RQIA Corporate Performance Report 2018-19

Quarter 4 January – March 2019

> 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 2019)

Traffic Light	Mar 2019	Actions that require exception reports
	4	Action 1.3 Fourteen of the twenty two identified actions arising from the internal review of Dunmurry Manor Care Home have been fully implemented as at the end of March
	0	2019. Eight actions have not been delivered; three actions rely on a review of the 2003 Order and five actions have projects initiated to be completed during 2019/20.
	0	Action 4.1 RQIA has recruited key posts (Deputy Directors) during 2018-19. However, RQIA
•		continue to be challenged with delays in BSO recruitment arrangements in order to complete the Transformation, Modernisation and Reform framework. RQIA anticipates that new positions (Business Manager and Business Support Officers) will be advertised in the first quarter 2019/20. RQIA will seek to fill vacant posts (Administrators and Personal Assistants) during quarter 1 2019/20. A review of the administrative function in RQIA is planned for quarter 1 2019/20, with an expected report during quarter 2, 2019/20.
		Action 4.5 We developed and implemented standards for telephony and set up systems for the handling of correspondence to the Chief Executive. However, the decision to move all admin tot eh BSU and the delays in recruiting a business manager and support staff impacted on achieving his target. The Head of BSU then commissioned a review of admin services and function from the HSC Leadership centre and this has commenced. The review will include customer service and will make recommendations in respect of best practice and training. The review is to be complete by the end of June 2019.
		Action 5.9 Due to pressures on the Innovation Lab with other priorities, RQIA has deferred action 5.9 to 2019/20 and will be reflected in the quarter 1, Corporate Performance Report.

Summary of Achievements

- A total of 2572 inspections were completed by the end of Quarter 4 which represents over 100% of year's scheduled inspections completed.
- 78 inspections were completed with lay assessor involvement by the end of Quarter 4.
- The RADaR database has been developed and is currently being piloted by the Care Homes Team. Work is ongoing on the development of the dynamic intelligence led model.
- The RQIA Membership Scheme was launched on 7 June 2018. The inaugural meeting was held in March 2019.
- An easy read report template has been developed and will be implemented across Domiciliary Care Agencies and Day Care Setting in April 2019.
- 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. 208 separate information requests were responded to by the team between 01/06/2018 31/03/2019, 63% of which were responded to within one day. In May 2019, information team issued a customer satisfaction survey to 44 internal and external users.
- The Mental Health module of iConnect was launched in January 2019.
- During 2018-19, 24 (19.67%) members of staff left RQIA (including voluntarily, VES and retirement).
- During 2018-19, there was an average of 7.78% staff absence. The absence target for 2018-19 is 7.11%.

			Ś	STR	ΑΤΕ	GIC THEME 1					
	Encourage quality improvement in health and social care services										
Action	Measures	Q1		very	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	The independent assurance workstream is chaired by RQIA Chief Executive and co- chaired by the Director of Assurance. 60% of workstreams have presented their work plan to date to the assurance group.					
Brag Rating: Action delivered											
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	A self-service state of the nation reporting is now available by service type. A report for dental services has been created using this information and shared with Board members.					
Brag Rating: Action delivered											

			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	Implementation of the steps outlined in RQIA's action plan arising from our internal review of Dunmurry Manor				X	Many of these actions have been subsumed into the review of inspection methodology The Review of Inspection Methodology Programme was agreed at the March 2019 RQIA Board meeting, and the first Project Board meeting will be held on 22 May 2019. Background research is underway and the first three elements to be progressed are improved report formats, the use of information to inform scheduling and decision-making. The Dunmurry Manor Care Home Action Plan remains in place in the Assurance Directorate with fourteen actions completed to date.
Brag Rating: Not achieved 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.	Number of RQIA initiatives for supporting improvement to overcome gaps identified in the quality of services which RQIA inspects				x	Three Medicines Management Workshops to Care Home Providers were delivered in partnership with the NICE Implementation Facilitator for Northern Ireland. We continue to work seek opportunities to work with the NICE Implementation Facilitator for NI to increase awareness of NICE resources for the regulated sector. The information team is working to analyse requirements and recommendations a view to ascertaining key areas in which to focus for future projects. Providers have been notified that links are available on our website to IDDSI in relation to
Brag Rating: Action delivered						Adult Swallowing Difficulties.

		STRATEGIC THEME 2									
		Use	SOL	urce	s of	information effectively					
Action	Measures	Q1	Deli Q2	very Q3	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	NI Ambulance Service (NIAS) data and Hospital Admission Data have been evaluated and summary reports produced. The NIAS data has been used to produce a stand-alone report with analysis of the ambulance calls from nursing & residential homes during 2017/18. This has been shared with the HSC Trusts as a joint NIAS-RQIA publication.					
Brag Rating: Action delivered	the above data sources in order to try and predict risk as set out in the RADaR model					Information team will meet with the Care Homes team to discuss what information extracted from the NIAS data will best serve their intelligence needs. Once agreed, work will commence to establish a regular process for receipt of the data and to explore the possibility of recording on iConnect.					
						There are a number of data quality issues with the hospital admission data and as such quality assurance is ongoing.					
						Whilst an initial extract of data from the GP NHAIS system has been obtained, unfortunately there were a number of concerns over the data quality. As such we are not in a position to use the data at this stage. However, we are continuing to review the data, and other alternative options are also being explored.					
						A preliminary analysis of RADaR risk scores was presented at an inspector workshop on 5 November 2018. Data collection will continue in 2019-20 with the database having been updated and developed further to also allow for recording of outcomes of the 3 monthly dynamic review element of RADaR.					

			ç	STR	ATE	GIC THEME 2
Use sources of in						information effectively
Action	Measures	Q1	Deli Q2	Q3	Q4	Performance
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. Brag Rating: Action delivered	 Develop self service capability for validation, performance and quality reports Deliver training in the use of self-service reporting 			x		 The self-service reporting template is now in use within the Nursing, Residential and Independent Healthcare teams. The report will be introduced to the Children's Team in Quarter 1, 2019/20 A 'State of the Nation' report has been developed and tested, and will be introduced to teams in April/May 2019. This report is service type specific and will provide information on registrations, inspections, notifications and areas of improvement in services over a 5 year period. In addition to iConnect dashboards, a self-validation report will be developed in 2019/20 to enable staff to identify errors recorded on iConnect, and information outstanding or missing. This report is expected to be completed by the end of Quarter 2 2019/20.
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	The summary report has been collated by the information team and is currently undergoing final formatting with the communications team. It is anticipated to be finalised by the end of May 2019. A summary report of RQIA regulatory activity was also completed by the end of Quarter 4 in relation to the completion of our regulatory requirements. 100% of our inspections were completed at end of Q4.

STRATEGIC 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. Refresher training in the National Statistics Code of Practice has been undertaken by the NISRA statistician/Head of Information and disseminated to the team.						
Brag Rating: Action delivered												

			Ş	STR	ATE	GIC THEME 3
	Engag	e an	id in	volv	rvice users and stakeholders	
Action	Measures	Q1	Deli Q2	very Q3	Q4	Performance
Action 3.1 We will increase the profile of RQIA with the public. Brag Rating: Action delivered Action 3.2 We will launch a membership scheme to involve service	Number and % of people who were surveyed in the Household Survey that are aware of RQIA's role and responsibilities			x		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 and will be repeated in 2019/20. Results from the NISRA Survey were received at the end of September, they show that 32% of people surveyed were aware of RQIA, 27% were aware of RQIA's registration and inspection of HSC services function, 22% were aware of RQIA's responsibilities in relation to people with mental ill health or learning disabilities and 24% were aware of RQIA's responsibilities for carrying out investigations/reviews of HSC services. Further analysis by sex, age group and geographical areas has also been analysed. A stakeholder sentiment analysis was conducted on behalf of RQIA which has facilitated monitoring of the communication strategy.
Brag Rating: Action delivered						At 31 December 2018, 71 people had signed up to RQIA's membership scheme. In Quarter 3 members will be invited to attend focus groups to develop and co-produce terms of reference and a work-plan for the group. This may include developing accessible information and guidance for members of the public; accessible report formats; and seeking views on other areas/issues that we should focus upon. During quarter 4, held its inaugural with the Membership Scheme forum, where we discussed how engage the public in our work; improve the accessibility of our reports to ensure they help to support the public when making choices about health and social care services; and how we can improve our website

			S	STR	ATE	GIC THEME 3
	Engag	e an	rvice users and stakeholders			
Action	Measures	Q1		very Q3	Q4	Performance
Action 3.3 We will actively develop partnerships with academia and service improvers to enhance our processes and procedures.	 Analysis of RQIA's active involvement with academia and service providers Number of inspections completed with student nurses involvement 			40	X	 RQIA has been engaging with Professor Brian Taylor (Ulster University), on the development and implementation of 'RADaR'. RQIA delivered a presentation on RADaR at the University of Ulster DARE Conference, on 3 July. RQIA has also met with 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. RQIA supported ARC at an event for registered Managers on 27 November focusing on monitoring quality across a range of social care settings. A training programme on rights of children has been developed with Queens University Belfast and the RQIA Children's Team which has been delivered in November. In Quarter 2, RQIA facilitated one week placement for two open university student nurses, 23 – 27 July 18. As part of this placement, two dental inspections were completed with student nurses involvement, 25 and 26 July 18. RQIA participates in HSC training days (to include infection prevention and control link nurse study days, Band 6 and 7 leadership study days). At the end of Quarter 3, four presentations were given, two to the Belfast (26 September 18, 21 November 2018).
Brag Rating: Action delivered						We contributed to five workshops with the HSC Quality Improvement Alliance (QIA) to support care home transformation,
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 3 RQIA engaged with the Voice of Young People in Care organisation (VOYPIC) to increase user involvement in children's homes inspections. Currently VOYPIC are preparing a plan which will include the recruitment of an intern who will oversee the training and induction of a team of ex care experienced young people (sessional workers) to assist in the inspection of children's services.
Brag Rating: Action delivered						In Quarter 4, RQIA agreed a proposal to work with VOYPIC and work is currently underway to recruit an intern. We will avail of information gathered by the 10,000 voices project relating to lived experience in Nursing Homes. This will be reported on when it is available.

	STRATEGIC THEME 3											
Engage and involve service users and stakeholders												
Action	Measures		Deli	very		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. During 2018-19, 78 inspections have been carried out with a lay assessor present: 48 at a nursing home; 25 at a residential care home; 4 within a MHLD service; and one as part of an independent health care inspection. Four lay assessors have been used across 10 days of inspection (11 – 25 October 2018) to HSC Outpatient Department services, as part of the inspection 						
Brag Rating:						element of the DoH Commissioned Review of Governance Arrangements in Outpatients Services in the Belfast Trust.						

						GIC THEME 4
Action	Measures	Τ		ivery	000	Performance
		Q1	Q2	Q3	Q4	
Action 4.1 We will implement the actions set out in our Transformation, Modernisation and Reform framework.	Implementation of the actions set out in our Transformation, Modernisation and Reform framework				X	 During 2018/19 we submitted job descriptions for a Business Manager (band 7), Business Support Officers (band 5) for banding to BSO Human Resources. A job description for the Inspector Assistant role has been submitted for banding during quarter 4. We submitted amendments to BSO Human Resources in relation to the RQIA Organisational Structure on HRPTS in order to advertise new positions. This is out with RQIA's control. All new job roles will be advertised during quarter one of 2019/20, when BSO Human Resources revise the organisational structure.
Brag Rating: Not delivered						A paper was brought to the RQIA Board in March 2019 regarding the Project Board for the new inspection methodology for regulated services. A meeting date has been agreed for May 2019.
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	Senior staff have been offered opportunities for development including a CLM Level 7 course in leadership (2 staff), an executive development programme at QUB (1 staff), the Scottish Improvement Leader Programme (1staff) and the Leadership centre regional development programme (1 staff). Feedback will be collated to determine the most appropriate course or mix of courses for RQIA staff development. A planning day has been arranged with administrative staff in the Business Support Unit to develop an admin development plan for 2019/20.
Brag Rating: Action delivered						
Action 4.3 We will develop and implement a charter of RQIA's vision and values					x	RQIA recently revised its vision and values to define our culture and capture what we do when we are at our best, however when available RQIA will adopt the launch of the regional values framework. This will be completed during 2019/20.
Brag Rating: Action delivered						

			Ş	STR	ATE	GIC THEME 4
	1	Ŧ			ational excellence	
Action	Measures	Q1	Deli Q2	very Q3	Q4	Performance
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. Internal standards were issued in respect of telephony and duty calls. New systems for the quality assurance of correspondence have been put in place.
Brag Rating:						
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				x	This exercise will follow on foot of the development of customer service standards. This has been deferred to 2019/20
Brag Rating: Not delivered						
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	Data from the Scaled Inspection Tool which was completed at all primary inspections in 2018-19 has been collated within a custom pilot database. Inspectors were also asked to complete a proposed timescale for the next inspection which allows for the modelling of future inspection frequencies and workload. Collection of data will continue in 2019-20 and also include the addition of dynamic review of RADaR. Inspectors will review data from the self-service report 3 monthly (or earlier in response to incoming intelligence) and record the outcome of these reviews on the pilot database against the latest risk score for the service.
Brag Rating:						
Action delivered						

			ç	STR	ATE	GIC THEME 4					
Deliver operational excellence											
Action	Measures Delivery					Performance					
		Q1	Q2	Q3	Q4						
Action 4.7 We will improve the quality of our reports so they are meaningful, accessible and useful to all stakeholders.					X	A project is underway to test in 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, a range of 'easy read' report template and other information about RQIA for service users who have communication needs was finalised in March 2019 for implementation in 2019/20 inspection year.					
Brag Rating:						needs was infansed in March 2019 for implementation in 2019/20 inspection year.					

				СС	DRE	ACTIVITIES
		d in d			ness	s 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 contributed 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. RQIA have initiated a project to review the inspection methodology; developed safety huddles (currently testing with care homes team) with a spread plan for quarter 1; RQIA are a member of the HSC QIA; there are regular liaison meetings with HSC Directors, and Trust Chief Executives. Bi-annual meetings are arranged with IHCP.
Brag Rating: Action delivered						RQIA provided a presentation at three workshops on Medicines Management with NISCC between January and March 2019.
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	 Three number of article four letters were issued to the DoH. RQIA, through quarterly liaison meetings with the DoH, advise and update DoH on all aspects of health and social care. The Chief Executive meets professional leads in the DoH on a quarterly basis to update and share information relating to the sector. A paper was prepared and shared highlighting the gap in service provision for young people requiring accommodation in unregistered accommodation. The 2018/2019 Review Programme has undergone re-prioritisation during 2018/2019 due to emerging reviews, commissioned by the DoH. Four thematic reviews are currently underway, with a further six review reports undergoing quality assurance.
Brag Rating:						
Action delivered						

In addition to the s Action	Measures		very		Plan for the coming year, RQIA will maintain our core activities Performance
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	We planned to complete 2011 inspections in order to meet the statutory minimum in the regulated sector. We completed 2572 inspections by 31 March 2019 to include the regulated sector, MHLD and unregulated services (boarding department, residential family centres, young adult support accommodation and a voluntary adoption agency). Areas of improvement identified across the sector related to staffing and governance arrangements. Individual regulated services found areas for improvement in management of medicines, health and welfare of residents and care plans.
Brag Rating: Action delivered					 audit to Causeway Hospital and a 10 day inspection to the Belfast Trust Outpatients Departments, as part of the Review of Governance Arrangements in Outpatients Services in the Belfast Trust. Five additional inspections were carried out to support regulated services. 29 of inspections was carried out to Mental Health and Learning Disability Hospitals this year including: Muckamore abbey Hospital, Gransha Hospital, Ward 27 in Downeshire Hospital.
					1082 inspections were carried out to the independent sector, including dentists, medical agencies, hospitals and hospices.

Action	Measures	Q1	Deli Q2	very Q3	Q4	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 		X		x x x	The 2018/19 annual fee and quarter 1 pro-rata schedules were approved and forwarded to BSO Income for processing in July 2018, with quarter 2 invoices processed & issued in November 2018, quarter 3 in January 2019 & quarter 4 in March 2019. 2018/19 invoice have been issued to all providers. As at 31 March, over 99% of the 2018/19 income had been recovered and therefore our target was met. A small number of outstanding debtors will be referred to the operationa teams for decision. 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.
Brag Rating: Action delivered	 be completed by year end) Assist BSO Finance in recovering 98% of 2018/19 fee income by year end (ongoing) Achieve Break even 					RQIA achieved break-even at the end of March 2019.

				COF	RE	ACTIVITIES
In addition to the spe	cific actions includ	ed in o	our bı	usine	ess	plan for the coming year, RQIA will maintain our core activities
Action Measures			Delive	ery		Performance
		Q1	Q2		Q4	
Action 5.5 We will adopt a targeted, proportionate and responsive approach to our programme of inspection, audit and reviews.					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. We will hold a further workshop in May 2019. We have reviewed our approach to inspection of Neonatal and Critical Care areas. At the end of Quarter 4 we had met with both the DoH and relevant Clinical Networks to engage take forward a collaborative self-assessment and risk based approach to inspection. We have continued to review and re-prioritise our Review Programme to meet additional requests from the DoH for commissioned reviews. This has been discussed with DoH at Bi-monthly meetings on 26 September 2018 and 6 November 2018 and 11 January 2019.
Brag Rating: Action delivered						 inspections, with the remaining 17.5% completed for other reasons (including registration visits). 6% of inspections were either Follow ups, Enforcement Monitoring, Other Intelligence, PEI or Whistleblowing.
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 to exchange information around issues of mutual interest in respect of children's services in Northern Ireland. Two Memoranda of Understanding (MoUs) were signed off with the Northern Ireland Social Care Council and the Fire and Rescue Service and draft MoUs were sent to ETI,
Brag Rating: Action delivered						HSENI, SBNI and NIHE for approval. RQIA has regular liaison meeting with DoH, HSCB, trusts etc. All objectives outlined in the engagement plan have been achieved.

Action	Measures		Deliv	very		Performance
		Q1	Q2	Q3	Q4	
Action 5.7 We will recognise and share examples of good practice where we find it.					X	RQIA has shared good practice through workshops with providers on preparing for wir (x2); medicines management (x3) and raising awareness of human rights in residentia homes and across the sector (x2).
Brag Rating: Action delivered Action 5.8 We will continue to actively participate in the work of HSC Quality Improvement.					x	RQIA is a member of the HSC Quality Improvement Alliance. The aim of the HSC QIA to be recognised internationally, but especially in Northern Ireland as a leader of excellence in HSC. As a member, our role is to shape a dynamic network from what is known and from experiences. RQIA's Director of Improvement participates in meetings of the Design Collaborative progressing work of the Improvement Institute/System. We continue to use peer reviewers as part of inspection to HSC service. This support the collaborative work and quality improvement across the region. We used have use 12 peer reviewers on inspections.

				СС	RE	ACTIVITIES
		d in d			ness	plan for the coming year, RQIA will maintain our core activities
Action	Measures	01	Deli	very	04	Performance
Action 5.9 We will work in partnership with the Innovation Lab to improve our engagement with users of health and social care services.		Q1	Q2	Q3	Q4 X	Due to pressures on the Innovation Lab, this has been deferred to 2019/20.
Brag Rating:						

				CC	DRE	ACTIVITIES			
In addition to the s		d in (ness	plan for the coming year, RQIA will maintain our core activities			
Action	Measures	Q1	Deli Q2	ivery Q3	Q4	Performance			
Action 5.10 We will deliver a minimum of (12) engagement events with providers of health and social care services.					x	During 2018-19 we delivered 18 events for service providers. From September to November we held five workshops across Northern Ireland to support care home providers and domiciliary care services prepare their services for the winter, in partnership with RCN, PHA, NI Ambulance Service and Multiagency Emergency Preparedness groups. We also held five workshops on medicines management, with input from NICE. RQIA's Mental Health and Learning Disability team held a stakeholder involvement workshop with service providers and managers. In December, we held a radiation safety workshop involving all trusts and independent organisations. Our workshop focused on the changes within the new Ionising Radiation (Medical Exposure) Regulations which came into operation in February 2018. We held a workshop involving all independent hospitals and hospices, to share information in relation to our revised inspection methodology, which will be implemented from January 2019. The providers were positive with respect to the new approach. In particular moving from an inspection process which was focused in the main on nursing care and practice, to one which is more multi-disciplinary in its approach. During January to March, RQIA held three joint workshops with NISCC and PHA for domiciliary care services relating to medicines management and frailty. We also held a joint workshop for mental health providers with the Royal College of Psychiatrists; and two joint human rights training workshop with the Independent Health and Care Providers for their members.			
Action 5.11 We will implement Phase II of the project to integrate MHLD systems into iConnect.	 % of milestones successfully delivered on target 				X	100% of milestones were successfully delivered on target. The iConnect MHLD information module went live on the 2 January 2019 as planned. All current risks have been assessed as low. The MHLD team are being supported by the development during the early implementation phase. The project closed down on 31 January 2019. Standard reporting and dashboard development is ongoing.			
Brag Rating:									
Action delivered									

Action	Measures	Q1	Deli Q2	very Q3	Q4	Performance
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 wa 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 208 separate information requests have been logged onto the database, The information team continues to review and discuss ongoing information requests at our bimonthly team meetings. Information team will undertake an information request user's satisfaction survey during quarter 1 2019/20.
Brag Rating: Action delivered						
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	 RQIA have been represented at all ISB meetings to date and have had input to the now agreed terms of reference for the group. RQIA have attended 3 meetings of the UK Healthcare Regulators Analyst Network to share best practice in data analysis with other UK Healthcare Regulators including CQC HIW, NMC, GDC, GMC, HIS. RQIA information team facilitated a visit from HIW in November to share best practice RQIA attended the Northern Ireland launch of the Association of Public Healthcare Analysts (AphA) and have been allocated two funded memberships by the Information Standards Board.
Brag Rating: Action delivered						In Quarter 4, the Assistant Director for Care Homes attended the Regional Emergency Contingency Planning Group in respect of Brexit Planning.

In addition to the spec	cific actions include	ed in c	our k			ACTIVITIES s plan for the coming year, RQIA will maintain our core activities
Action	Measures		Deli	very		Performance
		Q1	Q2	Q3	Q4	
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. RQIA implemented all actions from the engagement strategy and plan. RQIA, in partnership with other organisations delivered presentations at workshops to the regulated sector. RQIA revised the corporate documents and guidance leaflets for use on all inspections during 2018-19.
Brag Rating: Action delivered						Location maps for care homes have been developed and shared with stakeholders (i.e. DoH & HSCB).