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



# **CORPORATE STRATEGY** 2012-15

Assurance, Challenge and Improvement in Health and Social Care

www.rqia.org.uk

#### **Our Vision**

To be a driving force for positive change in health and social care services in Northern Ireland.

#### **Our Mission**

RQIA provides independent assurance about the safety, quality and availability of health and social care services in Northern Ireland, encourages continuous improvement in these services and safeguards the rights of service users.

#### **Our Values**

- **Independence** upholding our independence as a regulator
- **Inclusiveness** promoting public participation and building effective partnerships internally and externally
- **Integrity** being honest, open, fair and transparent in all our dealings with our stakeholders
- Accountability being accountable and taking responsibility for our actions
- Professionalism providing professional, effective and efficient services in all aspects of our work - internally and externally
- Effectiveness being an effective and progressive regulator forward-facing, outward-looking and constantly seeking to develop and improve our services

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# Foreword

This is the Regulation and Quality Improvement Authority's (RQIA's) corporate strategy for the period 2012-15. It has been developed through consultation with a range of interest groups, including: representatives of the statutory and regulated sectors; service users and carers; and others with an interest in our work.

RQIA is a non-departmental public body, and provides independent assurance about the safety, quality and availability of health and social care services in Northern Ireland. RQIA is also responsible for encouraging improvements in the quality of these services.

RQIA works within a robust legislative framework. The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, provides a statutory mandate to RQIA, and defines its roles and functions. RQIA has a statutory duty to inspect and review services and to report its findings to the Department of Health, Social Services and Public Safety (DHSSPS).

RQIA, through its inspections and reviews, makes an independent assessment of the safety, quality and availability of health and social care services. We make use of the information from inspections and reviews to determine if services are safe, accessible and well managed. We use this information to highlight good practice, challenge poor performance and identify areas where further improvement is necessary.

RQIA's Board sets and, through its accountability arrangements, regularly reviews a programme of work in relation to the assessment, oversight and regulation of health and social care services in Northern Ireland. The findings and recommendations of our inspections and reviews are published on RQIA's website, www.rqia.org.uk.

RQIA has recourse to a range of interventions in the regulated sector, including enforcement and prosecution, which we use, as necessary, to drive improvements. RQIA will revert to enforcement when all other reasonable steps to secure compliance have failed. In circumstances where there may be an immediate risk to the safety and wellbeing of vulnerable people RQIA may impose conditions of registration or exercise its authority to seek the urgent closure of a registered agency or establishment.

RQIA has experienced a significant expansion of its duties and responsibilities since 2005.

The Health and Social Care (Reform) Act 2009 transferred a range of statutory responsibilities for people with mental ill health and/or a learning disability to RQIA. These duties include: preventing ill treatment; remedying any deficiency



in care or treatment; terminating improper detention in a hospital, or in respect of a guardianship order; and preventing or redressing loss or damage to a patient's property.

In 2009 RQIA was designated as a national preventive mechanism (NPM) under the United Nations Optional Protocol to the Convention Against Torture (OPCAT). In this capacity, RQIA is required to visit places of detention to ensure that those detained are not subject to inhumane or degrading treatment.

RQIA also has a responsibility for the inspection of services providing radiological procedures such as x-rays and radiotherapy. These regulations protect the public from inappropriate or unnecessary exposure to radiation in health care settings.

In 2011 RQIA became responsible for the regulation of private dental treatment in Northern Ireland. RQIA anticipates that over the course of the current strategy its role will increase further, taking account of proposed changes in service delivery. RQIA continues to ensure that health and social care services in Northern Ireland are subject to independent, proportionate and responsible regulation. The feedback we received from a wide range of people was critical in helping us to develop this strategy and to focus on the priorities for RQIA's work over the next three years.

We thank all of those who provided feedback or views on priorities and thereby contributed to the development of this strategy.

Dr Ian Carson Chairman

Glenn Houston Chief Executive

The purpose of this corporate strategy is to describe what RQIA aims to achieve between 2012 and 2015 and to set out what people can expect the outcome of our work to mean for them.

The strategy outlines the strategic context in which we operate and how RQIA will respond to the key challenges facing us and the wider health and social care system over the next three years.

RQIA's vision is to be a driving force for positive change in health and social care services in Northern Ireland.

RQIA's vision has been translated into a strategy map (Figure A, p.14), which provides a coherent picture of the interrelationship between RQIA's mission, outcomes, core activities and key enablers.

We set out in detail what we will do to deliver our core activities and key enablers. We also detail how we will measure the progress that we have made over the three year period of this strategy.

The successful delivery of our corporate strategy is dependent on a range of factors, but most importantly on a skilled and dedicated workforce. The corporate strategy is underpinned by annual business plans, which will set out the actions necessary, and resources available to RQIA to achieve our strategic objectives.

The strategy aims to be flexible and allow RQIA to respond to challenges and take opportunities as they arise.



This section identifies the key strategic challenges facing RQIA over the next three years and describes how we intend to respond to them.

The provision of health and social care in Northern Ireland will change significantly over the period of the strategy. Transforming Your Care: A Review of Health and Social Care in Northern Ireland, published by DHSSPS in December 2011, sets out a radical programme of change in how services will be delivered. Quality 2020: A 10-Year Strategy to Protect and Improve Quality in Health and Social Care in Northern Ireland, published by DHSSPS in November 2011, sets the regional direction for service quality. RQIA will take forward its work programme in the context of these major policies.

#### <sup>1</sup>Better Regulation Task Force (2003) As a

Principles of Better Regulation, Cabinet Office.

<sup>2</sup> Hampton, Philip (2005) Reducing Administrative Burdens: Effective Inspection and Enforcement, HM Treasury.

## Regulation

As a result of changes in the age and health profile of Northern Ireland's population, the provision of health and social care continues to diversify. Consequently, the range and nature of services delivered in the community has changed significantly. A large number of these services are now subject to regulation by RQIA.

The policy of the DHSSPS to care for people in or near their own homes, also acknowledges the growing contribution of these services to the care and treatment of large numbers of service users. One key challenge for RQIA is to ensure that service providers continue to deliver good quality outcomes for service users, which are safe and compliant with standards.

Over the next three years RQIA will continue the development of its approaches to regulation in line with emerging government policy and in the context of a challenging financial environment.

RQIA's inspection methodology has embedded the Better Regulation Commission's principles of good regulation<sup>1</sup> and the Hampton Principles<sup>2</sup>, and this approach:

- uses comprehensive risk assessment to concentrate resources in areas that needs them most
- provides accessible advice on methods of improvement
- ensures that providers should not have to give unnecessary information, or give the same information twice
- ensures that those providers who persistently breach regulations or who place service users at risk of harm are identified quickly and face proportionate and meaningful sanctions
- requires RQIA, as a publicly funded body, to ensure the efficiency and effectiveness of its activity, while remaining independent in the decisions it makes

RQIA continues to work in partnership with other regulators in its oversight of services including boarding schools, prison health care and a range of other specialist services.

#### Review

Health and social care services will face significant challenges during the period of this strategy: changes in the population structure; the development of new treatments; changes in working practices, such as the European Working Time Directive; and the financial environment. These factors will result in significant changes to service delivery.

During the three year period of this strategy RQIA will deliver a programme of review and inspection activity designed to provide assurance that the quality of services is maintained. We will continue to carry out programmes of infection prevention and hygiene inspections using the regional standards and audit tool developed in 2011. We will also carry out an inspection programme in relation to our responsibilities under the Ionising Radiation (Medical Exposure) Regulations 2000 (IR(ME)R).

We will publish and carry out a programme of service reviews on a broad range of prioritised themes to provide assurance that The Quality Standards for Health and Social Care, DHSSPS, 2006 are being delivered. We will seek to ensure that our processes do not lead to excessive administrative burdens for the organisations we review.

During the period of the strategy we will strengthen our relationships with other systems and professional regulators. We will seek to avoid duplication and work collaboratively to enhance assurance processes. For example, with Criminal Justice Inspection Northern Ireland (CJI) in relation to the regulation of health care in prisons.

#### Mental Health (Northern Ireland) Order 1986 Oversight

The regulation, review and monitoring of the discharge of the functions of the Mental Health (Northern Ireland) Order 1986 will be undertaken against a changing landscape of service modernisation. This includes a planned shift in policy from care and treatment delivered in hospital to care provided in the community. This will require RQIA to review its methodology for the inspection of services, in that service users will be located in various environments outside a hospital setting.

The new service frameworks for both mental health and learning disability are expected to be published in 2012. These frameworks will assist RQIA when undertaking inspections and reviews of services. In addition to the key indicators from the Human Rights Act 1998, we will use DHSSPS's patient/client experience standards to determine whether the rights of service users have been upheld in relation to the delivery of health and social care.



RQIA will consider the implications for its monitoring activities of the legislative changes resulting from the proposed introduction of the new Mental Capacity (Health, Welfare and Finance) Bill.

RQIA intends to strengthen links with other regulatory bodies, NPMs and universities to ensure that we use the findings from our inspections based on human rights indicators to influence policy or to help raise the standards of care.

#### RQIA's Organisational Landscape

RQIA faces a significant challenge over the next three years as it attempts to reconcile the demands of operating within financial constraints with rising stakeholder expectations, and the need to continue to focus on improvement. RQIA's task is clear: we must deliver a robust system of regulation and review, whilst maintaining financial balance and continuing to pursue improvement and service excellence.

RQIA has a responsibility to manage its resources and discharge its responsibilities in an effective, efficient and sustainable manner. RQIA has introduced a change programme to deliver improvement and efficiency over the next three years. This is vital to realising both our strategic objectives and financial aims. We also need to ensure that we invest in our workforce and that we take appropriate steps to support leadership development and the enhancement of management skills.

In order to promote organisational excellence RQIA has chosen to adopt Investors in People (IiP) and the EFQM Excellence Model (EFQM). These approaches will help us manage strategically, deliver against our organisational and quality improvement agendas and measure progress towards becoming a leading organisation.

A critical success factor in ensuring RQIA's continuous improvement and high levels of organisational performance over the next three years will be the investment we make in supporting the development and lifelong learning of our staff.

### Public Engagement

RQIA remains committed to engaging effectively with the public and with our stakeholders in order to achieve improvements in the safety, quality and availability of health and social care services in Northern Ireland. Over the next three years we will embed a public participation approach in the planning and delivery of all our work programmes, using appropriate methods that meet the varied needs of service users and carers. In addition, the implementation of RQIA's Communications Strategy will complement our engagement with service users, carers and the public, by ensuring that key stakeholders are kept fully informed of our work and achievements.

RQIA values public opinion and feedback. We will continue to engage meaningfully with the public using appropriate methods, taking into consideration the specific needs of individuals or groups. For example: those with a sensory impairment, or whose first language is not English.

#### Responding to These Challenges

We need to continue to build a stronger, more effective organisation, based on a robust system of regulation that enables us to meet these challenges. We need to improve outcomes for people, by reinforcing the accountability of organisations in meeting their statutory responsibilities. We need to drive improvement in services and act when providers of care do not meet essential standards of quality and safety. We should ensure that care is person centred and individuals are able to make informed choices and decisions. We must be driven by the outcomes that people who use services say are important to them, and focus our activities so that we make a real difference to people. At the same time, we need to take account of the challenging financial environment, and work collaboratively with others to maximise our impact.



The vision, mission and core values of RQIA will inform the selection and prioritisation of initiatives in the strategy and determine our approach to implementing them.

#### Vision

Our vision is to be a driving force for positive change in health and social care services in Northern Ireland.

#### **RQIA Strategy Map**

RQIA's Strategy Map (Figure A, p.14) serves as our road map to guide the activities of the organisation for the period 2012-15. It is a visual representation of our strategy on one page. It brings together the three key elements of the strategy: what we are here to do (mission) and the outcomes we must deliver to our stakeholders; the core activities we need to excel at; and the key enablers we must manage to ensure our success. The strategy map shows a visual representation of the relationship between each of these three elements and presents an integrated and coherent picture of RQIA's strategy.

The strategy map was developed in 2009 and has been reviewed and revised through extensive consultation with stakeholders. The development of this second generation strategy map will ensure that it continues to define our strategic direction and communicate our purpose for the next three years.

#### Mission and Outcomes RQIA's mission:

RQIA provides independent assurance about the safety, quality and availability of health and social care services in Northern Ireland, encourages continuous improvement in these services and safeguards the rights of service users.

This mission will guide and direct all the activities of RQIA, and is aligned to four key outcomes:

- Improving Care we encourage and promote improvements in the safety, quality and availability of health and social care services
- Informing the Population we publicly report on the safety, quality and availability of health and social care
- Safeguarding Rights we act to protect the rights of all people using health and social care
- Influencing Policy we influence policy and standards in health and social care

#### **Core Activities**

To achieve our mission and outcomes, we must focus on the delivery of the strategic objectives for each of the three core activities<sup>3</sup>:

| Core Activities  | Strategic Objectives   |
|--|--|
| <b>Regulation</b><br>Registering and inspecting a range of<br>independent and statutory health and<br>social care services   | <ul> <li>Complete an annual targeted and proportionate regulation programme<br/>to protect and safeguard the public and achieve improved outcomes for<br/>service users</li> <li>Ensure that regulation is carried out effectively and that its outcomes and<br/>impact on policy are communicated to all relevant stakeholders</li> </ul> |
| <b>Review</b><br>Assuring the quality of health and social<br>care through a programme of reviews and<br>hygiene inspections                                       | <ul> <li>Provide public assurance that The Quality Standards for Health and Social Care, DHSSPS, 2006, are being achieved</li> <li>Ensure that all review activity is designed to support continuous improvement and protect rights</li> <li>Inform the development of regional policy, standards and guidance</li> </ul>                  |
| Mental Health Order Oversight<br>Delivering a programme of scrutiny and<br>review in services provided to people with<br>a mental illness or a learning disability | <ul> <li>Provide optimal safeguards for all users of mental health and learning disability services</li> <li>Ensure that all review and inspection activity drives service improvement and is communicated to stakeholders</li> <li>Engage effectively in the development of policy and emerging legislation</li> </ul>                    |

The successful delivery of our outcomes – Improving Care, Informing the Population, Safeguarding Rights and Influencing Policy – is integral to the programme of work in each of the core activities. The achievement of outcomes will be evidenced by reporting on specific areas of work, and the development of indicators measuring progress and achievements.

<sup>3</sup> The key activities an organisation must excel at in order to deliver its mission.



#### Key Enablers

The overall delivery of the strategy and organisational success is dependent on the effective management of a number of key enablers:

- Engagement and Communications engaging and communicating effectively with our stakeholders
- **People** developing and maintaining a competent, valued and motivated workforce
- **Performance** managing and monitoring corporate and financial performance to improve organisational effectiveness
- Evidence underpinning our regulatory practice using research and available evidence
- Information managing information and ICT effectively
- **Governance** maintaining and promoting a robust governance and accountability framework

## Core Values

Our core values: independence; inclusiveness; integrity; accountability; professionalism; and effectiveness; form the basis of the culture of RQIA. These values express how we interact with all our stakeholders, and undertake our work.

## Translating the Strategy into Action

RQIA's high-level vision and strategy map is translated into specific actions in the annual business plan. This plan identifies the specific steps RQIA will take to achieve its strategic objectives, the timescale for action and how it intends to use the resources at its disposal.

## Bringing it Together

The following section sets out in detail the strategic objectives for each of the core activities and key enablers; what we will do to achieve those objectives; and how we will measure the progress that we have made over the three year period of the strategy. In consultation with staff and key stakeholders we will continually seek to improve these measures of success. We will report on and publish our progress every year.

# Figure A: RQIA Strategy Map 2012-15

We exist because (our mission):

RQIA provides independent assurance about the safety, quality and availability of health and social care services in Northern Ireland, encourages continuous improvements in these services and safeguards the rights of service users

| Outcomes:  | Improving Care<br>We encourage and promote<br>improvements in the safety, quality<br>and availability of health and social<br>care services  | he safety, quality quality and availability of health and people using health and social ca |  | ·  | <b>Influencing Policy</b><br>We influence policy and standards<br>in health and social care  |  |
|--|--|---|--|--|--|--|
|  |  | -   |  |  |  |  |
| We must excel<br>at these core<br>activities to<br>deliver on our<br>outcomes:<br>Strategic<br>Objectives: | <ul> <li>Regulation Registering and inspecting a range of independent and statutory health an care services </li> <li>Complete an annual targeted and proportionate regulation programm protect and safeguard the public a improved outcomes for service use <ul> <li>Ensure that regulation is carried ou effectively and that its outcomes a on policy are communicated to all stakeholders</li> </ul></li></ul> | d social<br>ne to<br>ind achieve<br>ers<br>it<br>nd impact                                  | <ul><li>achieved</li><li>Ensure that all review</li></ul>          | f reviews and infection<br>inspections<br>nee that agreed quality<br>nd social care are being<br>activity is designed to<br>aprovement and protect<br>nt of regional policy, | <ul> <li>Delivering a<br/>in services<br/>illness or a</li> <li>Provide o<br/>mental he</li> <li>Ensure th<br/>drives ser<br/>communi</li> <li>Engage e</li> </ul> | alth Order Oversight<br>programme of scrutiny and review<br>provided to people with a mental<br>learning disability<br>ptimal safeguards for all users of<br>ealth and learning disability services<br>at all review and inspection activity<br>vice improvement and is<br>cated to stakeholders<br>ffectively in the development of<br>d emerging legislation |
|  |  |   |  |  |  |  |
| We must<br>manage these<br>key enablers<br>to ensure our<br>success:                                       | e these Engaging and communicating effectively with our stakeholders ure our   |   | <b>People</b><br>Developing and maintain<br>valued and motivated w | -  |  | and monitoring corporate and rformance to improve organisational   |
| 1 /  | <b>Evidence</b><br>Underpinning our regulatory practice<br>research and available evidence   | e using   | Information<br>Managing information a                              | nd ICT effectively   |  | e<br>and promoting a robust<br>and accountability framework  |

# **RQIA** Strategic Objectives 2012-15



# **1 Regulation**

Registering and inspecting a range of independent and statutory health and social care services

|  |     | By 2015 we will have:   | What we will do  | Measures of success <sup>4</sup>  |
|--|-----|---|--|---|
| <ul> <li><sup>4</sup> Frequency of<br/>reporting is<br/>indicated by:<br/>(Q) quarterly<br/>reporting; (S) six<br/>monthly reporting;<br/>or (A) annual<br/>reporting.</li> <li><sup>5</sup> Better Regulation<br/>Task Force (2003)<br/>Principles of<br/>Better Regulation,<br/>Cabinet Office.</li> </ul> | 1.1 | Completed an annual<br>targeted and<br>proportionate regulation<br>programme to<br>protect and safeguard<br>the public and<br>achieve improved<br>outcomes for service<br>users | <ul> <li>We will carry out a programme of registration and inspection of services subject to regulation using robust methodologies based on Better Regulation Commission principles<sup>5</sup>.</li> <li>Our priorities include:</li> <li>reviewing and developing a range of registration policies and procedures, ensuring that we meet all relevant legislation including the European Union Services Directive</li> <li>continuing the development of our inspection methodology to all regulated sector services in line with emerging evidence on regulation and as a result of national inquiries</li> <li>continue to review the consistency of inspection approaches and assessments in line with existing and emerging standards and guidelines</li> <li>continuing the development of robust information systems that will facilitate the effective and efficient use of resources, and enable reporting of inspection outcomes</li> <li>ensuring that a programme of IR(ME)R inspections is initiated in regulated sector services</li> </ul> | <ul> <li>Maintained an accessible, up-to-date register of all establishments and agencies as defined in The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 (Q)</li> <li>100% of inspections completed in line with the statutory minimum requirements (Q)</li> <li>100% of inspections completed on the basis of the inspection planning approach incorporating relevant risk assessment and proportionate approaches (Q)</li> <li>100% of IR(ME)R inspections completed in line with the planned programme (Q)</li> <li>100% of all incidents to be acknowledged and initially processed by inspection staff within seven days (Q)</li> <li>Annual overview reports of the overall performance of regulated agencies and establishments (A)</li> <li>Demonstrate a measurable improvement in regulated services through an assessment of the number of services requiring intensive inspection regimes (A)</li> </ul> |

|     | By 2015 we will have:  | What we will do   | Measures of success   |
|-----|--|---|---|
| 1.2 | Ensured that regulation<br>is carried out effectively<br>and that its outcomes<br>and impact on policy<br>are communicated to all<br>relevant stakeholders | <ul> <li>We will ensure that: the outcomes of inspection activity are reported locally, ensuring that all inspections reports include a quality improvement plan; the outcomes of all regulation activity are reported regionally on an annual basis, highlighting areas where policy and standards may need to be amended.</li> <li>Our priorities include:</li> <li>ensuring the effective delivery of all local and regional reports within set timeframes</li> <li>regularly communicating with service providers, commissioners and DHSSPS on areas where policy and standards need to be amended</li> <li>ensuring that all inspection reports are made available to the public on the RQIA website within five days from the date the report is deemed open</li> </ul> | <ul> <li>Creation of an annual list of issues and anomalies<br/>on regulations and standards – forwarded to<br/>DHSSPS for consideration (A)</li> <li>Documented evidence of RQIA's contribution to<br/>policy, standards and guidance on health and<br/>social care locally and nationally (A)</li> <li>100% of inspection reports made available on the<br/>RQIA website within five days of being deemed<br/>open (Q)</li> </ul> |



## 2 Review

Assuring the quality of health and social care through a programme of reviews and infection prevention and hygiene inspections

| By 2015 we will have  | What we will do   | Measures of success   |
|---|---|---|
| 2.1 Provided public<br>assurance that agreed<br>quality standards for<br>health and social care<br>are being achieved | <ul> <li>We will implement and report on the programme of service reviews and infection prevention and hygiene inspections set out in the Three-Year Review Programme 2012-15.</li> <li>Our priorities include:</li> <li>completing within agreed timescales any specific reviews commissioned by the minister</li> <li>carrying out a programme of announced and unannounced infection prevention and hygiene inspections in relation to agreed regional hygiene standards</li> <li>reviewing our methodologies to ensure that our processes are effective and efficient</li> <li>implementing a programme of inspection and thematic reviews of prison health services working with partner regulators as required</li> <li>reviewing our approach to reporting on review activity to ensure that our reports are designed to meet the needs of our stakeholders</li> </ul> | <ul> <li>Report on the impact of review activity on improvements in the safety, quality and availability of health and social care services (A)</li> <li>Number of reviews completed as set out in the Three-Year Review Programme 2012-15 (Q)</li> <li>Complete 100% of announced and unannounced infection prevention and hygiene inspections as set out in the planned programme (Q)</li> <li>Completion of an annual overview report of the outcomes of the infection prevention and hygiene inspections (A)</li> <li>100% of IR(ME)R inspections completed in line with the planned programme (Q)</li> </ul> |

|     | By 2015 we will have:   | What we will do  | Measures of success  |
|-----|---|--|--|
| 2.2 | Ensured that all review<br>activity is designed to<br>support continuous<br>improvement and<br>protect rights | <ul> <li>We will design our programme and our approaches to carrying out and reporting on specific reviews and inspections to support action to improve services and protect rights.</li> <li>Our priorities include:</li> <li>ensuring that recommendations of our reviews and inspections are focused on improving services for patients and clients and that good practice is shared widely</li> <li>considering the potential for each review and inspection to contribute to the protection and safeguarding of rights</li> </ul> | Documented evidence that the recommendations<br>of RQIA reviews have been taken forward by the<br>appropriate organisations (A)  |
| 2.3 | Informed the<br>development of regional<br>policy, standards and<br>guidance                                  | <ul> <li>We will actively contribute to regional processes for<br/>the development of policy, standards and guidance.</li> <li>Our priorities include:</li> <li>ensuring that each of our reviews considers the<br/>implications of our findings for developing regional<br/>policy standards and guidance</li> </ul>  | <ul> <li>Documented evidence of RQIA's contribution to<br/>policy, standards and guidance on health and<br/>social care, locally and nationally, in relation to<br/>service delivery and practice (A)</li> </ul> |



# **3 Mental Health Order Oversight**

Delivering a programme of scrutiny and review in services provided to people with a mental illness or a learning disability

|     | By 2015 we will have:   | What we will do   | Measures of success  |
|-----|---|---|--|
| 3.1 | Provided optimal<br>safeguards for all<br>users of mental health<br>and learning disability<br>services | <ul> <li>We will undertake inspections and patient experience reviews to facilities where patients are detained under the Mental Health (Northern Ireland) Order 1986 using the human rights theme of protection.</li> <li>Our priorities include:</li> <li>monitoring the use of seclusion, observation policies and restrictive practices in mental health and learning disability facilities</li> <li>implementing the human rights approach to other areas including mental health and learning disability, children's services, prison health and social care and agencies</li> <li>agreeing joint areas of research with academic partners and others in order to ensure we continue to highlight our human rights based approach to our process for inspection and review</li> <li>reviewing the care and treatment of voluntary patients</li> </ul> | <ul> <li>100% of inspections of mental health and learning disability facilities against the human rights inspection theme of protection completed (Q)</li> <li>Evaluation of the implementation of the human rights approach initially in the following areas (A) (a) 1) mental health and learning disability <ol> <li>children's services</li> <li>prison health and social care</li> <li>agencies</li> <li>review activities</li> </ol> </li> <li>100% of prescribed forms of patients detained monitored for errors (Q)</li> <li>100% of all detected errors contained in detention forms notified to health and social care trusts within 72 hours (Q)</li> <li>100% of completion by providers of guardianship forms as part of the inspection process for analysis by the mental health and learning disability team (Q)</li> <li>Number of detained patients RQIA engaged with in places of detention (Q)</li> <li>Report provided on number of SAIs scrutinised by mental health and learning disability team (Q)</li> </ul> |

|     | By 2015 we will have:   | What we will do   | Measures of success  |
|-----|---|---|--|
| 3.2 | Ensured that all<br>review and inspection<br>activity drives service<br>improvement and is<br>communicated to<br>stakeholders | <ul> <li>We will provide verbal and written feedback to all relevant stakeholders in the form of inspection reports and quality improvement plans.</li> <li>Our priorities include:</li> <li>disseminating all our inspection reports and quality improvement plans to chief executives and managers of mental health and learning disability services</li> <li>scrutinising detention forms, highlighting errors and any improper detentions and reporting to the RQIA Board quarterly on the error rate for each trust</li> <li>monitoring and reviewing the accuracy, appropriateness and quality of guardianship documentation in both statutory and regulated sector services</li> <li>conducting a review of RQIA's responsibilities in respect of financial matters under the Mental Health (Northern Ireland) Order 1986, Article 116 annually and report on findings to the health and social care trusts and HSC Board</li> </ul> | <ul> <li>100% of planned inspections of establishments providing care and treatment to individuals with mental ill health and or learning disability completed by year-end (Q)</li> <li>100% analysis of inspection reports and returned quality improvement plans (Q)</li> <li>Scrutinise and follow up 100% of all trust returns of information relating to the protection of patient finance (Mental Health (Northern Ireland) Order 1986, Article 116) (Q)</li> <li>Number of completed mental health and learning disability reviews carried out in line with RQIA's Three-Year Review Programme 2012-15 (Q)</li> </ul> |



|     | By 2015 we will have:  | What we will do   | Measures of success   |
|-----|--|---|---|
| 3.2 | Ensured that all<br>review and inspection<br>activity drives service<br>improvement and is<br>communicated to<br>stakeholders<br>(continued) | <ul> <li>inspecting 25 inpatient facilities where patients are detained</li> <li>reporting on the full range of activities completed by RQIA as a national preventive mechanism</li> <li>continue to monitor serious adverse incidents in conjunction with the HSC Board and Public Health Agency</li> <li>publishing the findings and recommendations from the reviews and inspection reports of mental health and learning disability facilities</li> </ul> |   |
| 3.3 | Engaged effectively<br>in the development of<br>policy and emerging<br>legislation   | We will continue to provide feedback to DHSSPS in respect of the draft Mental Capacity (Health, Welfare and Finance) Bill.  | <ul> <li>Documented evidence of RQIA's contribution to policy, standards and guidance on health and social care locally and nationally (A)</li> <li>Key issues relevant to patients will be reflected in the new mental capacity legislation (A)</li> </ul> |

# 4 Engagement and Communications

Engaging and communicating effectively with our stakeholders

|     | By 2015 we will have:  | What we will do  | Measures of success   |
|-----|--|--|---|
| 4.1 | Embedded personal<br>and public<br>involvement (PPI) as a<br>fundamental part of all<br>of RQIA's work | <ul> <li>We will ensure that service users, carers and the public are actively involved in the planning and delivery of our work.</li> <li>Our priorities include:</li> <li>ensuring clear and meaningful engagement processes are in place</li> <li>involving service users, carers and the public in the planning and delivery of our work</li> <li>further developing partnerships with independent, voluntary and community groups to enhance our approach to regulation, review and protection and safeguarding</li> <li>monitoring and evaluating of all PPI activity, focusing on outcomes and future learning</li> </ul> | <ul> <li>Minimum of 90% of actions from RQIA PPI action<br/>plan successfully implemented within timescale (S)</li> </ul> |
|     |  | <ul> <li>further developing partnerships with independent, voluntary and community groups to enhance our approach to regulation, review and protection and safeguarding</li> <li>monitoring and evaluating of all PPI activity,</li> </ul>   |   |



| By 2015   | we will have: Wha  | t we will do   | Measures of success  |
|-----------|--|--|--|
| complex a | cation clear<br>to meet the staff<br>and varied<br>the Northern blic<br>• en<br>and<br>e<br>• g<br>R<br>th<br>p<br>• en<br>and<br>th<br>p<br>• en<br>and<br>th<br>th<br>th<br>th<br>th<br>th<br>th<br>th<br>th<br>th<br>th<br>th<br>th | will ensure that our vision and objectives are<br>dy, effectively and appropriately communicated to<br>and key stakeholders.<br>priorities include:<br>nsuring that RQIA communicates with a range of<br>udiences in a clear, consistent, professional and<br>ffective manner<br>aining understanding and recognition for<br>RQIA's role amongst our key stakeholders, so<br>nat they associate our services with quality and<br>rofessionalism<br>nsuring that all RQIA staff have access to relevant<br>nd timely information to allow them to carry out<br>heir work effectively<br>romoting the profile of RQIA at a local, national<br>nd international level in a way that ensures<br>nat key influencers are kept informed about<br>ne positive achievements and capabilities of<br>ne organisation in order to maximise its future<br>pportunities | <ul> <li>Minimum of 90% of actions successfully<br/>implemented within timescale from the<br/>communications strategy (S)</li> </ul> |

# **5** People

Developing and maintaining a competent, valued and motivated workforce

| By 2015 we will have:  | What we will do  | Measures of success  |
|--|--|--|
| Continued to ensure<br>that we have a<br>professionally<br>competent workforce<br>delivering on RQIA's<br>strategic objectives | <ul> <li>We will manage, support and develop our people through a range of human resources policies, processes and development initiatives, which are in line with employment legislation and best practice.</li> <li>Our priorities include:</li> <li>continuing to develop our staff through a range of learning and development initiatives linked to Continuing Professional Development (CPD) requirements and Knowledge and Skills Framework (KSF) outlines</li> <li>maintaining robust internal human resources processes for managing and supporting people in partnership with trade union side and the Business Services Organisation</li> <li>fully embedding KSF as part of the appraisal system within RQIA</li> <li>ensuring organisational readiness for new health and social care business systems and the transition to shared services</li> </ul> | <ul> <li>100% of staff with agreed personal development<br/>plan (PDP) by end of quarter 1 each year (S)</li> <li>95% of Agenda for Change (AFC) staff covered by<br/>a KSF outline (Q)</li> <li>Attainment of substantive compliance with the<br/>human resources controls assurance standard (A)</li> <li>Minimum of 90% of actions from RQIA Human<br/>Resources and Organisational Development<br/>Strategy 2012-15 successfully implemented within<br/>timescale (S)</li> </ul> |



|     | By 2015 we will have:   | What we will do  | Measures of success  |
|-----|---|--|--|
| 5.2 | Designed and<br>implemented a range<br>of organisational<br>development initiatives | <ul> <li>We will continue to improve organisational effectiveness and performance through planned and systematic organisational development activities, taking a holistic approach which involves the staff of RQIA.</li> <li>Our priorities include:</li> <li>achieving the core Investors in People standard</li> <li>developing and implementing a range of initiatives linked to the EFQM model</li> <li>implementing the RQIA Human Resources and Organisational Development Strategy 2012-15</li> <li>developing and implementing a range of engagement and wellbeing initiatives</li> </ul> | <ul> <li>Maintain sickness absence rate at or below 4.8% (Q)</li> <li>Minimum of 90% of organisational development actions successfully implemented within timescale (S)</li> <li>Attainment and retention of IiP accreditation (A)</li> </ul> |

# **6** Performance

Managing and monitoring corporate and financial performance to improve organisational effectiveness

|     | By 2015 we will have:   | What we will do   | Measures of success  |
|-----|---|---|--|
| 6.1 | Embedded a fully<br>integrated planning<br>and performance<br>management approach<br>to manage the<br>organisation more<br>effectively and efficiently<br>and promote continuous<br>improvement and<br>learning | <ul> <li>We will implement and embed RQIA's performance management framework in order to ensure an integrated approach to strategic planning and performance management, which supports learning and improvement.</li> <li>Our priorities include:</li> <li>implementing and continuously reviewing the corporate strategy</li> <li>developing and implementing annual business plans aligned to the corporate strategy</li> <li>reviewing annually measures of success</li> <li>implementing a range of approaches to ensure that organisational performance reporting</li> <li>benchmarking with other organisations involved in regulation and standard setting</li> <li>using a business excellence model (EFQM) to measure organisational effectiveness and ensure an integrated approach to quality improvement in RQIA.</li> </ul> | <ul> <li>Minimum of 90% of actions identified within the annual business plan successfully implemented within timescale (Q)</li> <li>100% of staff with personal objectives clearly linked to RQIA's strategic objectives by end of quarter 1 each year (S)</li> <li>100% of measures of success reported as being progressed within timescales (Q)</li> <li>Comparative benchmarking results with European regulators in key areas of performance (European Partnership of Supervisory Organizations (EPSO) engagement) (A)</li> <li>Minimum of 90% of actions successfully implemented within timescale from the sustainability development action plan (S)</li> <li>Level of recognition achieved in the Ireland Quality Awards linked to the EFQM business excellence model (A)</li> </ul> |



| By 2015 we will have:   | What we will do   | Measures of success   |
|---|---|---|
| 6.2 Aligned resources<br>to support RQIA's<br>strategic priorities and<br>maintained our financial<br>performance | <ul> <li>We will support RQIA's activities through the effective<br/>and efficient planning, management and control of its<br/>finances. In addition we will develop and implement<br/>effective systems, processes and services to improve<br/>the operation of the finance function.</li> <li>Our priorities include:</li> <li>maintaining and developing an effective system of<br/>internal control to satisfy accountability standards<br/>and internal or external reporting requirements</li> <li>embedding a robust and effective budgetary<br/>control system, including effective budget setting</li> <li>establishing clear internal communication<br/>processes</li> <li>developing transactional finance systems and<br/>processes to ensure compliance with DHSSPS<br/>standards and sound financial management<br/>principles</li> <li>revising, updating and documenting all finance<br/>policies and procedures</li> <li>advising, monitoring and reporting in relation to<br/>the delivery of the required efficiency savings</li> <li>ensuring organisational readiness for new health<br/>and social care business systems and the<br/>transition to shared services</li> </ul> | <ul> <li>Break even on income and expenditure</li> <li>Attainment of comprehensive spending review<br/>(CSR) efficiency savings through the delivery of the<br/>Improvement and Efficiency Plan (S)</li> <li>95% of invoices paid each month within terms and<br/>conditions (Q)</li> <li>100% of outstanding debt (30 days after the date<br/>which the fee is due) recovered within financial<br/>year (Q)</li> <li>Attainment of substantive compliance with the<br/>Financial Management Controls Assurance<br/>Standard (A)</li> </ul> |

# 7 Evidence

Underpinning our regulatory practice using research and available evidence

|     | Ву | y 2015 we will have:   | What we will do  | Measures of success   |
|-----|----|--|--|---|
| 7.1 | Er | mbedded an evidence<br>nd research based<br>ulture within RQIA | <ul> <li>We will design and implement actions to embed<br/>evidence based practice across all the functions<br/>of RQIA.</li> <li>Our priorities include:</li> <li>implementing an agreed action plan to ensure<br/>that relevant research and evidence informs our<br/>functions and that our staff have the training<br/>and skills required, increasing the contribution of<br/>RQIA to building the evidence base for effective</li> </ul> | <ul> <li>Measures of success</li> <li>Minimum of 90% of actions successfully<br/>implemented within the timescale from the action<br/>plan on research and use of evidence (S)</li> </ul> |
|     |    |  | <ul> <li>regulation of health and social care</li> <li>establishing effective collaboration for research<br/>with academic organisations and to share good<br/>practice with other regulators</li> </ul>   |   |

The **Regulation** and Quality Improvement Authority

# 8 Information

Managing information and ICT effectively

|     | By 2015 we will have:     | What we will do  | Measures of success   |
|-----|---------------------------|--|---|
| 3.1 | is managed effectively to | <ul> <li>The Information and Information Communication<br/>Technology (ICT) Strategy 2012-15 recognises that<br/>the effective management of information is critical to<br/>the delivery of RQIA's business priorities and aims<br/>to ensure that information is used to promote better<br/>decision-making.</li> <li>Our priorities include:</li> <li>implementing the new Corporate Information<br/>Management System (CIMS)</li> <li>improving RQIA's performance by: <ul> <li>ensuring the effective management of information<br/>including data quality, analysis and reporting</li> <li>improving access to accurate information to<br/>make better decisions at all levels</li> <li>developing better mechanisms for exchanging<br/>and sharing information in controlled ways to<br/>support operational activities</li> </ul> </li> </ul> | <ul> <li>Minimum of 90% of actions in the Information<br/>and ICT Strategy successfully implemented within<br/>timescale (S)</li> </ul> |

|     | By 2015 we will have:  | What we will do  | Measures of success   |
|-----|--|--|---|
| 8.2 | Complied with best<br>practice and the highest<br>standards of information<br>governance   | <ul> <li>We will ensure that we have the necessary policies, procedures, and systems in place to achieve a high level of compliance with information governance and records management standards.</li> <li>Our priorities include:</li> <li>implementing the Information Governance Action Plan</li> <li>developing and managing an information asset register</li> <li>implementing a suite of records management procedures</li> <li>ensuring compliance with relevant legislation and guidance</li> <li>effectively managing information risks</li> </ul> | <ul> <li>Minimum of 90% of actions in the Information<br/>Governance Action Plan successfully implemented<br/>within timescale (S)</li> <li>100% of subject access requests completed<br/>within 40 days (Q)</li> <li>Attainment of substantive compliance with<br/>the controls assurance standard in records<br/>management (A)</li> <li>100% of freedom of information (FOI) requests<br/>responded to within 20 working days (Q)</li> </ul> |
| 8.3 | Continued to provide an<br>ICT environment that is<br>user focused and able<br>to respond effectively<br>and efficiently to RQIA's<br>changing business<br>needs in order to<br>support the organisation<br>in meeting its statutory<br>requirements | <ul> <li>We will take a holistic approach to the delivery of the best possible ICT environment which is flexible, robust, responsive, accessible, available and secure.</li> <li>Our priorities include:</li> <li>implementing the ICT initiatives within the Information and ICT Strategy 2012-15</li> <li>establishing a replacement ICT service by September 2012</li> <li>ensuring an appropriate and consistent investment in a robust ICT infrastructure through the annual capital investment plan</li> </ul>   | <ul> <li>Minimum of 90% of ICT actions successfully implemented within timescale from the Information and ICT Strategy (S)</li> <li>Attainment of substantive compliance with the ICT Controls Assurance Standard (A)</li> <li>Increase effectiveness level of RQIA's ICT service to 70% by 2015 (Good to Excellent as per staff satisfaction survey) (A)</li> </ul>  |

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

## **9** Governance

Maintaining and promoting a robust governance<sup>6</sup> and accountability framework

|  |     | By 2015 we will have:  | What we will do   | Measures of success  |
|--|-----|--|---|--|
| <sup>6</sup> Governance is the<br>system by which<br>an organisation<br>is directed and<br>controlled, at its<br>most senior levels,<br>in order to achieve<br>its objectives<br>and meet the<br>necessary<br>standards of<br>accountability,<br>probity and | 9.1 | Complied with legislative<br>requirements and best<br>practice in relation<br>to governance, risk<br>management and<br>independent assurance | <ul> <li>We will ensure that we have in place an adequate system of internal control and embedded a robust system of risk management.</li> <li>Our priorities include:</li> <li>implementing and reviewing RQIA's Risk Management Strategy</li> <li>maintaining the Corporate Risk Assurance Framework Report and directorate risk registers</li> <li>ensuring the continued attainment of substantive compliance with relevant controls assurance standards</li> <li>implementing a programme of audits and recommendations for improvement</li> <li>promoting equality through the implementation of RQIA's Equality Scheme</li> <li>maintaining procedures for the effective management of complaints and dissemination of lessons learned</li> <li>annual testing and review of our business continuity plan</li> </ul> | <ul> <li>Attainment of substantive compliance with the Governance and Risk Management Controls Assurance Standards (A)</li> <li>Attainment of substantive compliance with the remaining controls assurance standards (A)</li> <li>Minimum of 90% of actions successfully implemented within agreed timescales from Equality Scheme Action Plan (S)</li> <li>100% of complaints received about RQIA addressed within the provision of the RQIA Complaints Policy and Procedure (Q)</li> <li>Report on lessons learned in relation to complaints against RQIA and action taken to disseminate this to staff (Q)</li> <li>Minimum of 90% of audit recommendations successfully implemented within agreed timescale (S)</li> </ul> |
| openness.  |     |  |   |  |

# Delivering the Strategy and Managing Performance

It is important that appropriate governance and accountability arrangements are in place in order to ensure that the strategy is effectively delivered. Furthermore, the successful delivery of the strategy is dependent on continuing to engage with key stakeholders, maintaining robust performance management and reporting processes, recruiting and retaining a skilled and dedicated workforce and the availability of adequate funding.

#### Governance and Accountability

The Board sets the strategic direction for RQIA through the development of the corporate strategy and promotes a culture of performance and improvement within RQIA. RQIA's chief executive is accountable to the Board and has a primary leadership role and overall responsibility for the delivery of strategic objectives, governance and performance management.

<sup>7</sup> The Management Statement and Financial Memorandum is available on the RQIA's website. The Management Statement, Financial Memorandum<sup>7</sup> between RQIA and DHSSPS sets out the broad framework within which RQIA operates, including how it will be held to account for its performance. RQIA's accountability to its sponsor branch, DHSSPS Safety, Quality and Standards (SQS) is managed through a biannual accountability review meeting; an end of year review meeting between RQIA's chairman and the minister (and as required RQIA's chief executive and the director of SQS); and regular update meetings.

#### **Performance Management**

Reporting of performance by RQIA's Executive Management Team (EMT) to the Board consists of: quarterly reporting of progress made in delivering corporate objectives; bimonthly reporting of financial performance; and the production of an annual report, incorporating final accounts. Furthermore, RQIA is required to submit a monthly financial monitoring return to DHSSPS.

Risk management is the process by which risks and the activities required to control exposure to risks which may impact on the achievement of objectives, are identified and managed. Risk management is embedded within the daily operation of RQIA from strategy formulation through to business planning and processes.



#### Resources

In order to successfully deliver the priorities identified in the strategy, we will require sufficient resources to carry out our work. We will use these resources as effectively and efficiently as possible.

RQIA's primary source of income is the annual revenue allocation from DHSSPS. RQIA recognises that all public sector bodies are operating in a challenging financial environment. However, the delivery of our strategic objectives is dependent on securing the appropriate level of funding. In addition, any developments over the three years of the strategy will need to be sufficiently resourced to ensure successful delivery.

RQIA's other source of income is fees charged to providers. This income contributes to the costs of regulating establishments registered with RQIA.

Delivering RQIA's vision and strategic objectives relies on staff with the right skills, experience and values. In addition, we must create a culture in which staff are enabled, empowered and expected to do the best they can at all times. If there is a shortfall in staffing or financial resources, the implementation of this strategy will be adjusted accordingly. The impact of this will be carefully assessed. Any changes to the corporate strategy will be agreed with the Board and discussed in detail with RQIA's sponsor branch.

#### Engagement

RQIA is committed to ensuring that participation, engagement and partnership approaches are at the heart of what we do, and underpin the delivery of the corporate strategy.

# Appendix A Glossary

| Agenda for Change (AfC)          | The AfC system allocates posts to set pay bands, harmonises terms and conditions of service and links pay and career progression through the use of the Knowledge and Skills Framework.                    |
|----------------------------------|--|
| Benchmarking                     | The process of comparing an organisation's costs and performance with other similar organisations.   |
| Better Regulation Commission     | The Better Regulation Commission, which operated until January 2008, worked with policy-makers to reduce unnecessary regulatory and administrative burdens.  |
| Break even                       | The point at which revenues are equal to expenses.   |
| Business Continuity Plan         | Business continuity plans are developed to ensure an organisation can maintain business as usual in the event of a crisis or emergency situation.  |
| Business Plan                    | A document produced annually setting out the actions necessary and resources available to the organisation to deliver the overall corporate strategy.  |
| Complaints Policy and Procedures | This sets out the mechanism for complaints about RQIA to be addressed<br>in a timely and effective manner. It provides a framework for RQIA to learn<br>from complaints and to improve as an organisation. |
| Controls Assurance Standard      | A suite of standards developed by DHSSPS against which each HSC organisation assesses itself in order to improve governance and risk management procedures.  |
| Core Activities                  | The key activities an organisation must excel at in order to deliver its mission.  |
| Corporate Risk Assurance Report  | The process by which risks, mitigating actions and assurances on controls are reported to the Board in order to improve the effectiveness of the organisation's systems of internal control.               |



| Corporate Strategy                        | This outlines what the organisation is going to do to fulfil its purpose, achieve its mission and goals and abide by its values. A guide to action.   |
|---|---|
| Detained Patients                         | Those patients who have been assessed by a medical doctor as meeting the criteria for detention for assessment and /or treatment under the Mental Health (NI) Order 1986.   |
| Enforcement                               | Where necessary, RQIA may take enforcement action to drive improvements.<br>This includes the issue of notices of failure to comply with regulations; placing<br>conditions on registration; prosecution; or cancelling the registration of a service.  |
| Equality Scheme                           | Sets out the actions the organisation has taken or intends to take in relation to equality, as required by Section 75 and Schedule 9 to the Northern Ireland Act 1998.  |
| European Union Services Directive         | This directive makes it easier for service businesses to set up or sell their services anywhere in Europe.  |
| European Working Time Directive<br>(EWTD) | The European Working Time Directive is a directive from the Council of Europe (93/104/EC) to protect the health and safety of workers in the European Union. It lays down minimum requirements in relation to working hours, rest periods, annual leave and working arrangements for night workers. |
| Executive Management Team<br>(EMT)        | RQIA's Executive Management Team consisting of the chief executive and directors.   |
| Freedom of Information (FOI)              | The FOI Act 2000 makes provision for the disclosure of information held by public authorities or by persons providing services for them.  |
| Governance                                | The system by which an organisation is directed and controlled, at its most senior levels, in order to achieve its objectives and meet the necessary standards of accountability, probity and openness.   |

| Guardianship<br>The Health and Personal Social<br>Services (Quality, Improvement and<br>Regulation) Northern Ireland) Order<br>2003 | The purpose of guardianship is primarily to ensure the welfare (rather than the medical treatment) of a patient in a community setting where this cannot be achieved without the use of some or all of the powers vested by guardianship. It provides a less restrictive means of offering assistance to a person and should be considered as an alternative to detention in hospital. It enables the establishment of an authoritative framework for working with a patient with a minimum of constraint to help him/her achieve as independent a life as possible within the community. The legislation under which RQIA was established. |
|---|---|
| Health and Social Care (Reform) Act<br>NI 2009  | The Act came into operation in April 2009. It restructured the provision of health and social care and amended the Health and Personal Social Services (Northern Ireland) Order 1972. This included the transfer of the functions of the Mental Health Commission to RQIA.  |
| HSC   | Health and social care.   |
| HSC Board   | A statutory organisation responsible for commissioning health and social care services for the population of Northern Ireland.  |
| HSC Trust   | A statutory organisation providing community and acute health and social care services to patients and clients.   |



| Human Rights Act 1998   | The Human Rights Act 1998 is an act of the Westminster Parliament which<br>makes the European Convention on Human Rights part of the law of all parts<br>of the United Kingdom. It allows individuals and organisations to go to court, or<br>to a tribunal to seek a remedy if they believe that the rights conferred on them<br>by the European Convention have been violated by a public authority.   |
|---|--|
| Infection Prevention and Hygiene<br>Inspection  | A three-year rolling programme of announced and unannounced<br>inspections in acute and non-acute hospitals in Northern Ireland, developed<br>to assess compliance with the DHSSPS Regional Healthcare Hygiene and<br>Cleanliness Standards. The inspections focus on environment and equipment<br>cleaning, infection prevention and control, clinical practice and the fabric of the<br>environment and facilities. The announced inspection process also<br>reviews governance arrangements and systems in place to ensure hygiene and<br>infection prevention and control policies and procedures are working in practice. |
| Information Asset Register  | A register listing all unpublished information holdings which may be of public interest. Under the FOI Act this means it is not referred to in our publication scheme.   |
| Information Governance  | The term used to describe the principles, processes, legal and ethical responsibilities for managing and handling information.   |
| Investors in People (liP)   | liP is a performance improvement standard designed to show an organisation is committed to improving its own performance through developing its people.  |
| Ionising Radiation (Medical<br>Exposure) Regulations (Northern<br>Ireland) 2000 (IR(ME)R) | RQIA is responsible for monitoring, inspecting and enforcing the lonising<br>Radiation (Medical Exposure) Regulations (Northern Ireland) 2000 to<br>protect service users against the dangers of ionising radiation in medical<br>settings.  |

| Key Enablers   | Value-adding activities or functions performed within the organisation that provide support and enable the delivery of the core activities and the organisation's overall mission.  |  |
|--|---|--|
| Knowledge and Skills<br>Framework (KSF)  | kills KSF is a tool to identify the knowledge, skills and development that staff need t do their job and is an integral part of staff appraisal and development.  |  |
| Measures of Success  | Qualitative and quantitative data that helps the organisation to gain insights, make better-informed decisions and improve performance.   |  |
| Mental Capacity (Health, Welfare and Finance) Bill   | In September 2009 the Minister of Health, Social Services and Public Safety announced his intention of preparing a single bill encompassing mental capacity and mental health provisions.   |  |
| Mental Health Order (Northern<br>Ireland) 1986   | Legislation covering the assessment, treatment and rights of people with a mental health condition.   |  |
| Mission  | A statement that describes the primary purpose and reason for the organisation's existence.   |  |
| National Preventive Mechanism<br>(NPM under the Optional Protocol<br>to the Convention against Torture<br>(OPCAT)) | RQIA is designated as a national preventive mechanism (NPM) under the<br>Optional Protocol to the Convention against Torture and other Cruel,<br>Inhuman or Degrading Treatment or Punishment (OPCAT), an international<br>human rights treaty designed to strengthen protection for people<br>deprived of their liberty. OPCAT requires NPMs to carry out visits to places of<br>detention, to monitor the treatment of and conditions for detainees and to make<br>recommendations regarding the prevention of ill-treatment. |  |
| Personal and Public Involvement<br>(PPI)   | PPI means putting patients, clients and carers at the centre of all that the HSC does. This includes engagement, active participation and partnership working to help shape how RQIA works.   |  |



| Places of Detention        | Places of detention may include any hospital. In practice, admissions and detentions will only take place at psychiatric or learning disability hospitals or those general hospitals which have psychiatric or learning disability units.  |  |
|----------------------------|--|--|
| Public Health Agency (PHA) | The regional statutory organisation for health protection and health and social wellbeing improvement.   |  |
| Quality Improvement Plan   | Following an inspection we ask the service provider to make any changes<br>we consider necessary through a quality improvement plan. We publish this<br>information in reports of our findings, available on our website www.rqia.org.uk.  |  |
| Regulated Services         | Health and social care services defined and listed in The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 that are subject to registration and inspection by RQIA.   |  |
| Regulation Programme       | RQIA registers and inspects a wide range of health and social care services.<br>These include: nursing homes; residential care homes; children's homes; day<br>care settings; independent health care providers; adult placement agencies;<br>domiciliary care agencies; nursing agencies; residential family centres; voluntary<br>adoption agencies; and school boarding departments. RQIA inspects nursing,<br>residential care and children's homes at least twice a year, while other services<br>are inspected at least once a year. During our announced and unannounced<br>inspections we assess the quality of the services provided against minimum<br>care standards. |  |

| Review Programme    | RQIA reviews a wide range of services across health and social care. Our review programme takes into consideration relevant standards and guidelines, the views of the public, health care experts and current research. During our reviews we examine the service provided, highlight areas of good practice and make recommendations for improvement to the service provider. We report our findings and share any lessons learned across the wider health and social care sector. In addition, when required we carry out reviews and investigations to respond to specific issues of concern or failures in service provision. Full details are published in RQIA's Three-Year Review Programme 2012-15. |
|---------------------|--|
| Risk Register       | A way of monitoring any issues or challenges which may cause problems.<br>A risk register also identifies how the risk will be minimised.  |
| RQIA Board          | RQIA's Board consists of a Chairman and up to 12 members. It is responsible for the strategic direction, financial stewardship, governance and overall performance of RQIA.  |
| Service Framework   | Guidance that defines evidence-based standards and good practice in a care area, disease group or for a patient/client group.  |
| Stakeholder         | Any individual, group or organisation that can affect, be affected by, or perceive itself to be affected by, the activities of RQIA.   |
| Strategic Objective | Statement of specific aim or goal to be achieved for each core activity or key enabler.  |
| Vision              | A statement that describes what an organisation wants to become and achieve in the future.   |
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The Regulation and Quality Improvement Authority 9th Floor Riverside Tower Lanyon Place BELFAST BT1 3BT

Tel: (028) 9051 7500 Fax: (028) 9051 7501 Email: info@rqia.org.uk Web: www.rqia.org.uk