

# RQIA Corporate Performance Report

Quarter 3 - October to December 2017



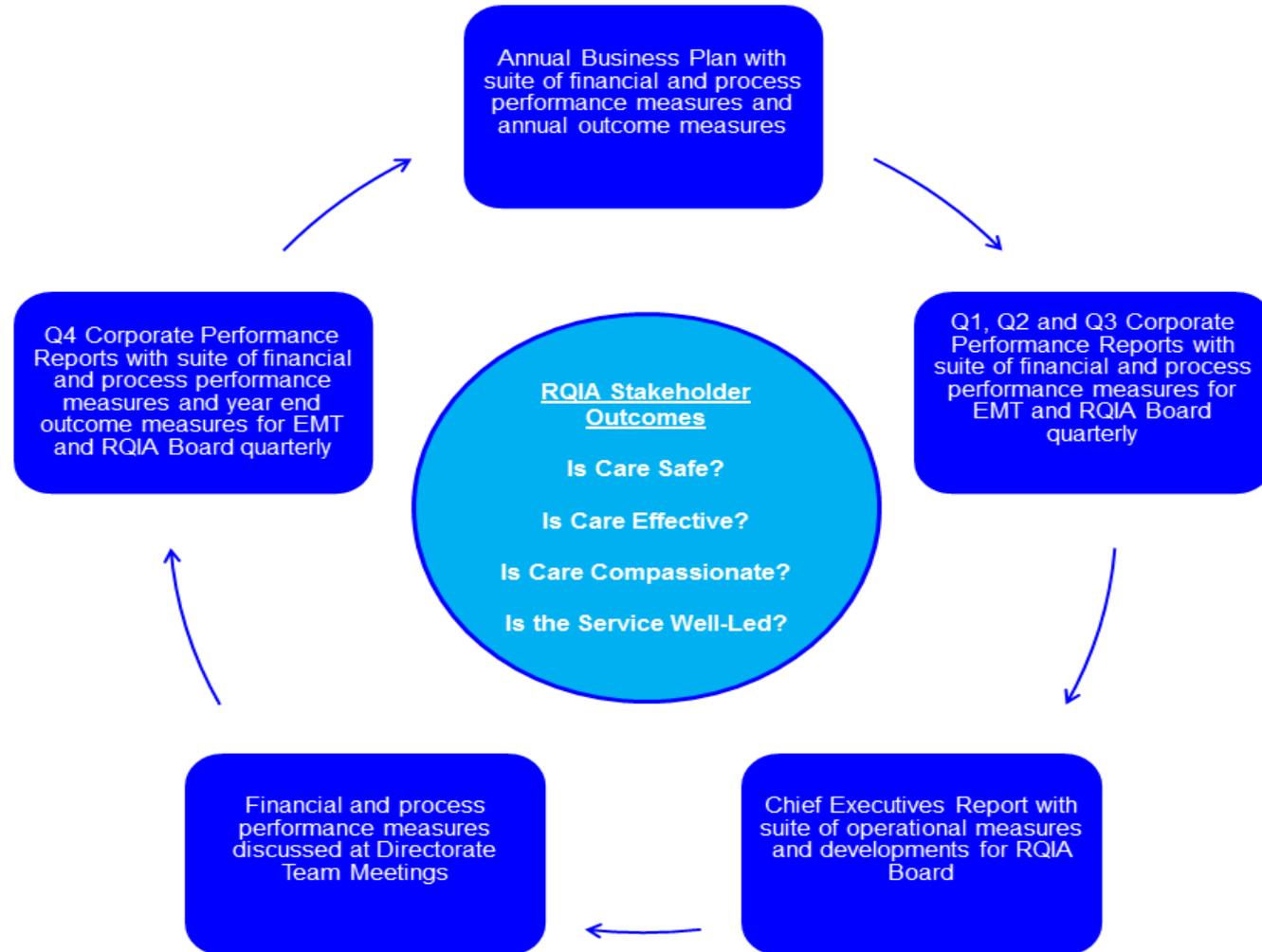
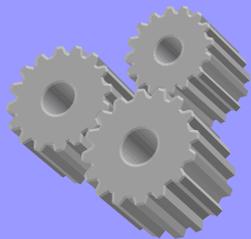
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# Introduction

The purpose of the Corporate Performance Report is to provide evidence to the RQIA Board on how well RQIA is delivering the actions identified within the annual Business Plan, linked to its strategic themes and priorities as described in the Corporate Strategy 2017-21.

RQIA's Strategic Map as detailed in [page 19](#) is a visual representation on one page creating an integrated and coherent picture of the organisation's forward strategy.



This cycle illustrates how we intend to manage and report the progress of the RQIA measures at Directorate, Executive Management Team (EMT) and Board level. The Q1 - Q3 Corporate Performance Reports will cover all the financial and process performance measures. In Q4 the Board will receive a comprehensive operational and strategic performance report which incorporates a suite of outcome measures which are incorporated in the RQIA Business Plan 2017-18. Additionally these measures will be progressed at monthly team meetings throughout the directorates and through the EMT.

# Traffic Light Rating System

The Traffic Light Rating System is an indication of the level of confidence that Actions identified in the Business Plan will be delivered by the completion date.

R

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.

A

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.

G

Action forecast to be completed by the completion date.

B

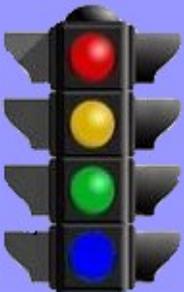
Action completed.

Red

Amber

Green

Blue



# Headline Achievements

## Strategic Theme 1: Encourage quality improvement in health and social care services

- 99% of all planned inspection activity is completed on target
- Audit of the Use of Mid-Urethral Tapes for Stress Urinary Incontinence in Northern Ireland completed

## Strategic Theme 2: Use sources of information effectively

- Hosted a Dementia Conference at Mossley Mill in Quarter 3, involving carers and key stakeholders from each of the 5 HSC Trusts
- MHLID Information System Outline Business Case was approved by DoH



## Strategic Theme 3: Engage and involve service users

- RQIA website received around 36,000 individual visits by the end of Quarter 3 which is a 33% increase from the same period of 2016-17
- 31 inspections have been carried out with lay assessor involvement
- 100% of service providers have signed up to exchange draft reports and QIPs in Quarter 3
- Announced joint Criminal Justice Inspection, Education Training Inspectorate and RQIA inspection of Woodlands Youth Agency completed in Quarter 3

## Strategic Theme 4: Deliver operational excellence

- RQIA successfully achieved Investors in People (IiP) accreditation using the new standard 'Generation 6'
- Achieved ISO9001:2015 certification
- RQIA Savings Plan 2017-18 was approved by the Board in September 2017

### Traffic Light Ratings Quarter 3



**0 (0%)**

**0 (0%)**

**19 (95%)**

**1 (5%)**

### Actions that require exception reports are detailed below:

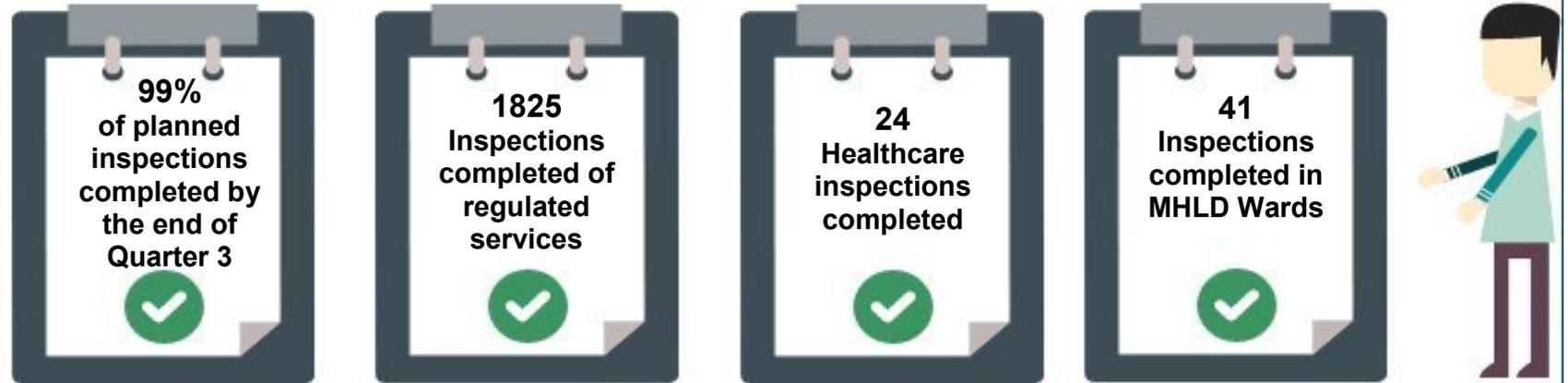
No actions required exception reports in Quarter 3

# Strategic Theme 1 - Encourage quality improvement in health and social care services

## Action 1.1

Complete the planned programme of activity for 2017/18 in respect of registration, inspection, reviews and audits

### Number of Inspections completed versus planned (Cumulative Quarter 3)



The Magilligan inspection report published in Quarter 3 highlighted the positive prisoner rehabilitation and progress made of the facility since the last inspection. The Inspection team also welcomed the innovative work undertaken to improve provision for disabled and older prisoners and improvements in relation to health care of prisoners.



RQIA's Children's Team have been engaged in improvement activity with trusts. One such piece of work has focused on reflective learning for both organisations on an episode of enforcement action. This piece of work has resulted in a review of monthly monitoring reports, which has been piloted by a Trust. This has led to major improvements in the effectiveness of the governance practices in relation to the operation of children's homes.



An environmental audit tool has been created to ensure all environment issues are addressed in a timely manner. Significant work has been undertaken by a number of Trusts to address the ligature points across a number of wards throughout NI. There is good evidence of support to patients to promote their recovery and re-integration into the community.



In MHLD areas of good practice was found in relation to the completion of patients' comprehensive risk assessments. There was evidence that all assessments had been transferred onto the patient electronic recording system (PARIS) and there was evidence that these had been completed with patient and carer involvement.

# Strategic Theme 1 - Encourage quality improvement in health and social care services

## Action 1.1

Complete the planned programme of activity for 2017/18 in respect of registration, inspection, reviews and audits

### Guidelines and Audit

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The regional report on the Audit of the Use of Mid-Urethral Tapes for Stress Urinary Incontinence in Northern Ireland is complete. The report is currently with the legal team regarding Declaration of Interests.

**Recommendations** Our audit included four recommendations which addressed:



- Consent
- Designation of surgeon and location of surgery
- Involvement in National Audits
- Review of OPCS4 codes
- Long-term outcome audit

### Reviews

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Quarter 3 saw the commencement of the one year revised review programme, with 3 reviews initiating:

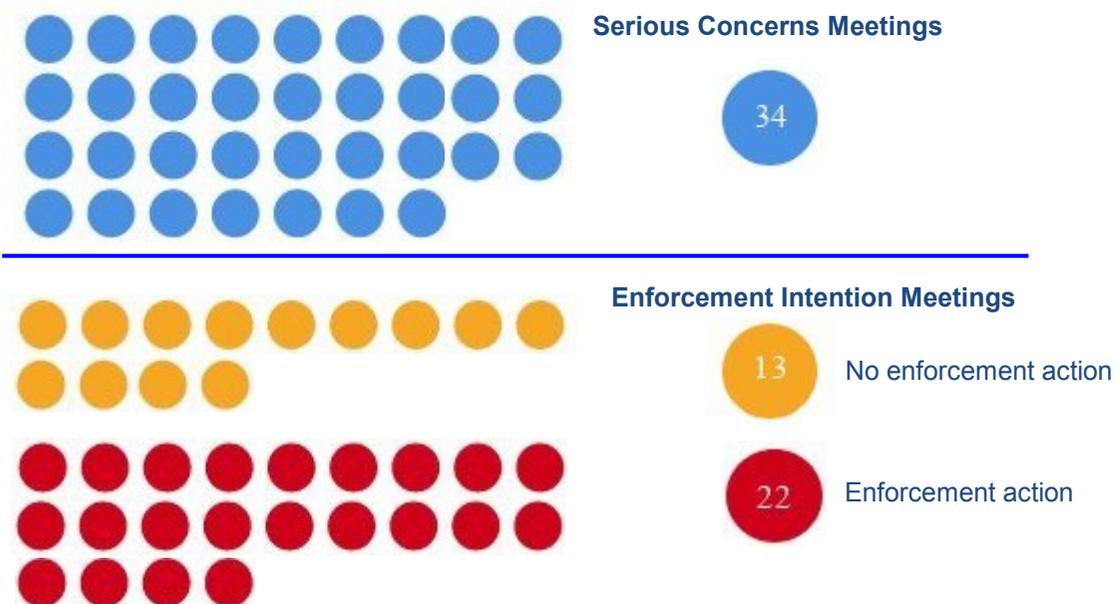
- Review of the Out-of-Hours General Practitioner (GP) Service (RQIA Initiated)
- Review of Service Frameworks (DoH Commissioned)
- Review of the Implementation of NICE Clinical Guideline 174 (NG174) – Intravenous Fluid Therapy in Adults in Hospital (DoH Commissioned)

# Strategic Theme 1 - Encourage quality improvement in health and social care services

## Action 1.1

Complete the planned programme of activity for 2017/18 in respect of registration, inspection, reviews and audits

### Enforcement Activity (Cumulative Quarter 3)



During Q1 – Q3, 34 serious concerns meetings took place to highlight RQIA's concerns about areas of potential noncompliance, and to discuss actions required to address these concerns. These meetings did not result in enforcement action.

During this period, RQIA held 35 enforcement intention meetings (including intention meetings to issue improvement notices, notices of failure to comply with regulations (FTC), or to consider moving to place conditions of registration on a service). These resulted in formal enforcement action against 14 services, comprising: 15 FTCs; 3 notices of proposal; 1 notice of decision; and 3 conditions of registration. Breaches in regulations identified related to: care; quality monitoring; management, staffing and recruitment issues; estates issues including fire safety and hygiene; and resident's finance. RQIA also issued 4 improvement notices to NI Ambulance Service in respect of infection prevention/control and governance in respect of two ambulance stations.

In August 2017, a service was closed as a result of RQIA making an application to a magistrate for an urgent closure order, following the identification of a significant number of regulation breaches.

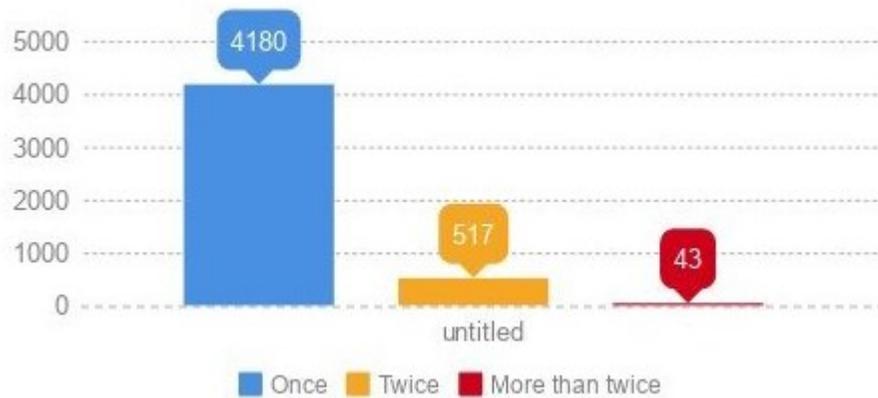
In 13 cases the meetings did not result in formal enforcement action as the management of the service provided RQIA with assurance through comprehensive action plans to address the concerns identified. These action plans are monitored through RQIA's ongoing regulatory activities, and where further breaches are identified enforcement action may take place.

# Strategic Theme 1 - Encourage quality improvement in health and social care services

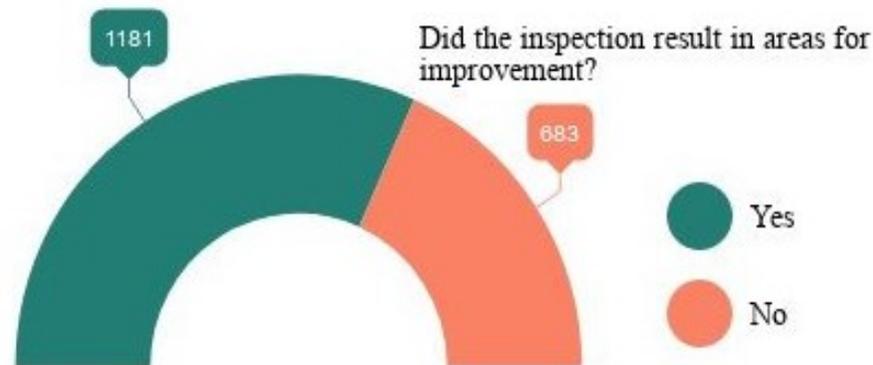
## Action 1.1

Complete the planned programme of activity for 2017/18 in respect of registration, inspection, reviews and audits

### Number and percentage of areas for improvement stated once and restated on further occasions (Cumulative Quarter 3)



The number of areas for improvement (Regulation and Nursing and MHL D) stated once in Quarter 3 increased by 1339 bringing the cumulative total to 4,180. The number of areas for improvement stated twice in Quarter 3 was higher than in Quarter 2 at 175 bringing to the cumulative total to 517. The number of areas for improvement stated more than twice in Quarter 3 was however lower than in Quarter 2 at 8 bringing the cumulative total to 43.



The number of inspections which resulted in no areas for improvement (Regulation and Nursing and MHL D) increased in Quarter 3 by 234 bringing the cumulative total to 683.

# Strategic Theme 1 - Encourage quality improvement in health and social care services

## Action 1.1

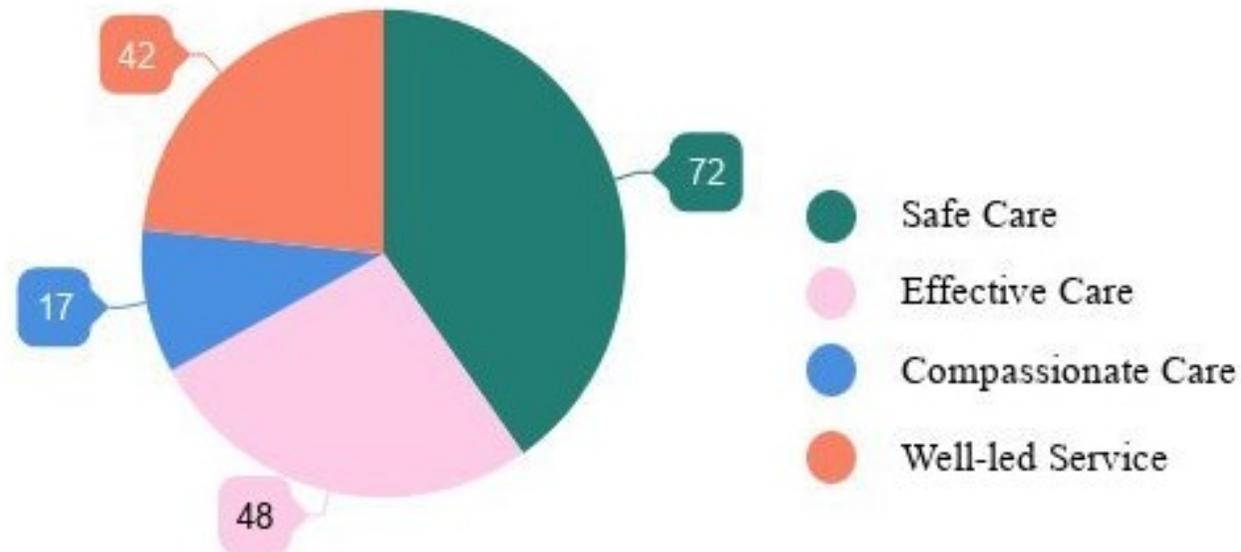
Complete the planned programme of activity for 2017/18 in respect of registration, inspection, reviews and audits

### Brag Rating

G

Action on target

### Number of areas for improvement identified within each of the domains of safe, effective, compassionate care and well led service (Cumulative Quarter 3)



179 areas for improvement were identified by the MHLD by the end of Quarter 3, with 40% (72) against the 'Safe' domain

Under the 'Safe Care' Domain, inspectors identified a range of areas which required improvement including:

- Reduced staffing levels and non-adherence to Trust policy on enhanced observations
- Concerns were about the timely sharing of information in relation to admissions and discharges from two wards
- Lack of progress in implementing areas for improvement for example risk assessments

# Strategic Theme 1 - Encourage quality improvement in health and social care services

## Action 1.2

Review and evaluate the evidence for an inspection assessment framework in facilitating improvement

### Submission of a proposal to the RQIA Board based on the findings of the review and agreement of a way forward for the inspection methodology

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Partnership work with Queen's University, Belfast (QUB) continued with completion of a 'mapping exercise' to chart, categorise, and define the range of components used in inspection systems. Inspection component themes have been mapped to three core elements of Director, Detector and Effector in effecting change / improvement.

The systematic review then utilised the findings from the mapping exercise to update key research from the Health Foundation in order to appraise the effectiveness of inspection systems (and their various components) for improving quality of care outcomes in health and social care.

The systematic review was presented to the Project Board on 18 October 2017.

Findings from the project will be used to inform RQIA's inspection framework in the future, aligned to the new organisational structure, as well as other ongoing initiatives such as the review of the 2003 Order and the Fees and Frequencies Project.

Brag Rating



Action on target

# Strategic Theme 1 - Encourage quality improvement in health and social care services

## Action 1.3

Develop proposals for the Review Programme post-2018

### Develop proposals for the Review Programme post-2018

Development of a shadow programme of reviews, audits and guidelines for the time period from September 2018 to September 2019 has commenced.

The following themes are being considered for inclusion:

- End of Life / Do Not Attempt Resuscitation (Adult and Children's Services): DoH Commissioned
- Deteriorating Patients (Across services / settings): DoH Commissioned

As part of RQIA's Communications and Engagement Strategy, RQIA will provide opportunities for stakeholders, including service users and the general public to inform and input into the design of the Review Programme from 2018 onwards.

Brag Rating



Action on target

# Strategic Theme 1 - Encourage quality improvement in health and social care services

## Action 1.4

Develop a template report to enable the publication of an annual summary of the quality of services inspected, reviewed and audited by RQIA (the first report will be produced in relation to 2017-18)

### Approval of a report template and methodology by the RQIA Board and the Department

A meeting was held in June between Chief Executive, Medical Director and communications team, to commence work on the approach and outline format for this summary report.

The approach and format employed by other regulators was also sourced and reviewed.

The first annual quality summary report will be produced Quarter 1 2018-19 (end of June 2018) and will relate to the quality of services inspected, reviewed and audited during 2017-18.

A summary report template will be agreed by the end of March 2017-18.

#### Brag Rating



Action on target

# Strategic Theme 1 - Encourage quality improvement in health and social care services

## Action 1.5

Provide advice and guidance to service providers on quality improvement systems

### Number of service providers who state that their quality improvement systems have been strengthened as a result of our interventions

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In Quarter 2, the Executive Management Team approved the impact questions to be used in the service provider post inspection questionnaire. The effect of RQIA's interventions will be captured through common impact questions.

Follow-up with the service provider will happen between 6 - 8 weeks following the inspection.

A change request was made in Quarter 3 to amend iConnect to record the impact questions. It is anticipated that the new impact questions will commence in Quarter 1 2018-19.



#### Questions

**Impact questions included in the service provider post questionnaire are based around two areas of improvement:**

As a result of your RQIA inspection, have you made changes to the service to date which you expect to lead to improvements?

As a result of your RQIA inspection, have you planned any further changes to the service which you expect to lead to improvements?

#### Brag Rating

G

Action on target

# Strategic Theme 1 - Encourage quality improvement in health and social care services

## Action 1.6

Participate as an active partner in the design and development of an Improvement Institute / System for Northern Ireland

### Summary of RQIA's participation in the Improvement Institute for Northern Ireland and the deliverables from the work of the Institute

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RQIA is a member of the Critical Friends Group which was established to critically challenge and provide senior guidance and governance oversight to the design process of improvement.

RQIA's Medical Director participated in meetings of the Design Collaborative progressing work of the Improvement Institute/System.

A series of learning conversations with improvement experts in UK and Ireland, hosted by RQIA's Medical Director, continued during Quarter 3. The key themes arising were presented at a workshop in Quarter3.

The need for a collaborative and seamless approach for quality improvement and innovation across HSC in NI has been reiterated through a number of strategic reports, most recently the Bengoa Report.

We have continued to participate in work addressing a regional improvement system. Two HSC staff have been seconded (from NI Ambulance Service and South Eastern Trust) to work half-time on development of system infrastructure throughout 2017/18. Work is currently progressing on a draft paper for the Transformation Implementation Group (TIG) Department of Health meeting to be held in March, which will set out the main components of the 'improvement system' across the region.



The two secondees (acting as Project Manages) are currently completing a series of semi-structured interviews with key stakeholders across the region, to inform the paper for TIG. The general/outline structure currently envisaged for the improvement system includes – a leadership alliance (to provide oversight and drive), a regional hub with a range of important functions (develop QI capacity, support scale and spread, be a repository of best practice, promote and develop collective leadership, assess improvement offers available across the region/through Trusts and or ALBs, co-ordination and support to innovation, progress learning emerging through SAI reviews, co-ordination of spokes/system offers to the regional infrastructure) and spokes comprising the groups and HSC staff working on improvement and QI across HSC organisations. Both secondees are expected to return to their substantive posts from 1 April 2018, feedback is awaited following discussion by TIG members.

### Brag Rating

G

Action on target

# Strategic Theme 1 - Encourage quality improvement in health and social care services

## Action 1.7

Produce a proposal for the consideration by the RQIA Board regarding the independent evaluation of the Hospital Inspection programme

### Proposal to RQIA Board Produced

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An independent external review of the Hospital Inspection Programme was carried out by an EFQM assessor in 2016. This review evaluated the systems and process used as part of the inspection process.

It was agreed during the RQIA Board meeting on 6 July 2017 that a further external review was not required at this time.

Brag Rating



Action Implemented

# Strategic Theme 2 - Use sources of information effectively

## Action 2.1

Develop and implement an Intelligence Action Plan 2018/19

### Number of actions fully implemented in the Information Action Plan by target

Arising from our review of Intelligence and information systems that there was clear potential to increase the use of clearly defined and targeted analysis to inform the work of the RQIA.

In response we have developed an Information Action Plan incorporating 30 actions.

Sixteen actions have been successfully implemented including :

Produced first control charts monitoring service risk indicators which will be presented to EMT in Q4



Built and tested new Web portal Modules (PIQs, Children's Monitoring Returns)



Increased update and usage of the RQIA web portal



Brag Rating

G

Action on target

# Strategic Theme 2 - Use sources of information effectively

## Action 2.2

Foster strategic alliances with other system regulators and improvement bodies both regionally and nationally

### Brag Rating



Action on target

### Number of information sharing agreements and Memorandums of Understanding

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MoU activity for Quarters 1 - 3 includes:

- Northern Ireland Public Services Ombudsman MoU was signed off
- The HSC Honest Broker Service MOU was signed off
- A review and revision of the General Dental Council was initiated
- National Medical Council MoU has been signed off

### Number of collaborations with system regulators and improvement bodies undertaken

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In Quarter 3 RQIA was involved in the following events:

- Meeting with British Dental Association to discuss issues around AccessNI
- Hosted a Dementia Conference at Mossley Mill.
- Attendance at the General Medical Council, Medical Education Engagement Day
- Meeting at the Innovation Lab attended by all members of EMT and relevant staff
- Meeting with Brian Taylor, University of Ulster in relation to developing a risk matrix for inspections.
- Participated in the Medical Leaders Forum
- Meeting with the Cedar Foundation
- Hosted a workshop for senior managers in the Belfast Trust to explore and clarify the regulations governing Children's Homes
- Presented on 'Prescribed Forms - Achieving Best Practice' at the Royal College Of Psychiatrists in Northern Ireland training day
- Announced joint Criminal Justice Inspection, Education Training Inspectorate and RQIA inspection of Woodlands Youth Agency completed

# Strategic Theme 2 - Use sources of information effectively

## Action 2.3

Review and revise RQIA's Inspection Planning Tool (IPT) in the context of changes in Fees and Frequency of Inspection Regulations

### Brag Rating

G

Action on target

### % of Inspection Planning Tool (IPT) project milestones achieved

We are preparing to respond to the publication of revised Fees and Frequency of Inspection regulations which will make changes to fee structure and to the statutory minimum number of inspections. To-date all milestones are on target including:



We are currently working to develop an inspection planning and risk response tool that will afford us a revised risk assessment framework.



We have identified an expert resource of Professor Brian Taylor from University of Ulster whose area of expertise is around decision making, assessment, risk and evidence and we have engaged Professor Taylor to provide expertise around an evidence based weighting / mathematical model to our assessment of risk. This new risk framework will allow us describe an evidence base for our decision on which homes we will inspect only once and which we will plan to inspect above the statutory min.



A series of engagements are planned to take forward this work commencing with a workshop on Friday 3rd November in our Boardroom, where we will begin a conversation with Prof Taylor to describe the influencing factors, (across our four domains of inspection) that inform our decision to inspect.

We are on target to launch a new risk framework for the 2018-19 inspection year by the end of Quarter 4 2017-18.

# Strategic Theme 2 - Use sources of information effectively

## Action 2.4

Strengthen arrangements to capture the voice of service users and their families / carers, to include stakeholder reference group, lay assessors and through engagement during inspections

Brag Rating



Action on target

### Evaluation of the effectiveness of engagement activities to capture the voice of service users

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A work stream has been initiated and have and continue to meet regularly. The aim of the work stream was to ensure that the voice of the service user is heard, reported and acted upon. To-date all objectives have been achieved on target including:

- A new corporate questionnaire has been developed to be used by all directorates
- A template has been developed to record the views of service users, their relatives, and staff
- A survey monkey has been developed for staff to complete an online questionnaire
- An observational tool has been introduced across the organisation which will report on interactions between staff and service users
- A new module to record all of this information has been requested for iConnect
- The organisation should be able to report on satisfaction levels for the first quarter of 2018-19.

# Strategic Theme 2 - Use sources of information effectively

## Action 2.5

Commence implementation of a project to develop and implement an integrated MHL D information system to replace the existing legacy systems following approval of the Outline Business Case from DoH

### % of milestones achieved on target from the Integrated MHL D Information System project plan

The MHL D Information System Outline Business Case was approved by DoH in November 2017. RQIA has made a bid to the HSCB e-Health Programme Board for capital monies in 2017-18 and 2018-19 to fund this initiative. A formal PRINCE2 project will be initiated, subject to the allocation of funding to allow the new information system to be implemented in 2018-19.

### Brag Rating



Business Case approved by DoH

# Strategic Theme 3 - Engage and involve service users and stakeholders

## Action 3.1

Develop and implement a Communications and Engagement Strategy taking account of HSC PPI Standards to increase the public's awareness of the role and function of RQIA

Brag Rating

G

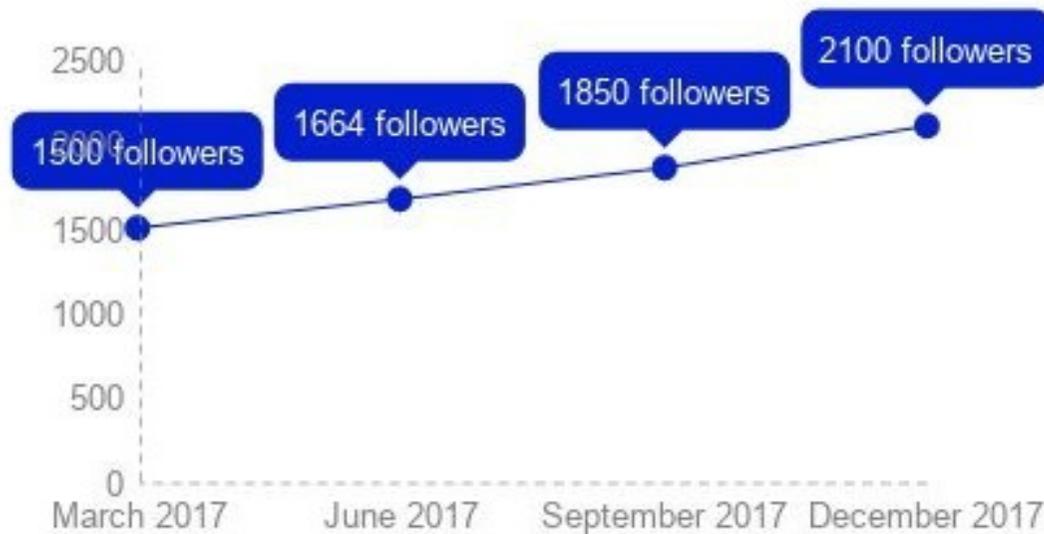
Action on target

## % of actions implemented in the Communications and Engagement Strategy

During Q3 2017-18, the RQIA website received around 36,000 individual visits, which is a 33% increase from the same period of 2016-17. The cumulative total for Quarter 3 was 70,000 individual visits which is an increase of over 20% on the same period in 2016-17.

The number of clicks required to find the relevant information on the website reflects the impact of the improved design and streamlining of the new RQIA website, and an improved user experience.

The @RQIANews Twitter account continued to attract new followers.



# Strategic Theme 3 - Engage and involve service users and stakeholders

## Action 3.2

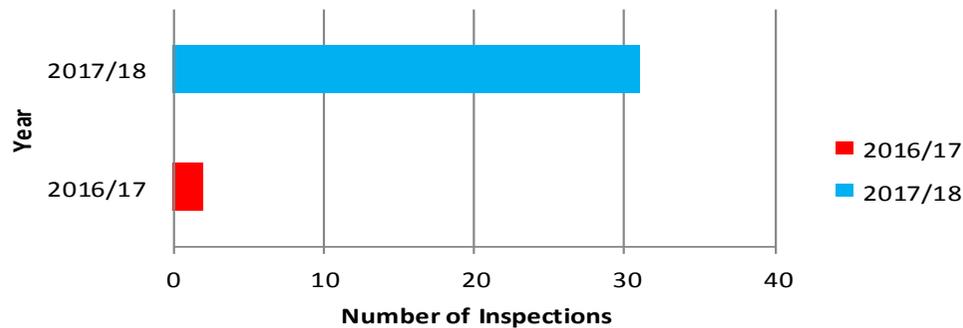
Increase the number of stakeholders and lay assessors actively designing / participating in our programmes of work

### Brag Rating



Action on target

### Number of inspections completed with Lay Assessor involvement (Cumulative Quarter 3)



The target for 2017/18 is 58 inspections to include a lay assessor. By the end of Quarter 3, thirty one inspections had been completed with lay assessor involvement.

In Quarter 2-three inspections were completed within the Healthcare Team with Lay Assessor involvement.

In Quarter 3 – twelve inspections have been carried out in total. 4 within the Residential care homes team, four within the Nursing homes team and four in the MHLD team.

### Number of opportunities for stakeholders to be engaged in the design of our work

RQIA have met twice with the Innovation Lab which currently sits within the Department of Finance.

The Innovation Lab hosted a workshop, with staff from RQIA during Quarter 3, to examine and explore how we can engage with our service users in a more meaningful and perhaps even in real time.

# Strategic Theme 3 - Engage and involve service users and stakeholders

## Action 3.3

Partner with the Innovation Lab (Department of Finance) to explore opportunities to work with our stakeholders to collaboratively redesign our activities

### Number of prototypes designed and commenced

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The Chief Executive met with the Innovation Lab Staff on 23 August 2017. A joint workshop with RQIA staff took place in October 2017. Further discussions are planned.

### Number of RQIA processes refreshed through collaboration with our stakeholders and facilitated by the Innovation Lab

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The Chief Executive met with the Innovation Lab Staff on 23 August 2017. A joint workshop with RQIA staff took place in October 2017. Further discussions are planned.

## Brag Rating



Action on target

# Strategic Theme 3 - Engage and involve service users and stakeholders

## Action 3.4

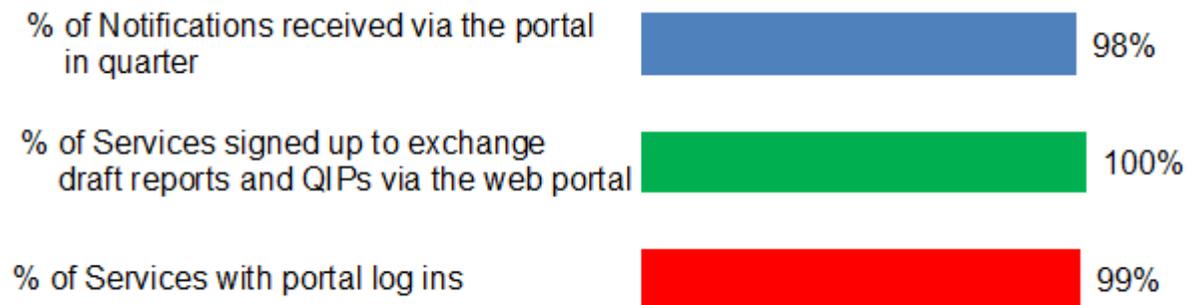
Examine and explore opportunities to use technology to facilitate feedback from service providers, service users and their families / carers e.g. pilot the use of e-questionnaires

### Brag Rating



Action on target

### % increase in the use of the web portal by service providers (Cumulative Quarter 3)



The percentage of services who have registered with the web portal has increased from 94% in Quarter 2 to 98% by the end of Quarter 3. The percentage of service providers who have signed up to exchange draft reports and QIPs has also increased from 64% in Quarter 2 to 100% in Quarter 3 which was achieved in October.

### Evaluation of the number and impact of the increased use of e-questionnaires

A work stream was initiated to consider the usefulness of e-questionnaires and concluded that this would be a much more effective manner to collect information from service users, relatives and staff.

A change request was made in Quarter 3 to amend iConnect to record the service users, relatives and staff questionnaires and a new observation tool to be used by RQIA's inspectors observe the environment and relationships in the service. The service users, relatives and staff questionnaires and observation tools have been agreed and built as an iConnect module. It is anticipated that the new impact questions will commence in Quarter 1 2018-19.

# Strategic Theme 4 - Deliver operational excellence

## Action 4.1

Implement the Workforce Plan aligned to the Workforce Review carried out in 2016-17

### % of actions in the Workforce Plan implemented on target

The workforce Review was completed in April 2017 with preliminary findings shared with EMT, and was presented to the Board in July 2017.

A meeting with the Joint Negotiation and Consultation Forum (JNCF) was held on 4 October to discuss the implications of the Workforce Review.

A 5 week consultation, with all RQIA staff, commenced in October and was completed on 10 November 2017.



### Brag Rating

G

Action on target

# Strategic Theme 4 - Deliver operational excellence

## Action 4.2

Develop and implement an Organisational Development (OD) Plan aligned to the Investors in People (IiP) assessment

### IiP staff survey results

The IiP online staff survey was completed in May 2017. 73% of staff responded, when 50% response rate was required. The survey results highlighted RQIA's areas of strength including:

- Areas of understanding values
- Performance management
- Structuring work

There were challenges identified as the organisation undertakes transformational change. Recommendations were made for all nine indicators of the IiP assessment model. However three areas have been identified as a priority:

- inspirational leadership and trustworthiness
- recognition and reward
- Building capacity

Recommendations from the IiP assessment have been mapped into an organisational development action plan and regular steering group meetings have been planned to ensure that recommendations are implemented over the next three years.

### Level of IiP accreditation achieved

RQIA successfully achieved their IiP status using the new standard "Generation 6". The subsequent report with recommendations has been issued and disseminated to staff during a staff meeting.

### % of actions in the Organisational Development Plan implemented on target

The recommendations from the IiP assessment have been used to form an action plan to support organisational development over the next three years. The initial focus will be around the areas of leadership, recognition and reward and learning and development.

Work has already commenced with regards leadership, this has been supported by the publication of the new leadership strategy document from the Department of Health. A new set of organisational values have been identified and a workshop has identified what these values mean for us and the expected behaviours associated with them. It is anticipated that this work will underpin the transformation of organisational culture.

## Brag Rating

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IiP accreditation achieved and organisational development actions on target



# Strategic Theme 4 - Deliver operational excellence

## Action 4.3

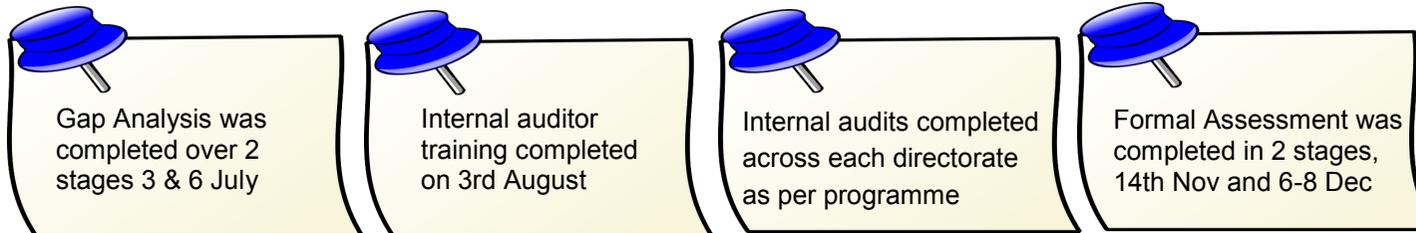
Implement a project to prepare for ISO 9001:2015 assessment and achieve accreditation

### % of milestones achieved on target from the ISO9001:2015 Project Plan

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The ISO9001:2015 Project Board continued to meet throughout Quarter 3.

By the end of Quarter 3 100% milestones were achieved on target.



### Achieved ISO9001:2015 accreditation

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Achieved ISO9001:2015 certification in December 2017

#### Brag Rating

G

On target to achieve certification in December 2017

# Strategic Theme 4 - Deliver operational excellence

## Action 4.4

Achieve financial balance and implement zero based budgeting

### Brag Rating

G

Action on target

### Savings Plan developed and approved by the RQIA Board and DoH

The RQIA Savings Plan 2017-18 was approved by the Board on 14 September 2017.

### Projected and actual end-of-year financial position / Break-even

The implementation of the Workforce Review has necessitated holding a number of vacant posts unfilled in order to ensure flexibility in re-structuring the organisation and achieving the benefits of the Review. As a result of this RQIA will have a significant underspend at the year-end and a break-even position will only be achieved through a phased non-recurring easement to DoH. In November 2017 an easement of £300K was made to DoH and a second easement will be made in January 2018. As at 30 November 2017 the projected underspend is estimated to be circa £166.5K.

BSO did not meet the deadline for submission of a business case to DOH for VES funding. RQIA's bid for VES monies will now not be considered until January 2018.

### Financial Outlook 2018-19 and 2019-20

On 28 November 2017 the DoH Director of Finance wrote to RQIA confirming that financial planning for 2018-19 and 2019-20 had commenced. The Director of Finance has indicated that it is unlikely that any budget settlement will be sufficient to meet all the increasing demands facing health and social care services. RQIA has therefore been asked to develop a range of savings proposals to provide for a reduction of up to 5% of the 2017-18 opening budget in 2018-19 increasing to 10% in 2019-20 i.e. £671K cumulatively across the two financial years. Costs pressures such as pay uplifts are to be absorbed within existing baseline budget allocations.

RQIA's Financial Scenario Plan 2018-19 and 2019-20 was submitted to DoH by the deadline of 13 December 2017.

# RQIA Strategy Map 2017-21

