Residential Care throughout 2018/19				X	The RADaR Database is now live and is being piloted by the Nursing & Residential Teams. Work is ongoing on the development of a risk-based, intelligence led model which is on track for achievement by Quarter 4.
Brag Rating:						
Action 4.7 We will improve the quality of our reports so they are meaningful, accessible and useful to all stakeholders.					x	A project has been initiated by day care and domiciliary care agency inspectors to provide information about RQIA and inspections in a format that is accessible to service users with a range of communication needs. The project has involved service users, staff and inspectors and feedback from these groups supports the need for RQIA to review the accessibility of inspection reports. Through co-production, the project aims to produce a range of 'easy read' reports and other information about RQIA for service users who have
Brag Rating:						communication needs

				CC	DRE	ACTIVITIES
		d in (ness	plan for the coming year, RQIA will maintain our core activities
Action	Measures	Q1	Deli Q2	very Q3	Q4	Performance
Action 5.1 We will exercise the Authority's powers to support and drive improvement in the services we inspect, review and audit					X	RQIA will contribute to an Association for Real Change (ARC) workshop involving registered managers of services to develop a regional quality monitoring template for the completion of monthly reports.
Brag Rating:						
Action 5.2 We will provide advice to the Department of Health on proposed policy and legislation affecting the regulation or quality of health and social care.					x	A paper will be drafted in Quarter 2 and presented to the DOH, advising on gaps in service provision with recommendations on possible new legislative interventions required to ensure the safety and wellbeing of the young people requiring accommodation in in unregistered accommodation.
Brag Rating:						
Action 5.3 We will meet our statutory requirements in respect of the regulation, inspection, review and audit of health and social care.	 % of planned inspections, reviews and audits completed by year end 				X	A total of 2332 inspections of regulated services is scheduled for 2018/19, with 622 completed in Quarter 1. This represents 27% of scheduled inspections for the year completed within the quarter. RQIA has funded 3 audits and 3 quality improvement initiatives during 2018/19 – all of which have commenced in Q1. Four thematic reviews are currently underway with a further five undergoing quality
Brag Rating:						assurance to be published in-year.
On track for achievement						

				CC	DRE	ACTIVITIES
		<u>d in (</u>				plan for the coming year, RQIA will maintain our core activities
Action	Measures	Q1	Deli Q2	very Q3		Performance
Action 5.4 We will manage our resources effectively to ensure that we operate within allocated budget, operating within a breakeven tolerance where a deficit is not permissible and a surplus cannot exceed £20k.	 Produce the 2018/19 annual fee schedule and forward to BSO Finance in a suitable format to allow creation of invoices completed Produce end of quarter pro-rata fee schedules and forward to BSO Finance in a suitable format to allow creation of invoices – ongoing (to be completed by year end) Assist BSO Finance in recovering 98% of 2018/19 fee income by 		X		x	The 2018/19 annual fee schedule has been approved and forwarded to BSO Income for processing in July 2018. In Quarter 1 the pro-rata schedule was approved and forwarded to BSO Income for processing invoices produced and issued by BSO Income. The Quarter 2 pro-rata schedule is due to be completed by the end of September. We are on target to meet our goal of recovering 98% of the 2018/19 fee income by 31/03/2019. RQIA staff restructuring has commenced following the outcome of the Workforce Review carried out in 2017/18 and as a result a number of posts have or will be advertised in the coming months.
On track for achievement	year end (ongoing)Achieve Break even				x	
Action 5.5 We will adopt a targeted, proportionate and responsive approach to our programme of inspection, audit and reviews.	· Autieve bleak evell				x	In addition to the regulated services where 'RADaR' is being piloted, RQIA continues to plan inspections and respond to concerns in a manner that is targeted and proportionate A range of regulatory interventions are used to drive improvements in services including enforcement activity, signposting and compliance monitoring.
Brag Rating:						
On track for achievement						
Action 5.6 We will develop and foster strategic alliances with other regulators and improvers.					X	Bi annual liaison meetings are held between RQIA and the Northern Ireland Commissioner for Children and Young People (NICCY). RQIA met NICCY on the 14 June 2018 to exchange information around issues of mutual interest in respect of children's services in Northern Ireland.
Brag Rating:						There are currently three Memorandum of Understanding (MoUs) which are being processed in Quarter 1 - with the Northern Ireland Social Care Council, Fire and Rescue Service and the Health and Safety Executive.

				CC	DRE	ACTIVITIES		
In addition to the spe	ecific actions include	ed in o	our b	ousir	ness	s plan for the coming year, RQIA will maintain our core activities		
Action	Measures	Delivery Q1 Q2 Q3 Q4				Performance		
Action 5.7 We will recognise and share examples of good practice where we find it.			QZ	43	X	Following a serious adverse incident RQIA, co-produced with a service provider, an information leaflet sharing learning outcomes from the incident. This will be disseminated to service providers in Quarter 2 in relation to managing residents with modified diets and texture descriptors.		
Brag Rating: On track for achievement								
Action 5.8 We will continue to actively participate in the work of HSC Quality Improvement.					X	RQIA is a member of the Critical Friends Group which was established to critically challenge and provide senior guidance and governance oversight to the design process of improvement. RQIA's director of Improvement participates in meetings of the Design Collaborative		
Brag Rating: On track for achievement						progressing work of the Improvement Institute/System.		
Action 5.9 We will work in partnership with the Innovation Lab to improve our engagement with users of health and social care services.					X	RQIA plans to meet with the Innovation Lab to plan work for the coming year to support the membership scheme and other initiatives		
Brag Rating: On track for achievement								
Action 5.10 We will deliver a minimum of (12) engagement events with providers of health and social care services.					x	During Q1 RQIA delivered/participated in six engagement events with providers of HSC services. These included: RQIA's Building Sustainable Partnerships workshop to suppo improvements in information sharing between HSC organisations, including the five trust and RQIA; and a joint RQIA, Royal College of Psychiatrists and British Psychological Society event to discuss confidentiality and information sharing in acute mental health assessments.		
Brag Rating: On track for achievement								

				CC	ORE	ACTIVITIES
In addition to the s	pecific actions includec Measures	d in d		ousii very	ness	plan for the coming year, RQIA will maintain our core activities Performance
Action		Q1	Q2		Q4	
Action 5.11 We will implement Phase II of the project to integrate MHLD systems into iConnect. Brag Rating: On track for achievement	 % of milestones successfully delivered on target 				X	 The MHLD IS project is on schedule and within forecast budget. 90% of the build is now complete and the remainder will be completed in September 2018. User Acceptance Testing has commenced on the completed modules and the minor issues identified have been resolved. User Acceptance Testing will be completed by the end of November 2018. The MHLD modules are scheduled for go-live on 2 January 2019.
Action 5.12 We will implement and oversee central monitoring of all statistical information requests.	 Develop a database to record details of information requests including customer details, type of request and time taken to collate Use the database to record all requests for information and review the information regularly at information team meetings. 				x	The information request database has been built on a Microsoft Access platform and was rolled out to the information team in late June 2018. The database holds all the required information and meets the team's needs. A total of 91 separate information requests have been logged onto the database. The information team continues to review and discuss ongoing information requests at our bi- monthly team meetings.
Brag Rating:						
On track for achievement						

		d in (plan for the coming year, RQIA will maintain our core activities	
Action	Measures	Q1 Q2		ivery Q3 Q4		Performance
Action 5.13 We will develop strategic alliances with other organisations to promote the use of information collected and analysed internally within RQIA and work collaboratively where we can	 Attend and provide input to the Regional Strategic Information Group Attend and provide input to Regional NMC Analyst Network Meetings 				X	No events were planned in Quarter 1. A member of the information team will attend the NMC Analyst Network meeting in London on in July and will provide detailed feedback to the team.
Brag Rating: On track for achievement						
Action 5.14 We will improve how we do our business to ensure that people trust and use our reports of inspection, audits and reviews to make informed choices and decisions about health and social care services.					x	RQIA produced a video called 'Geraldine's Story' where Geraldine shared her experience of finding a nursing home for her husband who was living with dementia.
Brag Rating: On track for achievement						