

Business Plan 2015

Safer Better Care

Business Plan 2015
Health Information and Quality Authority

About the Health Information and Quality Authority

The Health Information and Quality Authority (HIQA or the Authority) is the independent Authority established to drive high quality and safe care for people using our health and social care services. The Authority's role is to promote sustainable improvements, safeguard people using health and social care services, support informed decisions on how services are delivered, and promote person-centred care for the benefit of the public.

The Authority's mandate to date extends across the quality and safety of the public, private (within its social care function) and voluntary sectors. Reporting to the Minister for Health and the Minister for Children and Youth Affairs, the Health Information and Quality Authority has statutory responsibility for:

- Setting Standards for Health and Social Services Developing person-centred standards, based on evidence and best international practice, for those health and social care services in Ireland that by law are required to be regulated by the Authority.
- **Supporting Improvement** Supporting health and social care services to implement standards by providing education in quality improvement tools and methodologies.
- Social Services Inspectorate Registering and inspecting residential centres for dependent people and inspecting children detention schools, foster care services and child protection services.
- Monitoring Healthcare Quality and Safety Monitoring the quality and safety of health and personal social care services and investigating as necessary serious concerns about the health and welfare of people who use these services.
- Health Technology Assessment Ensuring the best outcome for people who use our health services and best use of resources by evaluating the clinical and cost effectiveness of drugs, equipment, diagnostic techniques and health promotion activities.
- Health Information Advising on the efficient and secure collection and sharing of health information, setting standards, evaluating information resources and publishing information about the delivery and performance of Ireland's health and social care services.

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1 Introduction

Promoting safety and quality in the provision of health and personal social services for the benefit of the health and welfare of the public is the primary objective of the Health Information and Quality Authority (the Authority) as stated in the Health Act 2007 (the Act).

Since our establishment in 2007, the Authority has continued to deliver a range of core functions for both the regulatory and the improvement elements of our work. The *Programme for Government*, published in 2011, envisaged substantial changes to how health and social care services are organised and delivered. This was set out in further detail in the Government's policy document on health reform *Future Health: A Strategic Framework for Reform of the Health Service 2012-2015*. The reform programme emphasises the need for service improvement ensuring that quality and patient safety are at the heart of service delivery and that people's experience is of a caring and compassionate service. Government policy is that there are a range of additional functions to be assigned to the Authority in the coming years. This Business Plan sets out the programme of work to be undertaken by the Authority in 2015 to meet our existing functions whilst also planning and preparing for the future implications for the Authority from these proposed changes.

In developing this Business Plan the Authority has been conscious of its responsibility to promote and protect the health and wellbeing of its workforce and the wider community as set out in *Healthy Ireland: A Framework for Improved Health and Wellbeing 2013 - 2025* and commitments in this area have been set out. The Authority already ensures that all of its workplaces and spaces under its control are tobacco free.

In light of government priorities and following consultation and engagement with its stakeholders, including the public and staff, the Board of the Authority adopted its *Corporate Plan 2013 – 2015*. The Corporate Plan illustrates clearly what our priorities over those three years will be. These include describing the outcomes the Authority intends to achieve for our stakeholders and the activities to be undertaken to deliver on these outcomes over the period. This Business Plan has been aligned with the Corporate Plan and sets out the business objectives to be delivered in 2015, the third year of the three year corporate planning cycle.

In all that we do, the Authority continues to be conscious of the challenging economic environment and the ongoing pressures on public finances. We will do all that we can to ensure that we make the best possible use of the resources entrusted to us. In the continued development of existing functions, and in the commencement of further functions, the Authority will continue to be responsive and flexible in how we approach and implement our remit.

2 Our Vision, Mission and Core Values

The vision, mission and values of the Authority can be described as the central basis of the organisation, which in turn informs the selection of activities and the approach we adopt to implement them.

Our Vision

Our vision is to drive high quality and safe care for people using our health and social care services.

Mission and Corporate Values

We exist to promote sustainable improvements, safeguard people using health and social care services and support informed decisions on how services are delivered. This mission will guide and direct all of the activities of the Authority.

Core corporate values are intended to express what we believe is important, how we will work and how we hope to be viewed by external stakeholders, as well as the ethos and approach which our staff are encouraged to display. They form the basis of the culture of the organisation.

The core values of the Authority are shown in Figure 1.

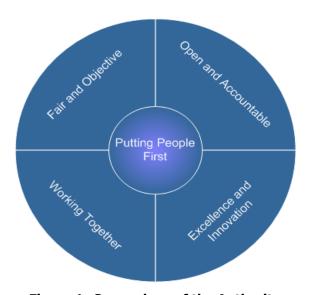


Figure 1: Core values of the Authority

Putting people first – we put the needs and the voices of service users, and those providing the services, at the centre of all of our work.

Fair and objective – we strive to be fair and objective in our dealings with people and organisations, and undertake our work without fear or favour.

Open and accountable – we share information about the nature and outcomes of our work, and accept full responsibility for our actions.

Excellence and innovation – we strive for excellence in our work, and seek continuous improvement through self-evaluation and innovation.

Working together – we engage with people providing and people using the services in developing all aspects of our work.

Further information is available on the Authority's website: www.higa.ie

3 Our Future Strategy

3.1 Strategic objectives for 2013 - 2015

The Authority's strategic objectives, as set out in our Corporate Plan for the period from 2013 to 2015, are set out below.

The Strategy Map (shown on page 7) demonstrates the alignment between the Authority's strategy and its capabilities, competencies, resources and business processes that collectively provide the means by which the strategy is implemented. This illustrates the structure of the strategy and articulates the following key elements:

- outcomes that we aim to achieve in order to deliver on our mission
- our core activities
- our strategic objectives
- the key enablers to deliver on the Plan.

3.2 Outcomes

The outcomes describe the core reasons for the Authority's existence and what the intended consequences of our work will be.

The Authority has identified four outcomes that we wish to achieve in order to deliver our mission. These are described as follows:

Care is improved - We enable sustainable improvements in safety and quality of health and social care services.

People are safeguarded - We act to reduce the risks of harm and abuse to people using health and social care services.

People are informed - We publicly report on safety, quality and effectiveness of health and social care services.

Policy and service decisions are informed - We inform policy development and how services are delivered.

3.3 Core activities

There are certain activities that we must undertake on an ongoing basis to deliver these outcomes. These relate essentially to our statutory functions and we must deliver these effectively so that we can deliver on our mission:

Regulation

Regulation consists of the registration, oversight and scrutiny of designated health and social care services and must be in line with legal requirements.

Supporting Improvement

Supporting improvement is achieved through the setting of standards, provision of guidance and promotion of quality and patient safety initiatives.

Assessing Health Technologies

Provision of evidence-based advice to inform policy development and how services are delivered.

Improving outcomes through information

Promoting the efficient and secure collection, use and sharing of health information.

3.4 Strategic objectives – for our core activities

The strategic objectives that will be underpinned by our core activities are summarised below and are also illustrated on the Strategy Map.

Regulation:

- Conduct regulation programmes of health and social care services so that those services are driven to continuously improve, and in turn better safeguard people and achieve improved outcomes for service users.
- Regulate effectively and efficiently and ensure that outcomes and impact on policy are communicated to all relevant stakeholders.

Supporting Improvement:

- Develop person-centred standards and guidance.
- Build capacity and support the implementation of sustainable improvements.
- Share the learning from our activities to improve patient safety culture.

Health Technology assessment:

- Conduct a number of relevant Health Technology Assessments (HTAs) as efficiently as possible.
- Act to embed HTA in national policy and service decision making.

Health Information:

- Set standards to support eHealth.
- Promote and enable the use of information to plan, manage and deliver health and social care services.

3.5 Strategic objectives – for our key enablers

The strategic objectives that will underpin how we are enabled to effectively deliver on the Plan are summarised below and are also illustrated in Table 2. The strategic objectives for these enablers are:

People:

Ensure that we have a competent and supported workforce that is utilised to its full potential.

Governance:

Demonstrate that our corporate governance framework is effective and robust.

Performance and Delivery:

Manage the organisation effectively and efficiently through robust planning and performance management.

Information:

Ensure that information is used and managed effectively and in accordance with best practice.

Communication and Engagement:

Actively communicate and engage in an open and responsive manner with all our stakeholders.

Evidence:

Ensure that our work is informed by evidence and research.

The following Strategy Map illustrates how the elements of the Corporate Plan coexist and the high level activities that the Authority will undertake over the three years of the planning cycle to achieve the strategic objectives.

Strategy Map 2013-2015

Our mission is:

The Authority exists to promote sustainable improvements, safeguard people using health and social care services and support informed decisions on how services are delivered.

The outcomes we hope to achieve are:

Care is improved

We enable sustainable improvements in safety and quality of health and social care services

People are safeguarded

We act to reduce the risks of harm and abuse to people using health and social care services

People are informed

We publicly report on safety, quality and effectiveness of health and social care services

Policy and service decisions are informed

We inform policy development and how services are delivered

Our core activities to deliver on our outcomes are:

Our strategic

Our key

objectives are:

Regulation

Registration, oversight and scrutiny of designated health and social care services in line with legal requirements

- We will conduct regulation programmes of health and social care services to safeguard people and achieve improved outcomes for service users
- We will carry out our Regulation function effectively and efficiently and its outcomes and impact on policy will be communicated to all relevant stakeholders

Supporting Improvement

Improving quality and safety by providing support to service providers and users

- We will develop new and revised existing standards and guidance
- We will build capacity and capability and support the implementation of sustainable improvements
- We will share the learning from activities to enable continuous improvement

Improving outcomes through information

Promoting the efficient, and secure collection, use and sharing of health information

- We will set standards to support eHealth
- We will promote and enable the use of information to plan, manage and deliver health and social care services

Assessing Health Technologies (HTA)

Provision of evidence based advice to inform policy development and how services are delivered

- We will undertake a number of relevant HTA's as efficiently as possible
- We will act to embed HTA in national policy and service decision making.

People

We will continue to ensure that we have a professionally competent and supported workforce that is utilised to its full potential

Information

Governance

We will demonstrate that our corporate governance framework is effective and robust

Performance and delivery

We will manage the organisation effectively and efficiently through robust planning and performance management

enablers to ensure our

We will use and manage information effectively and in accordance with best practice

Communication and engagement

We will actively communicate and engage in an open and responsive manner with all our stakeholders

Evidence

We will ensure that our work is informed by evidence and research

3.6 Delivering a challenging programme of work

The Authority is an independent body charged with providing assurance on the quality and safety of health and social care, encouraging improvement in those services through the development of standards and providing strategic and technical advice to government and providers. As a public sector body the Authority is responsible and accountable for the delivery of its mandate in an effective and cost efficient manner. The Authority will continue to develop its relationship with the Department of Health and the Department of Children and Youth Affairs in demonstrating delivery of its legal mandate and the delivery of this business plan.

In November 2013, the Authority assumed responsibility for regulating designated centres for adults and children with a disability. This was a sector that had not previously been regulated. This new role meant the Authority took responsibility for the registration of nearly 1,000 designated centres of varying sizes across the country. At the same time, the Authority continued to receive and respond to risk within centres outside of the registration programme. During the first full year of regulation it became increasingly clear that the sector was unprepared for regulation and therefore the pace of registration is slower than first anticipated. 2015 will be a challenging year to ensure that most centres (450) are facilitated to register. This programme of work will happen while a significant number (256) of designated centres for older and dependent persons aim to achieve renewal of their registration before 30 June 2015. This schedule will be challenged further by the need to respond appropriately to risks within centres identified by our inspection teams and emerging concerns. These risks, and the Authority's response to them, were brought into sharp focus in late 2014. In 2015, the Authority will continue to prioritise and respond proportionately to all concerns that it becomes aware of. This may mean that changes occur to our 2015 registration targets.

Throughout the last three years our children's services regulation team has assumed responsibility for the regulation of an increasing number and diversity of children's social services. In the main these services are provided by Tusla, the Child and Family Agency. During 2015 the Authority will engage in new approaches to the monitoring and oversight of some of these services based on the fact that they are provided by a single national provider with a single governance structure.

In 2013 the Authority commenced the first part of a three year assurance programme based on its responsibilities to monitor services against nationally mandated standards. In 2014 the planned programme required significant adjustment as a result of ministerial requests for an investigation into circumstances in Portlaoise Hospital and bringing forward a review into pre-hospital emergency care services provided by the National Ambulance Service and Dublin Fire Brigade. These activities and the current size of the Authority's healthcare team mean that the planned programme has been significantly curtailed. While the Authority aims to remain responsive to significant risk and significant service failure in the healthcare system, the planned programme for 2015 will be based on current available resources.

The Authority is currently mandated to develop and deliver on a range of standards for the health and social care system. Our activities in the regulation and monitoring of services have identified the requirement for further service specific standards and standards aligned with national programmes for health and social care service delivery. There has been a significantly increased focus on the importance of and dependence on, high quality health information across the entire health sector, from supporting direct patient care, to clinical audit, and from quality improvement and performance indicators, to public health and research. It is envisaged that a new entity called 'eHealth Ireland' will be established which will be headed up by the newly appointed Chief Information Officer (CIO). 'eHealth Ireland' will operate in partnership with relevant stakeholders such as the HSE ICT Directorate and the Authority to implement this Strategy. In time this will create a further demand for information, technical standards and guidance from the Authority that it will require resources to meet.

In addition, other forthcoming government policies and initiatives that will impact directly include the proposed introduction of *Money Follows the Patient*, the proposed National Patient Safety Surveillance System and the national framework to improve the health and wellbeing of the people of Ireland - *Healthy Ireland*. The development of information standards is essential to continue to deliver and enhance the essential foundations required to enable eHealth in Ireland. The Authority has had to prioritise where it can develop additional standards and guidance arising from the implementation of the *eHealth Strategy for Ireland*.

The demand for Health Technology Assessment (HTA) advice to inform national health policy and service decisions continues to increase. It was necessary in late 2014 to implement a prioritisation process as demand now exceeds our capacity to deliver. In addition, we are currently providing HTA support to all of the clinical guideline development groups engaged in the process of having their guidelines mandated as national clinical guidelines by the Minister for Health. As demand for HTA advice and support continues to increase we are endeavouring to find innovative ways to meet this challenge through streamlining of our processes and products, collaborative working with experts in the system and production of guidance to support those undertaking HTA activities.

In January 2015 the Minister for Health issued his priorities for 2015, a number of which have relevance to the functions of the Authority. The Authority will work with the Minister and his officials on the preparation for the implementation of those priorities that relate to the work of the Authority. In line with the Department of Health's plans for regulatory reform and expansion, the Authority will engage in discussions and plans in relation to the Department's intention to make the Authority the Competent Authority for Medical Ionising Radiation Protection and the proposed amendment to the 2007 Act to extend the Authority's remit to private healthcare providers. The Authority is also committed to working with other stakeholders to contribute to the development of mechanisms to ensure the implementation of its recommendations made to the HSE.

3.7 Required resources

This Business Plan has been developed on the basis of the resources expected to be available to the Authority for 2015. The Authority is aware of the ongoing fiscal challenges and in identifying its business objectives and the means of delivering them, it will utilise existing resources optimally and achieve the maximum impact for people in our health and social care services. The Authority continues to be challenged by the application of the recruitment moratorium and has implemented improved procedures to expedite sanctioning of and recruitment to vacated posts. Timely filling of such positions is a prerequisite to successful delivery of this Business Plan. During 2015 we will continue to look at efficiencies within our management structure and seek the support of both the Department of Health and Department of Children and Youth Affairs in the business cases submitted in support of this Business Plan.

We will continue to leverage, where appropriate, the skills, expertise and services of other organisations so that duplication of effort is avoided and collaboration is promoted.

A summary of the Authority's budget for 2015, which sets out the resources required to deliver the objectives set out in this Business Plan, is outlined in Appendix 1. The workforce that can be funded from this budget, required to deliver the objectives is set out in Appendix 2.

3.8 Performance measurement and risk management

The Authority continues to develop its internal systems and infrastructure so that we can maximise performance and ultimately measure performance, and manage and mitigate risks. This is especially important in the current environment given that we must be able to provide tangible evidence of the impact that we have on the quality and safety of services.

In the development of this Business Plan and the *Corporate Plan 2013 – 2015*, a framework has been developed to enable a fully integrated planning and performance management approach to manage the organisation more effectively and efficiently.

3.9 Organisation overview

The mission and values of the Authority provide the basis for the implementation of our functions. Our vision (to drive high quality and safe care for people using our health and social care services) is aligned to the objective of the Authority as stated in the Health Act, 2007¹. Therefore, we aim to deliver our statutory remit through our day-to-day activities and engagement.

The organisational structure of the Authority reflects the functions in the Health Act, 2007 and there are currently four Directorates based on these functions.

These are:

- Regulation
- Safety and Quality Improvement
- Health Technology Assessment
- Health Information.

These Directorates are supported by Communications and Stakeholder Engagement, Corporate Services and the Chief Executive's Office which provide the necessary cross-organisational support, coordination and infrastructural services required to fulfil our functions.

Each of the Directorates is led by a Director who reports directly to the Chief Executive Officer. The Executive Management Team of the Authority, the members of which report to the Chief Executive Officer, is responsible for ensuring the effective leadership, management and delivery of the Authority's functions, as outlined in the *Corporate Plan 2013-2015*.

During 2015 the Board and the Executive Management Team will review the current organisational structure to ensure that our resources are deployed in the most effective and efficient manner to deliver our strategic objectives and meet our legal remit.

The overall strategy, priorities and governance arrangements of the Authority are overseen by the Board of the Authority, which is appointed by the Minister for Health. Through the Chairperson of the Board, the Chief Executive Officer of the Authority is accountable to the Board.

The Board has established a number of Committees to assist it in its work which are as follows:

 Audit and Corporate Governance Committee whose primary function is to ensure that the Authority meets its relevant statutory functions and to monitor the overall effectiveness of corporate governance, financial management, risk management and internal audit arrangements.

¹ The Object in the Health Act, 2007 is *to promote safety and quality in the provision of health and personal social services for the benefit of the health and welfare of the public.*

- Health and Social Care Governance Committee whose primary role is to monitor the effectiveness of the governance arrangements around the health and social care functions.
- Information, Research and Technologies Committee whose role is to monitor the governance around the health information and health technology assessment functions.
- Remunerations and Nominations Committee whose role is to oversee the nominations and remunerations arrangements and organisational development of the Authority.

4 PART 1: BUSINESS PLAN OBJECTIVES FOR OUR CORE ACTIVITIES

1. **REGULATION**

| Strategic Objective | 1.1A We will have conducted regulation programmes of health and social care services people and achieve improved outcomes for service users, to include regulation of adult services. | |
|-------------------------------------|--|------------------|
| Key Priorities 2013 - 2015 | We will carry out regulation programmes of services as outlined in the relevant legislation using robust methodologies. For adult social care services our priorities include: | |
| | effective commencement of the regulation of designated centres for adults with a disability effective renewal of existing registrations of designated centres for older persons and dependen a view to raising standards in care provision reviewing and developing a range of registration policies and procedures ensuring that we meet standards of administration planning for the introduction of any new areas of regulation. | |
| BPO Number | Business Plan Objectives 2015 | Target Date |
| 1.1A.1 | Renew registrations of designated centres for older and dependent persons as required under legislation. (# 256 to Notice of Proposal) | December 2015 |
| 1.1A.2 | Progress three year programme of first registrations of designated centres for adults with disabilities. (# 450 to Notice of Proposal) | December 2015 |

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| 1.1A.3 | | December 2015 |
|--------|---|------------------|
| | Regulate for improvement and compliance in relation to known areas of risk specifically in the area (1) Medication Management (2) fire safety management. Medication Management - High and moderate risk Fire safety management - High risk | December 2015 |
| | Carry out a programme of responsive regulation based on information received directly or indirectly related to designated centres. | December 2015 |

| Key Priorities 2013 - 2015 | We will develop, implement and report on a scrutiny programme aimed at providing assurance on the safety and quality of healthcare services in line with the requirements of the Health Act 2007, the <i>National Standards for Safer Better Healthcare</i> and other relevant healthcare standards. Our priorities include: | | |
|-------------------------------------|--|------------------|--|
| | completing within agreed timescales any specific investigations initiated by HIQA or commission Government Ministers in line with the Health Act, 2007 developing and commencing the delivery of a three year programme of thematic monitoring revidentified priorities and consultation with stakeholders reviewing our methodologies to ensure that our processes enable us to prepare for the propose healthcare services in line with Government priorities carrying out a programme of announced and unannounced infection prevention and hygiene ins line with agreed regional hygiene standards. | iews based on | |
| Objective | Business Plan Objectives 2015 ² | Target date | |
| 1.1B.1 | | December 2015 | |
| 1.1B.2 | Undertake a thematic monitoring programme of using the <i>National Standards for the Prevention</i> and Control of Healthcare Associated Infections in the area of Antimicrobial Stewardship. This will include conducting a self-assessment in all publically funded acute hospitals. Onsite verification of findings will then occur in 14 hospitals through announced inspection. Hospitals for announced | December 2015 | |

² In respect of BPO's 1.1B.1 – 1.1B6, where relevant, HIQA will include assessment of the implementation of National Clinical Guidelines through assurance programme processes for the National Standards for Safer Better Healthcare

| | inspection will be identified based upon the findings of the self-assessment exercise. | |
|--------|---|------------------|
| 1.1B.3 | Undertake a thematic programme to review the arrangements in place to ensure that patients utilising the general acute healthcare services are adequately assessed, managed and evaluated to effectively meet their individual hydration and nutrition needs. # 13 sites | December 2015 |
| | | |
| 1.1B.4 | In collaboration with key national stakeholders, develop a partnership model for collecting, analysing and effectively utilising patient experience data. | December 2015 |
| 1.1B.5 | Utilising a thematic approach, review the corporate and clinical governance arrangements of all maternity hospitals within the six hospital groups. | December 2015 |
| 1.1B.6 | Utilising the National Standards for Safer Better Healthcare, undertake a thematic review of aspects of unscheduled care, to monitor the efficacy of the arrangements in place to ensure the quality and safety of care delivery. | December 2015 |
| 1.1B.7 | Carry out a programme of responsive regulation based on information received directly or indirectly related to Healthcare services. | December 2015 |
| 1.1B.8 | Design and deploy Business Intelligence driven risk profiling for Healthcare regulatory projects. | December 2015 |

| | 1.1C We will have conducted regulation programmes of health and social care services to safeguard people and achieve improved outcomes for service users, to include provision of an assurance and regulation programme for the quality and safety of defined children's health and social care services. | |
|-------------------------------------|--|------------------|
| Key Priorities 2013 - 2015 | For children's health and social care services our priorities include: completing the delivery of a three year inspection programme of specified children's services continuing a programme of inspection of all children's residential services commencing a programme of registration and monitoring of Special Care Units and designat children with disabilities. | |
| Objective | Business Plan Objectives 2015 | Target date |
| 1.1C.1 | 1 | December 2015 |
| 1.1C.2 | | December 2015 |

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³ The Social Service Inspectorate as part of the HIQA is, by the Minister for Children and Youth Affairs, deemed to be the authorised person to carry out the inspection of the CDS in accordance with Section 185 of the Children Act 2001.

| 1.1C.3 | Undertake a monitoring programme of the National Guidance in relation to the National Review Panel for deaths and serious incidents of children in care. | December 2015 |
|---------|--|------------------|
| 1.1C.4 | In line with a responsive regulation approach continue to target regulatory activity based on information received, directly or indirectly, related to children's services. | December 2015 |
| 1.1C.5 | Using the Child Protection Welfare standards undertake a thematic review of the national governance arrangements in place to assure the delivery of a consistent safe quality service to children and families. | December 2015 |
| 1.1C.6 | Undertake a literature review and review of findings in regard to the restriction of liberty of children in secure placements and produce a paper for HIQA and the Department of Children and Youth Affairs (DCYA), in the first instance outlining the findings of the review and enabling discussions with the DCYA in respect of policy in this area. | December 2015 |
| 1.1.C.7 | Complete the planning and scoping phase to establish a children's and young people's forum in 2016. | December 2015 |
| 1.1.C.8 | Work with the DCYA and Tusla to scope the scale and implications of formalising the regulation of children's residential centres against regulations and national standards, incorporating those services in centres provided directly by Tusla and those provided by private and voluntary sector providers. | December 2015 |

| | 1.1D We will have conducted regulation programmes of health and social care services to safeguard people and achieve improved outcomes for service users, to include planning and implementing a system for research ethics governance in line with all relevant legislation. | |
|-------------------|--|------------------|
| Key | Our priorities include: | |
| Priorities | | |
| 2013 - 2015 | Planning and implementing a new function for the Authority as supervisory body of research ethics committees under the clinical trials on medicinal products legislation. Working with the Department of Health to develop an implementation model for the research ethics provisions of the Health Information Bill. | |
| Objective | Business Plan Objectives 2015 | Target date |
| 1.1D.1 | ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' | December 2015 |

| | 1.2 We will have ensured that regulation is carried out effectively and transparently and that its outcomes and impact on policy are communicated to all relevant stakeholders. |
|-----------------------------|--|
| Key Priorities 2013 - | We will ensure that inspection findings are published and all inspection reports include a quality improvement plan and that outcomes of regulation activity are reported nationally on an annual basis, highlighting areas where policy and standards may need to be amended. |
| 2015 | Our priorities include: |
| | ensuring the effective delivery of all local and national reports within set timeframes regularly communicating with people, service providers, and relevant government departments on areas where policy and standards need to be amended |
| | from our scrutiny activity we will actively contribute to National processes for the development of policy, standards and guidance review, develop and implement a range of protocols and procedures that provide assurance on HIQA's |

| | regulatory functions. | |
|-----------|--|------------------|
| Objective | Business Plan Objectives 2015 | Target date |
| 1.2.1 | Review key regulatory processes to ensure practice improvement and effective regulation | December 2015 |
| 1.2.2 | Participate in and cooperate with the National Disability Authority's (NDA) review of the implementation of the HIQA Disability Regulations 'One Year On'. | December 2015 |

2. SUPPORTING IMPROVEMENT

| Strategic Objective | 2.1 We will have developed new and revised existing standards and guidance. | |
|-------------------------------------|--|---|
| Key Priorities 2013 - 2015 | In consultation with service users and other key stakeholders, we will develop new standards and guidance as required and review and revise existing standards within the appropriate timeframes. Our priorities include: revising existing standards as per the approved process and within the Authority's timeframes developing new standards as required per the approved process develop guidance documents as requested by health and social care providers. | |
| Objective | Business Plan Objectives 2015 | Target date |
| 2.1.1 | Publish <i>National Standards for Special Care Units.</i> | March 2015 (subject to Ministerial approval) |
| 2.1.2 | Publish <i>National Standards for Residential Care Settings for Older People in Ireland – (revised).</i> | April 2015 (subject to Ministerial approval) |
| 2.1.3 | Facilitate regional awareness sessions for <i>National Standards for Residential Care Settings for Older People in Ireland.</i> | July 2015 |
| 2.1.4 | Develop draft National <i>Standards for the Prevention and Control of Healthcare Associated Infections</i> – <i>Revised</i> taking into account the National Clinical Guideline No. 2 Prevention and Control of MRSA (December 2013), Surveillance, Diagnosis and National Clinical Guideline No. 3 | December 2015 |

| | Management of Clostridium difficile Infection in Ireland (June 2014). | |
|--------|--|-------------------|
| 2.1.5 | Conduct scoping exercise to determine service specific standards utilised internationally in order to inform the Prioritisation Criteria. | December 2015 |
| 2.1.6 | Develop Draft Service Specific National Standards for Safer Better Maternity Services in preparation for public consultation. | December 2015 |
| 2.1.7 | Develop National Standards for the Conduct of Reviews and Adverse Incidents. | December 2015 |
| 2.1.8 | Develop Guidance on <i>Medication Management</i> in preparation for the thematic reviews on medication management. | June 2015 |
| 2.1.9 | Publish Guidance for providers of services for children <i>Communicating in Plain English</i> and Guidance for providers of health and social care providers <i>Communicating in Plain English</i> . | June 2015 |
| 2.1.10 | Publish Principles of Good Practice in promoting Service User Autonomy Guidance. | September 2015 |
| 2.1.11 | Continue development and dissemination of Guidance for providers of health and social care services as requested and or based on assessed need as identified through our regulation and monitoring activities. | December 2015 |
| 2.1.12 | Complete work on the pending joint HIQA/National Clinical Effectiveness Committee (NCEC) publication of V2 <i>National Quality Assurance Criteria for Clinical Guidelines.</i> | March 2015 |

| Strategic Objective | 2.2 We will have built capacity and capability and supported the implementation of sus improvements. | tainable |
|-------------------------------------|--|------------------|
| Key Priorities 2013 - 2015 | We will develop a targeted programme to build capacity and capability in health and social care pro Our priorities include: providing support in quality improvement science for frontline staff in health and social care evaluating the programme to ensure that it is meeting its stated objectives. | |
| Objective | Business Plan Objectives 2015 | Target date |
| 2.2.1 | Complete programme to promote and support Quality Improvement in health and social care settings through the delivery of a final Quality Improvement programme and team facilitation. - Tusla | December 2015 |

| Strategic Objective | 2.3 We will have communicated the learning from our activities to improve patient safe | ety culture. |
|-------------------------------------|--|------------------|
| Key Priorities 2013 - 2015 | We will share the learning from all work undertaken by the Authority internally and externally including Quality Improvement initiatives, inspections and investigations. Our priorities include: | |
| | identifying areas of good practice and trends in areas in need of improvement sharing our learning through a variety of mechanisms and forums in line with the Authority's processes. | |
| | We will participate in European and International patient safety collaborative projects. Our priorities include: | |
| | contributing to the European Union Network for Patient Safety and Quality of Care (PaSQ) IHI Open School Network. | |
| Objective | Business Plan Objectives 2015 | Target date |
| 2.3.1 | Work with the Department of Health (DoH) and the HSE to progress the development of a Quality Improvement Alliance to promote collaboration between health and social care agencies and manage associated work programmes. | December 2015 |
| 2.3.2 | Develop an initial `toolkit' on a Quality Improvement methodology for the HIQA website. | December 2015 |
| 2.3.3 | Contribute to international collaboratives through continued participation in the European Union Network for Patient Safety and Quality of Care (PaSQ) as Ireland's National Contact point for the Work Package. | December 2015 |

3. IMPROVING OUTCOMES THROUGH INFORMATION

| Strategic Objective | 3.1 We will have set standards to support eHealth. | |
|-------------------------------------|---|------------------|
| Key Priorities 2013 - 2015 | We will develop technical standards which will support improved sharing of patient information. Our priorities include development of eHealth interoperability standards to support the sharing of patient information between healthcare professionals and across healthcare organisations. | |
| Objective | Business Plan Objectives 2015 | Target date |
| 3.1.1 | Completion of data model to support a national drug reference catalogue. | February 2015 |
| 3.1.2 | Develop a clinical document architecture specification to support the implementation of electronic prescribing in Ireland. | February 2015 |
| 3.1.3 | Develop a work plan for our eHealth Standards Advisory Group (eSAG) and implement the 2015 programme of work with the eSAG. | December 2015 |
| 3.1.4 | Develop standards to support the implementation of the Individual Health Identifier (subject to continuing discussions with the Department of Health). | December 2015 |

| | 3.2 We will have promoted and enabled the use of information to plan, manage and deliver health and social care services. | |
|-----------------------------|---|------------------|
| Key Priorities 2013 - | We will continue to promote the use of information to drive safer better health and social care through standards and guidance. | |
| 2015 | Our priorities include: | |
| | designing and publishing an annual report which brings together information on the quality a services identifying gaps in social care data collections and propose solutions planning for the introduction of any new functions arising from the Health Information Bill. | and safety of |
| Objective | Business Plan Objectives 2015 | Target date |
| 3.2.1 | Conduct an international review of patient safety surveillance systems. | April 2015 |
| 3.2.2 | Conduct an 'As Is' analysis of patient safety surveillance in Ireland. | July 2015 |
| 3.2.3 | Scope the development of an assessment framework for monitoring against standards for national data collections. | December 2015 |

4. ASSESSING HEALTH TECHNOLOGIES

| | 4.1 We will have undertaken a number of relevant Health Technology Assessments efficiently as possible. | (HTAs) as |
|-------------------------------------|--|--|
| Key Priorities 2013 - 2015 | Our priorities include: undertaking HTAs appropriate to decision makers' needs to inform national policy and so and national clinical guidelines continuing the development and implementation of a quality assurance framework for depositive HTA outputs engaging with international colleagues and work programmes to harmonise approaches, outputs and avoid duplication of efforts. | elivery of high |
| Objective | Business Plan Objectives 2015 | Target date |
| 4.1.1 | Carry out a defined number of system-wide HTAs identified through our prioritisation process to include: HTA of targeted BCG vaccination Rapid HTA of a national atrial fibrillation screening programme Rapid HTA of information technology to support Early Warning Scores and Clinical Handover systems HTA of chronic disease self-management programmes HTA of smoking cessation interventions HTA of HPV DNA testing for cervical screening Rapid HTA of thrombectomy in acute large vessel occlusive stroke. | September 2015 July 2015 March 2015 December 2015 May 2016 June 2016 December 2015 |
| 4.1.2 | Inform the HTA prioritisation process through ongoing horizon scanning and stakeholder engagement to identify high priority topics for the work plan in a timely manner. | December 2015 |

| 4.1.3 | Develop and implement an ongoing process for evaluation of HIQA's HTA advice on health policy and health service decision making. | December 2015 |
|-------|---|---------------|
| 4.1.4 | Contribute to international collaborative projects in accordance with work plans and requirements including the EC HTA Network, EUnetHTA Joint Action 2 (Work Packages 1, 2 5 and 7), INAHTA, HTAi, ISPOR, Early Dialogue (SEED) Collaboration and publish outputs of HTA work. | December 2015 |

| Strategic Objective | 4.2 We will have acted to embed HTA into national policy and service decision making | |
|-------------------------------------|--|------------------|
| Key Priorities 2013 - 2015 | Our priorities include: continuing to develop a suite of national HTA Guidelines building HTA capacity through training, support, research collaboration and stakeholder en undertaking horizon scanning activities to inform HTA topic referral and selection. | gagement |
| Objective | Business Plan Objectives 2015 | Target date |
| 4.2.1 | Develop guidance for decision makers on the use of HTA. | November 2015 |
| 4.2.2 | Develop guidance on budget impact analysis of implementation of clinical guidelines. | June 2015 |
| 4.2.3 | Support HTA capacity building through provision of training, support, research collaboration, stakeholder engagement and participation in external expert groups. | December 2015 |
| 4.2.4 | Participate in the National Clinical Effectiveness Committee and its Working Group and provide training and direct support to clinical guideline developers. | December 2015 |

5. PART 2: BUSINESS PLAN OBJECTIVES FOR OUR ENABLING ACTIVITIES

5. PEOPLE

| Strategic Objective | 5.1 We will ensure that we have a competent and supported workforce that is utilised t potential. | o its full |
|-----------------------------|---|------------|
| Key Priorities 2013 - | We will manage, support and develop our people through a range of human resource policies, processes and development initiatives, which are in line with employment legislation and recognised standards. | |
| 2015 Objective | Our priorities include: | |
| 5.1.1 | Review and implement new organisational and team structures that enable more effective delivery | December |
| 3.1.1 | · · · · · · · · · · · · · · · · · · · | 2015 |
| 5.1.2 | Undertake a range of initiatives to support a strong and sustained focus on performance management including: • reviewing and updating key policies and procedures linked to performance management implement changes to PMDS (as developed by employee working group) • ensure that all staff are fully engaged with the PMDS process. | March 2015 |

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| 5.1.3 | Implement a new hosted Human Resources System and a fully managed payroll services. | July 2015 |
|-------|--|------------------|
| | , | December 2015 |
| | Develop, manage and deliver a learning and development plan that meets the business needs and supports delivery of the statutory functions of the Authority. | December 2015 |
| | 5 , | December 2015 |

6. GOVERNANCE

| Strategic Objective | 6.1 We will have demonstrated that our corporate governance framework is effective and robust. | |
|-------------------------------------|---|------------------|
| Key Priorities 2013 - 2015 | Our priorities include: demonstrate that Risk Management is embedded throughout the Authority maintain procedures for the effective management of complaints and dissemination of lessons learned ensure that Board governance is regularly reviewed and in line with up-to-date corporate governance practice. | |
| Objective | Business Plan Objectives 2015 | Target date |
| 6.1.1 | Improved risk management practice in the Authority through its integration into operational management in the following ways: Management information will be used to understand risk indicators for operational objectives and the impact of external and internal factors to the achievement of those objectives. Risk management and risk management development will be included in PMDS of senior managers. | December 2015 |
| 6.1.2 | Develop and implement a corporate planning process to produce a Corporate Plan 2016 – 2018. | December 2015 |
| 6.1.3 | Carry out a review of our board governance and implement resultant recommendations. | December 2015 |
| 6.1.4 | Reviewed and publish a revised complaints policy and procedure based on the learning from the use of the previous procedures. | May 2015 |

7. PERFORMANCE AND DELIVERY

| Strategic Objective | 7.1 We will have embedded a fully integrated planning and performance management manage the organisation more effectively and efficiently. | approach to |
|-------------------------------------|---|------------------|
| Key Priorities 2013 - 2015 | We will implement and embed a performance management framework in order to ensure an integrato strategic planning and performance management for HIQA. Our priorities include: | rated approach |
| | implementing and continuously reviewing the Corporate Plan (2013-2015) developing and implementing annual business plans aligned to the corporate plan annually reviewing measures of success/KPIs implementing a range of approaches to ensure that organisational performance is effective is strategic and operational performance reporting using a recognised quality management measures and review organisational effectiveness, ensure an integrated approach to quality implementation. | odel/process to |
| Objective | Business Plan Objectives 2015 | Target date |
| 7.1.1 | Develop a bi-monthly performance report on all BPOs and associated risks for the Board and appropriate sub-committees. | March 2015 |
| 7.1.2 | Develop a system of monthly strategic review of progress against BPOs, associated risks and management responses to any variances. | March 2015 |
| 7.1.3 | Evaluate and report on progress against our published measures of success in the 2013-2015 Corporate Plan. | December 2015 |
| 7.1.4 | Develop and deliver a programme of activities to maintain and improve compliance in a range of areas. | December 2015 |

| | 7.2 We will have aligned resources to support HIQA's strategic priorities and maintaine financial performance. | ed our |
|-----------------------------|--|------------------|
| Key Priorities 2013 - | We will plan and manage the use of resources to deliver all of our activities efficiently and demonst for money. | crating value |
| 2015 | Our priorities include: maintaining an effective system of internal financial control demonstrating compliance with standards demonstrating year—on-year efficiency improvements in the use of resources in line with the Agreement. | |
| Objective | Business Plan Objectives 2015 | Target date |
| 7.2.1 | Maintain robust systems of financial control and support to managers in their financial management of the organisation ensuring that we use our resources to deliver all of our activities efficiently and demonstrating value for money. | December 2015 |

8. INFORMATION

| Strategic Objective | 8.1 We will have ensured that information is managed effectively. | |
|-------------------------------------|--|------------------|
| Key Priorities 2013 - 2015 | Our priorities include: reviewing and updating our Information and ICT strategy implementing the new Corporate Information System (Prism) to support all regulatory action improving access to high quality management information. | ivities |
| Objective | Business Plan Objectives 2015 | Target date |
| 8.1.1 | Continue to develop functions and functionality of Prism in line with our eStrategy. | December 2015 |
| 8.1.2 | Develop the technological base to support the Business Intelligence Strategy. | December 2015 |
| 8.1.3 | Implement all actions in the eStrategy to strengthen the ICT infrastructure. | December 2015 |

| Strategic Objective | 8.2 We will have complied with best practice and the highest standards for information (IG). | governance |
|-----------------------------|---|-------------------|
| Key Priorities 2013 - | We will ensure that we have the necessary policies, procedures and systems in place to achieve further with information governance standards. | ull compliance |
| 2015 | Our priorities include: implementing a rolling information governance improvement plan designing and implementing an Authority-wide information inventory with associated record and destruction policies across all areas conducting regular internal audits of information governance compliance effectively managing all information governance risks. | d retention |
| Objective | Business Plan Objectives 2015 | Target date |
| 8.2.1 | Implement the actions from the IG Improvement Plan for 2015. | December 2015 |
| 8.2.2 | Re-audit the Authority's IG capability. | September 2015 |

| | 8.3 We will have embedded the Business Intelligence (BI) function across all of the Autregulatory activities. | thority's |
|-----------------------------|---|------------------|
| Key Priorities 2013 - | We will apply BI tools and techniques to support risk-based decision-making in the Authority's reg operations. | ulatory |
| 2015 | Our priorities include: designing and deploying BI-driven operational reporting and risk profiling for each of the regulatory functions supported by Prism providing support to regulatory functions to ensure data quality, analysis and reporting. | |
| Objective | Business Plan Objectives 2015 | Target date |
| 8.3.1 | Implement the actions from the Business Intelligence Strategy Road Map for 2015. | December 2015 |

9. COMMUNICATIONS AND ENGAGEMENT

| | 9.1 We will have utilised a range of relevant communications methods to ensure that st are fully informed on our work and the benefits to patients and service users from it. | akeholders |
|-------------------------------------|---|------------------|
| Key Priorities 2013 - 2015 | Our priorities include: making best use of social media, online communications and new and emerging channels ensuring the public, stakeholders, decision makers and the media are kept informed of our ensuring that all reports are available to the public in a timely, comprehensive and transpar | |
| Objective | Business Plan Objectives 2015 | Target date |
| 9.1.1 | Implement the <u>Communications and Stakeholder Engagement Strategy</u> and related action plans. | December 2015 |
| 9.1.2 | Apply recommendations from the review undertaken following the completion of plain English training across the Authority, and audit compliance. | June 2015 |
| 9.1.3 | Undertake a major review and upgrade of the Authority's website: content, infrastructure and accessibility capabilities, in line with the Authority's eStrategy. | December 2015 |
| 9.1.4 | Roll out 2015 work plan for Social Media and Digital Communications Strategy, adapt and improve where appropriate. | December 2015 |
| 9.1.5 | Upgrade and implement the internal communications plan to improve internal communications with staff. | June 2015 |

| _ | 9.2 We will have consulted and engaged widely to deliver clear and meaningful understa our work. | anding of |
|-------------------------------------|---|--------------|
| Key Priorities 2013 - 2015 | Our priorities include: • increasing the involvement of people in the planning and carrying out of our work across the Au ensuring that there are consistent engagement processes in place across the Authority. | ithority and |
| BPO Number | Business Plan Objectives 2015 | Target date |
| 9.2.1 | Review and publish revised internal guidelines on consultation and engagement and provide advice to all relevant Authority teams. | March 2015 |

10. EVIDENCE

| Strategic Objective | 10.1 We will have ensured that our work is informed by evidence and research. | |
|-------------------------------------|--|------------------|
| Key Priorities 2013 - 2015 | Our priorities include developing and implementing an evidence and research strategy and a plan. | ssociated action |
| | Business Plan Objectives 2015 | Target date |
| 10.1.1 | Implement the actions from the Evidence and Research Action Plan. | December 2015 |

APPENDICES

Appendix 1 – Financial Resources Summary 2015

| Revenue | €′000 |
|---|--------|
| Department of Health | 12,358 |
| Other income | 6,742 |
| | 19,100 |
| Expenditure | |
| Chief Executive Office | 664 |
| Safety and Quality Improvement | 704 |
| Regulation | 9,807 |
| Health Technology Assessment | 847 |
| Health Information | 832 |
| Communications and Stakeholder Engagement | 647 |
| Shared Costs and Corporate Services | 5,099 |
| Pension costs | 500 |
| | |
| | 19,100 |

Appendix 2 – Human Resources Summary

| Headcount | Actual December 2014 | Projected December 2015 |
|--|----------------------------|-------------------------------|
| Regulation | 128 | 161 |
| Safety and Quality Improvement | 9 | 11 |
| Health Technology Assessment | 9 | 11 |
| Health Information | 10 | 13 |
| CEO's Office, Communications and Stakeholder Management and Corporate Services. | 25 | 32 |
| | 181 | 228 |

The projected headcount at the end of 2015 is contingent on sanction to recruit to previously filled posts being forthcoming from the Department of Health and the Department of Public Expenditure and Reform.

The expected revenue is sufficient to meet in full the payroll costs of this projected headcount.

Business Plan 2015
Health Information and Quality Authority

Published by the Health Information and Quality Authority.

For further information please contact:

Health Information and Quality Authority

Unit 1301 Dublin Regional Office

City Gate George's Court
Mahon George's Lane
Cork Smithfield

Dublin 7

Phone: +353 (0) 21 240 9300/ 1 814 7400

Email: info@hiqa.ie URL: www.hiqa.ie

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