



**Health
Information
and Quality
Authority**

An tÚdarás Um Fhaisnéis
agus Cáilíocht Sláinte

Safer Better Care

Corporate Plan

2008 to 2010

Table of Contents

Foreword	2
Executive Summary	4
Section 1 - Introduction	7
1.1 Background	7
1.2 Internal and external consultations	7
1.3 Corporate planning context	8
1.4 Structure of the plan	9
Section 2 - Our Quality and Safety Improvement Process	10
2.1 Introduction	10
2.2 Quality and Safety Improvement Process	10
2.3 Context to the work of the Authority	12
Section 3 - Targeted Achievements from 2008 to 2010	15
3.1 Introduction	15
3.2 Mission and core values	15
3.3 Strategic objectives from 2008 to 2010	16
3.4 Assumed resources	17
3.5 Enablers and Risks	17
Section 4 - How will we achieve our objectives	21
4.1 Introduction	21
4.2 Healthcare Quality	24
4.3 Social Services Inspectorate	27
4.4 Health Technology Assessment	29
4.5 Health Information	31
4.6 Corporate Services	33
4.7 Communications and Stakeholder Engagement	35
Section 5 - Measuring our performance	37
Section 6 - Our Work has already begun	38
Section 7 - Conclusion	39
Appendix 1 - External Stakeholder Consultations	40

Foreword

We are delighted to present the first Corporate Plan of the Health Information and Quality Authority (the Authority).

This is an important time for those of us involved with the Authority and for the wider health and social care system. This Corporate Plan outlines the role that the Authority will play in bringing about the necessary improvements, over the next three years, in the quality of health and social services in Ireland.

The Authority was established in May 2007 for the purpose of driving improvements in our health and social care services. For the first time in this country the Authority will be the single, and independent, organisation that will set quality standards for the delivery of health and social services. We will monitor and inspect that these standards are being met and publish the findings so that we all know, from an objective and consistent basis, how our health and social care services are performing.

In addition to setting and monitoring person-centred standards across health and social care, we will also be assessing new and existing health technologies where, for example, drugs and medical devices can be assessed for their overall effectiveness. Similarly, the Health Information function will enable the Authority to put in place standards for health information systems and provide meaningful, accessible information to support the safe and high quality provision of services.

All of these quality functions together provide a strong lever for driving improvements through a more coherent approach than has previously existed in Ireland.

The Authority has a big task ahead. This plan, developed in consultation with many stakeholders, signifies how we intend, to undertake our work from 2008 to 2010; and the activities and priority areas of work involved. During, and at the end of that time, we will measure our performance and demonstrate how we've impacted on improving the quality and safety of services.

We will not be able to achieve everything overnight but our approach will be systematic and incremental. Our top priority is to build an organisation that is capable, effective, efficient and well governed so that we can drive improvements across the system. In carrying out our work our initial priorities need to reflect the pressures in the system and will include a particular focus around cancer services, healthcare associated

infections and residential care for children, older people and for people with disabilities.

Our contact to date with people who use the services, the public, staff, service providers and government, has demonstrated a huge desire for change. We intend to work closely with all of our stakeholders to achieve this desired change through building on the existing strengths of our health and social care system and addressing where improvements need to be made.

We would like to thank the people who submitted their views in relation to our priorities. We are also very aware that often those that need to have their voices heard most, sometimes have the least time and are not the best placed to communicate their views. However, despite this a number of people invested time to do so and we'd like to offer a very special thanks to those people. These submissions helped the Authority to stay focussed on what is at the heart of our work - the needs of the people.

We look forward to working with you, over the life of this plan and beyond, in driving the improvements we all need and deserve in our health and social care system.



Pat McGrath
Chairperson



Dr Tracey Cooper
Chief Executive Officer

Executive Summary

This is the first corporate plan of the Health Information and Quality Authority, referred to from now as the 'Authority', and covers the three-year period from 2008 to 2010.

The Authority was established on the 15th of May 2007. Reporting to the Minister for Health and Children, the purpose of the Authority 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.”

The purpose of the plan is to:

- *describe what we aim to achieve between 2008 and 2010, as well as in the longer-term;*
- *describe the programmes of work which we will undertake between 2008 and 2010;*
- *explain how we intend to measure our own performance and impact.*

In carrying out our work it is fundamental that we are clear on what our mission is; what our core values are that will drive our behaviours and “the way we do business” and what our strategic objectives, to be achieved by the end of 2010, are. These are outlined below:

Mission

“Drive high quality and safe care for people using our health and social services.”

Core Values



Strategic Objectives 2008 to 2010

1. Build a capable and effective organisation that is well governed and efficient.
2. Develop coherent person-centred standards to drive quality improvements across services, in line with identified priorities.
3. Monitor, investigate and, where necessary and appropriate, enforce quality and safety standards.
4. Provide a comprehensive information framework to support safe and efficient health and social care.
5. Undertake and support health technology assessments that inform investment decisions that are safe, effective and achieve value.
6. Report the findings of all work undertaken by the Authority and provide meaningful information about health and social care services to the general public, service users, health and social care professionals, policy makers and government.
7. Engage effectively with service users, service providers, policy makers and the Government to bring about sustainable improvements in our health and social care services.

To achieve our strategic objectives, we will engage in a wide range of activities. At a high level, we will undertake the following activities in order to bring about noticeable improvements in the quality and safety of health and social services:

- *setting, monitoring and (where necessary and appropriate, enforcing) quality and safety standards for our health and social care services;*
- *working directly with providers of health and social care services, and their staff, in bringing about improvements in service quality;*
- *undertaking investigations where there is thought to be a serious risk to a person, or people, using the services;*
- *evaluating the case for new health technologies (for example cancer screening) and, more generally, promoting the better use of resources; and*
- *reporting on our work and providing relevant information about health and social care services to the public and other interested parties.*

To be effective in the short-term, we will have to concentrate our resources in a number of service areas which have been identified as priorities by the general public, service providers and policymakers. Priority service areas include: cancer care; healthcare associated infections and the quality of services provided in residential care, for example nursing homes. In addition, services that include diabetes, heart disease and maternity care will be addressed as early as possible in our work.

We are committed to subjecting our own performance and impact to internal and external scrutiny. In order to ensure that we can measure the impact of our work, we are developing a system which sets out how we will measure what we aim to achieve between 2008 and 2010. This system will incorporate quantitative and qualitative measures of the improvements targeted in priority service areas and form the basis of a detailed independent review of our performance which will be undertaken in 2010.

Finally, the Authority will, when performing its functions, endeavour to achieve the highest standards of probity and governance and will adopt Government guidelines in this respect. The Authority is also cognisant of the need to operate within the legislative policy and resources framework determined by the Government. Accordingly, the Authority has developed a comprehensive corporate governance manual and will submit this to the Minister in April 2008.

1 Introduction

1.1 Background

This is the first Corporate Plan of the Health Information and Quality Authority and covers the three-year period from 2008 to 2010.

The Authority was established on a statutory basis on the 15th of May 2007. This represents a major milestone in the Irish Health Service Reform Programme which was announced in June 2003.

Reporting to the Minister for Health and Children, the purpose of the Authority 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.”

This means that the Authority has responsibility for:

- *setting quality and safety standards for our health and social care services (with the exception of mental health services);*
- *monitoring and, as appropriate, enforcing these standards;*
- *supporting providers and staff in bringing about improvements in service quality;*
- *undertaking investigations where there is a serious risk to a person, or people, using the services;*
- *evaluating new health technologies and, more generally, promoting the better use of resources in our health and social care services; and*
- *reporting on our work and providing information about health and social care for the public, users of the services, health and social care professionals, policy makers and the government.*

1.2 Internal and external consultations

This corporate plan has been prepared by the staff and Board of the Authority, in consultation with a wide range of external stakeholders. Stakeholder consultations took the form of face-to-face interviews, as well as targeted requests and a public call for written submissions. Stakeholders were asked to provide views on priorities for the Authority between 2008 and 2010.

We are very grateful for extensive and detailed feedback on our future work priorities in developing this plan. This could not all be addressed in this document, but will be taken into account as we develop detailed annual business plans for the Authority going forward.

The main areas people wanted to hear about were:

- *clarifying the role and remit of the Authority;*
- *priorities of the Authority;*
- *the overall approach to improvement;*
- *the approach in terms of developmental versus mandatory; and*
- *how all this would be done within the resources available.*

These issues are addressed within this plan. However, the plan reflects a journey and there will be many other opportunities to engage with us and influence our plans over the coming years.

A list of organisations who contributed to this plan is attached as Appendix 1. We would like to express our thanks to all who submitted their thoughts on what is such an important roadmap for the organisation and the health and social care system of Ireland.

1.3 Corporate planning context

Factors which should be considered in reviewing this corporate plan are:

New status of the organisation

Because we are a new organisation, a balance must be struck between responding appropriately to external events and the need to plan activities that drive overall system-wide improvements. This balance tends more towards responding to external events for a new organisation than for one which is long-established. In other words, certain aspects of this plan may need to change in line with evolving priorities.

Authority as an agent for change

The Authority will be an agent for quality and safety improvements as distinct from having a direct role in service provision. Reflecting this, our effectiveness will depend heavily on our ability to develop and maintain good working relationships with the Minister for Health and Children, her department and key stakeholders, while retaining a high level of independence. These stakeholders include service users and associated organisations; the Health Service Executive and its staff; other service providers across all sectors; professional and other regulatory bodies; the media and the international health and social care community. Through partnership, we can bring about a safer, better health and social care system for our public.

Priority service areas

While a large number of service areas and issues are immediately deserving of our attention, given the start up nature of the Authority, we cannot address everything at once. This means we will need to concentrate our available resources on a number of priority areas.

These include activities that will drive improvements in:

- *the care for people with cancer;*
- *reducing the incidence of healthcare associated infections;*
- *the standards of care in residential services to safeguard and respect the most vulnerable in our society – older people, children and people with disabilities; and*
- *health information technology.*

In addition, diabetes, heart disease and maternity care will be addressed as early as possible in our work. The Authority will maintain an ongoing review of these priorities, and update if necessary according to resources and emerging issues of significant concern.

Existing and emerging policy framework

Finally, in taking forward our quality and safety agenda, the Authority has an obligation to play a key role (working closely with other agencies) in shaping our health and social care system in the wider context of current and future health reforms¹. The healthcare commitments contained in the agreed programme for Government, i.e. A Blueprint for Ireland's Future 2007-2012, will also be given consideration in driving our priorities.

1.4 Structure of the plan

The Plan is comprised of five further sections:

Section 2 describes the historical arrangements for assuring the quality and safety of our health and social services and, against this background, provides an overview of the approach which we will adopt in our future work in driving quality and safety improvements.

A description of what we aim to achieve between 2008 and 2010 is presented in **Section 3**. This is expressed as a series of strategic objectives. Our mission and values are also presented, as are factors which may enable or inhibit our success during this period.

The way we intend to achieve our strategic objectives is the subject of **Section 4**. The Authority is organised into 'Directorates' which work closely together and reflect our main functions. The organisational structure can be seen in Diagram 4.1. Details of individual Directorate objectives and planned work programmes are provided in Section 4. An overview of targeted annual achievements is also shown.

Section 5 reflects our commitment to measuring our on performance over the period of this Corporate Plan.

Section 6 shows that our work has begun.

Section 7 contains our concluding remarks.

¹ *Relevant policy documents include: The National Health Strategy, Quality and Fairness: A Health System for You (2001); The National Health Information Strategy (2004); and A Strategy for Cancer Control in Ireland (2006).*

2 Our Quality and Safety Improvement Process

2.1 Introduction

The purpose of this section is to:

- *provide an overview of how we will go about achieving our mission.*
- *describe the environment, within which we will undertake our activities – with a strong emphasis on our core functions.*

2.2 Quality and Safety Improvement Process

Driving safer better care in our health and social services will require the Authority to create an approach to quality improvement that incorporates standards, assessments, interventions, reports and information – which, when taken together, create a driver for change and improvement.

So, as well as setting, monitoring and (where necessary and appropriate) enforcing standards, the Authority will engage with: the Health Service Executive (HSE) and its staff both corporately, regionally and locally and with other service providers in order to highlight important aspects of their services, which are notable practice or which may need to change if sustainable improvements in service quality are to be realised; and with other regulatory bodies to ensure we complement each other's work.

Quality and Safety Improvement Process Explained

1. We engage in each of our core activities which include setting, monitoring and enforcing standards, the investigation of service-specific concerns, the undertaking of health technology assessments and, in tandem, a system for the monitoring and evaluation of our own efficiency and effectiveness is developed. The core activities are undertaken with the view to providing assurance to all service users regarding the quality and safety of services.
2. We benchmark and report on the performance of service providers against agreed standards and indicators, report on the findings of our health technology assessments, report on our monitoring and investigation activities and we acknowledge good practice. We also engage with policymakers and educators, with a view to informing and advising on future policy, addressing service shortcomings and further development needs across the system.
3. The activities of the Authority, as well as the related activities of service providers, staff and policymakers, result in the ability to measure improvements in the quality and safety of our health and social care services and subsequently use the information and knowledge gathered to make improvements.

4. The resulting plans and actions undertaken will be the impetus and platform to drive better and safer care.
-
5. The process of continuous quality improvement requires knowledge of the performance of the service at any given time. It will inform the ongoing work of the Authority as we evolve and therefore this process represents a cycle of continuous evaluation and use of information within the system. It enables knowledge to be shared across the public, users of the services, health and social care staff, policy-makers, government and internationally. This process, therefore, represents a cycle of continuous quality improvement.

Enablers

To assist the required improvements across the system, there are a number of key enablers that will need to be supported, without which the transformations and behavioural changes will not succeed. These include strengthening governance, accountability and performance management; developing the skills of the workforce; providing and managing care; and establishing the necessary health information technology infrastructure that will provide us with the transparent information required to deliver modern, high quality health and social care system.

This combined approach will be required if the Authority, through our work, is to be able to assure the public about the quality and safety of our health and social care services. It will allow us to:

- *benchmark and compare services nationally and internationally;*
- *report on good practice and make recommendations for improvements in the provision of health and social care services; and*
- *inform and advise academic institutions regarding the educational and developmental requirements of the health and social care workforce and also policy-makers about the future direction of health and social care.*

Most importantly, by undertaking this work, we will be able to:

- *demonstrate improvements in the quality and safety of care;*
- *spread learning and knowledge about the state of the nation's health and how services may be continually improved; and*
- *enable people to make better, informed, choices about how they access health or social care.*

2.3 Context to the work of the Authority

2.3.1 Setting, monitoring and enforcing standards

The Authority has responsibility for the development and monitoring of standards for the:

- *quality and safety of healthcare services;*
- *quality and safety of social care services;*
- *inter-operability of information systems so that they can link and communicate;*
- *collection, storage and sharing of health information; and*
- *best practice in undertaking health technology assessments.*

Standards for health and social care services, which make up the overall system, will take one of a number of forms, including:

- *organisational standards – or expected standards of care in hospitals, in primary care settings (for example, general practice), in ambulance services and in residential care services, including nursing homes, children’s homes and homes for people with disabilities; and*
- *condition or service-specific – or standards which are specific to a particular health condition (for example, breast cancer) or a particular service area (for example, pathology services).*

With the establishment of the Authority, there is now a single, independent organisation with responsibility for the setting, monitoring and (where necessary and appropriate) enforcing of quality and safety standards in our health (excluding mental health) and social care services. This will bring cohesion to what was previously a somewhat fragmented arena and facilitate the development of a comprehensive standards system, which builds on the best of historical arrangements.

In the case of healthcare, these include the review of the standards contained in the voluntary hospital accreditation scheme which was operated by the former Irish Health Service Accreditation Board (IHSAB) which transferred into the Authority on establishment on 15 May 2007.

The Social Services Inspectorate (SSI) and the HSE previously had responsibility for monitoring the quality of certain social care services. Their remit did not extend to all providers, however, nor did they have a strong statutory basis from which to enforce minimum standards. This offered potential for service standard variations, but also allowed innovation to emerge in certain aspects of our services.

Our broad standards remit across health and social care services, coupled with a stronger resource and legal basis (particularly for the SSI function) will help ensure that such variations are addressed. It will also help ensure that standards of care are consistent regardless of the sector, the location or ownership of the service.

In addition, the Social Services Inspectorate will work closely with the Mental Health Commission to ensure that a cohesive approach is in place where appropriate, in relation to where our work overlaps.

2.3.2 Health Technology Assessment

The Authority is the statutory, independent organisation responsible for carrying out national health technology assessments (HTA) and for developing HTA standards of best practice across our healthcare system. HTA entails the systematic and objective evaluation of the clinical and cost-effectiveness of new technologies, taking into account social, organisational and ethical issues among other factors. Health technologies include drugs, healthcare devices and public health programmes, for example cancer screening.

While Irish health policymakers and providers already engage in formal and informal evaluations for investment in new and existing health technologies, it is widely acknowledged that the health system would benefit from a more standardised, independent, comprehensive approach as well as from the greater availability of specialist HTA resources.

The HTA Directorate of the Authority will work with stakeholders to: support the development of a Quality Framework for HTA; develop capacity and promote high-quality assessments of technology; independently undertake HTAs that have a national implication; and meet the gaps in HTA across the system.

2.3.3 Health Information

Timely, accurate and comprehensive information, used intelligently, on the availability, accessibility, effectiveness and efficiency of our health services is fundamental to a highly reliable health system. While there are many strengths of our existing health information environment, with internationally matched innovation in some parts, there are a series of widely acknowledged weaknesses. These weaknesses are constraining in terms of: providing assurance and driving improvements in the quality of the service user experience; the auditing and benchmarking for and of professionals; and national and local service planning. Weaknesses include the absence of:

- *an up-to-date, cohesive, and clearly defined national Health Information Strategy and associated robust Implementation Plan;*
- *a unique identifier, which is fundamental in patient safety, for individuals using our health services, with important implications for the ease with which information can be shared between healthcare providers;*
- *national standards for the collation, definition and management of healthcare information, leading to less than best possible levels of compatibility between the significant number of healthcare databases presently in existence and, by extension, for the potential for aggregating information to the regional or national level;*
- *an effective information governance framework to inform how information is protected and shared across the system; and*
- *a trusted source of information about the performance of the service and a resource for people with a healthcare need.*

The Health Information Directorate of the Authority has responsibility for helping to address certain of these shortcomings. Its role includes:

- *identifying and advising on health information deficiencies;*
- *setting standards for information systems;*
- *establishing an information governance framework for the health system; and*
- *evaluating and providing information on the provision of health and social services.*

3 Targeted Achievements from 2008 to 2010

3.1 Introduction

This section provides an overview of what we aim to achieve between 2008 and 2010. It comprises four further sub-sections, the first of which defines our purpose and values. Targeted achievements in the period up to the end of 2010 are described in Section 3.3, while required staffing levels are set out in Section 3.4. Factors which may enable or inhibit Authority success are the subject of Section 3.5.

3.2 Mission and core values

The mission of the Authority is to:

“Drive high quality and safe care for people using our health and social services.”

This mission will act as a compass for all of our activities.

Our core values are intended to express what we believe are fundamental to ‘how we do business’, our behaviours and how we hope to be perceived by external stakeholders. Combined, values form the basis of the culture of an organisation.

Core values of the Authority are shown in Diagram 3.1

Diagram 3.1

Core values of the Authority

Putting people first – we will 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 will be fair and objective in our dealings with people and organisations, and undertake our work without fear or favour.

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

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

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



3.3 Strategic objectives from 2008 to 2010

Between 2008 and 2010, the Authority aims to achieve the following:

Strategic objectives from 2008 to 2010

Strategic Objective 1

Build a capable and effective organisation that is well-governed and efficient

Strategic Objective 2

Develop coherent person-centred standards to drive quality improvements across services, in line with identified priorities

Strategic Objective 3

Monitor, investigate and, where necessary and appropriate, enforce quality and safety standards

Strategic Objective 4

Provide a comprehensive information framework to support safe and efficient health and social care

Strategic Objective 5

Undertake and support health technology assessments that inform investment decisions that are safe, effective and achieve value

Strategic Objective 6

Report the findings of all work undertaken by the Authority and provide meaningful information about health and social care services to the general public, service users, health and social care professionals, policy makers and government

Strategic Objective 7

Engage effectively with service users, service providers, policy makers and the Government to bring about sustainable improvements in our health and social care services

Success or otherwise in the attainment of these objectives will be the main basis on which the effectiveness of the Authority will be evaluated.

3.4 Assumed resources

Success in the attainment of our strategic objectives will depend on the availability of resources to fund our planned programme of work. While the national budgetary process is such that there can be no absolute certainty regarding funding levels from 2008 to 2010, the staffing assumptions, on which this Corporate Plan is based are worthy of note.

These are shown in Table 3.1.

Table 3.1 Full-time equivalent staff assumptions underpinning corporate plan

Year	End 2007	End 2008	End 2010
Total	58	175	280

Staffing levels which vary significantly from those assumed will have implications for the attainability of our strategic objectives.

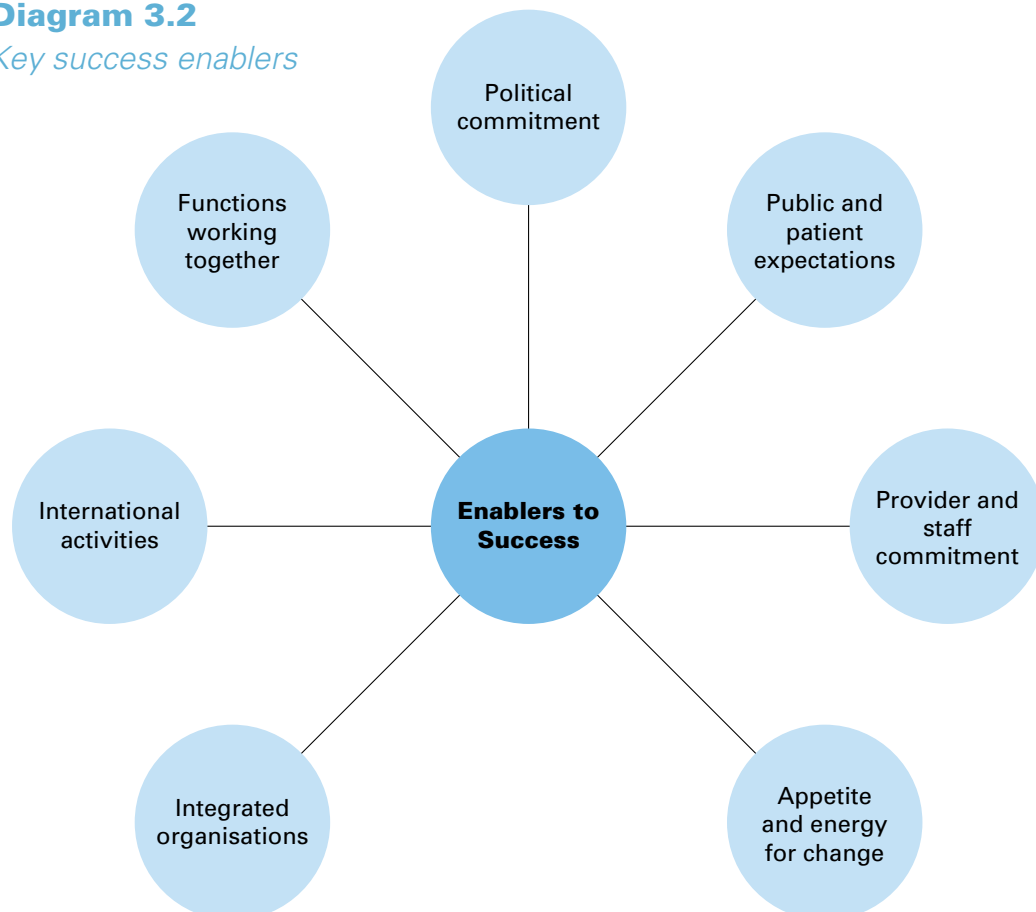
3.5 Factors enabling or threatening success

3.5.1 Key success enablers

Factors which will enable or facilitate our success are shown below.

Diagram 3.2

Key success enablers



Enablers of success for the Authority

Political commitment – there is a strong political desire for the improvement of the quality and safety of our health and social care services, and an appreciation of the challenges that come with driving such changes.

Public expectations - the Irish public has rising expectations regarding acceptable standards of care in health and social services, which will form a strong basis for the work of the Authority.

Provider and staff commitment - the Authority intends to build successfully on the very strong commitment of health and social care providers and staff to person-centred, quality, care.

Appetite and energy for change - the establishment of the Authority represents an important milestone in the fundamental reform of our healthcare system. The scale of reform undertaken to date is a powerful indicator of a willingness to embrace change, with a view to addressing the service shortcomings of the past.

Integrated organisations - while the Authority is a new organisation, the assimilation of three existing organisations (the former IHSAB, SSI and interim Authority) into our structure means that we have a strong platform and skills base, from which to work.

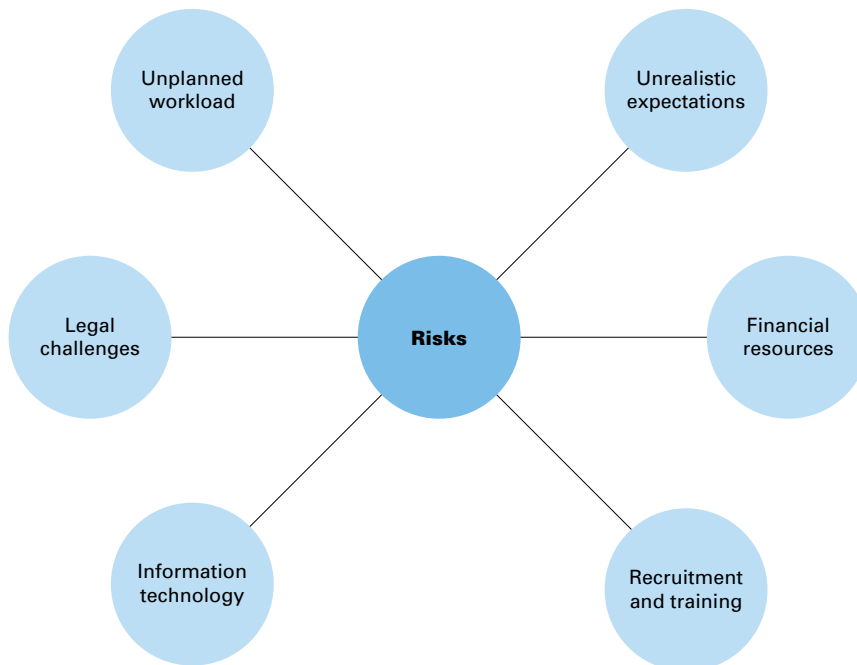
The functions working together - the incorporation of health information and health technology assessment into the remit of the Authority places it at an advantage relative to organisations which have a standards and monitoring role only. These functions will allow the Authority to drive quality improvements in a cohesive, co-ordinated and managed way.

3.5.2 Potential risks to the success of the Authority

The types of risks that may impede our success are shown below:

Diagram 3.3

Risks



Risks to the success of the Authority

Unrealistic expectations - the perceived success or otherwise of the Authority will depend to a very large extent on the expectations of stakeholders. Certain misinformation regarding the precise remit of the Authority, as well as unrealistic expectations regarding the changes which can be brought about in a short, start-up, time period, will need to be addressed if performance is to be fairly evaluated.

Inadequate financial resources - in preparing this Corporate Plan, certain assumptions have been made regarding our annual resource base, which are reflected in assumed staffing levels (see Table 3.1). The availability of funds to meet assumed staffing levels will be a prerequisite to success.

Challenges in recruitment - related to the above, success will depend to a large extent on the ability of the Authority to recruit, train and embed appropriately skilled individuals. The start-up nature of the Authority, as well as the specialist nature of certain of the roles to be filled, means that there may be challenges in achieving this.

Information technology delays - the effectiveness of the Authority will also depend on the implementation of a fit-for-purpose Management Information System, underpinned by processes and behaviours which ensure the accuracy and integrity of information that will inform the serious decisions that will need to be made. This is a large-scale and complex task, the timeframe for which cannot be precisely determined.

Legal challenges - legal challenges to the new statutory powers of the Authority could result in short-term constraints on its ability to operate effectively.

Unplanned workload - while the Authority accepts that it has a role with respect to undertaking unplanned investigations, it is important that the correct balance is struck between urgent work of this nature and that which is planned and can result in medium-term, sustainable, improvements in quality.

4 How will we achieve our objectives

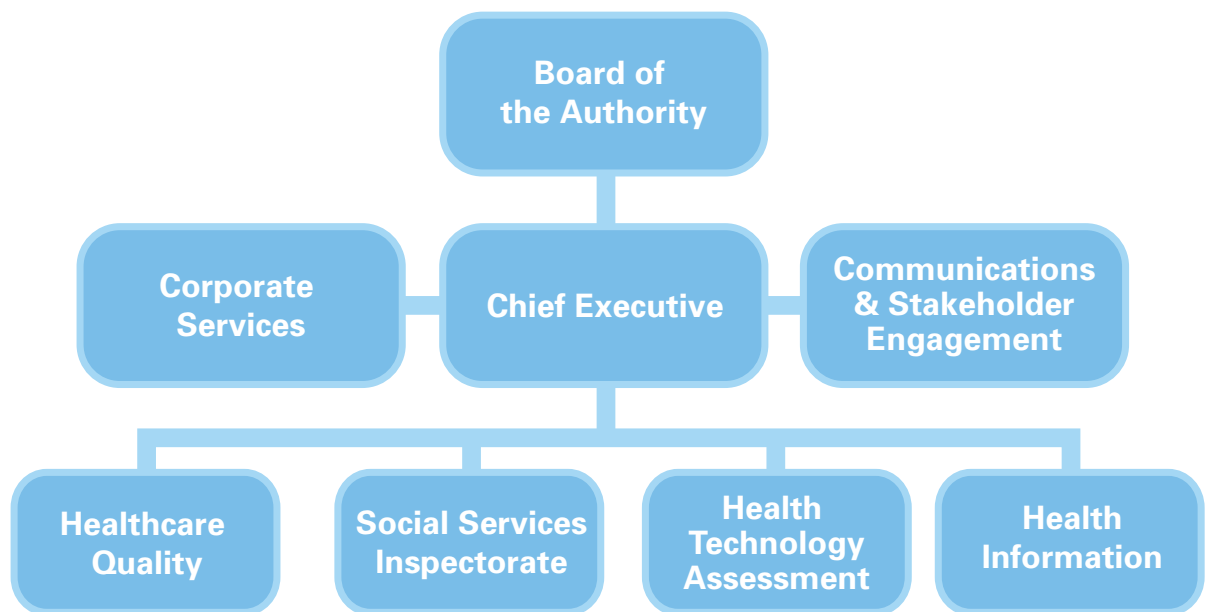
4.1 Introduction

A high-level overview of the approach that the Authority will adopt to driving quality and safety improvements in our health and social care services was provided in Chapter 2. The purpose of this chapter is to provide more detail on the programmes of work which will be undertaken and focused around the Quality and Safety Improvement Process, to ensure our success.

The Authority is organised into six Directorates or lead functions, each of which is responsible for making a defined contribution to the attainment of the strategic objectives of the Authority for the period 2008 to 2010.

An overview of the Authority Directorates, or the internal management structure of the organisation, is provided in Diagram 4.1.

Diagram 4.1
Organisational structure



An overview of the role of each directorate is shown in Table 4.1.

Table 4.1

Summary overview of Directorate roles

Directorate	Function overview
Healthcare Quality	<p>Developing person-centred standards for health and social care and designing, then implementing a quality assurance programme to promote improvements in quality and safety standards in health. As deemed necessary, will undertake investigations into suspected serious service failure in health care.</p> <p>In addition the Authority will engage at international level to leverage international expertise and research and share best practice so that up-to-date information underpins the activities and functions of the Authority.</p>
Social Services Inspectorate	<p>Inspecting and registering social care services, including residential services for older people, residential services for children and residential services for people with a disability. As deemed necessary, will undertake investigations into suspected serious service failure in social care.</p>
Health Technology Assessment	<p>Making sure that resources in our health services are used in a way that ensures the best outcome for the patient or service user – specifically through the assessment (and supporting the assessment) of the clinical and cost effectiveness of health technologies.</p>
Health Information	<p>Identifying and advising on health information deficiencies; establishing an information governance framework and setting standards for information systems; evaluating and providing information on the provision of health and social services.</p>
Corporate Services	<p>Ensuring that the Authority is fit for our intended purpose, through effective staff welfare, performance, management and recruitment, premises, management information systems and other key support services.</p>
Communications and Stakeholder Engagement	<p>Ensuring that the Authority’s internal communication systems are effective and robust, managing the Authority’s communications with internal and external stakeholders and developing collaborative relationships across the health and social care systems.</p>

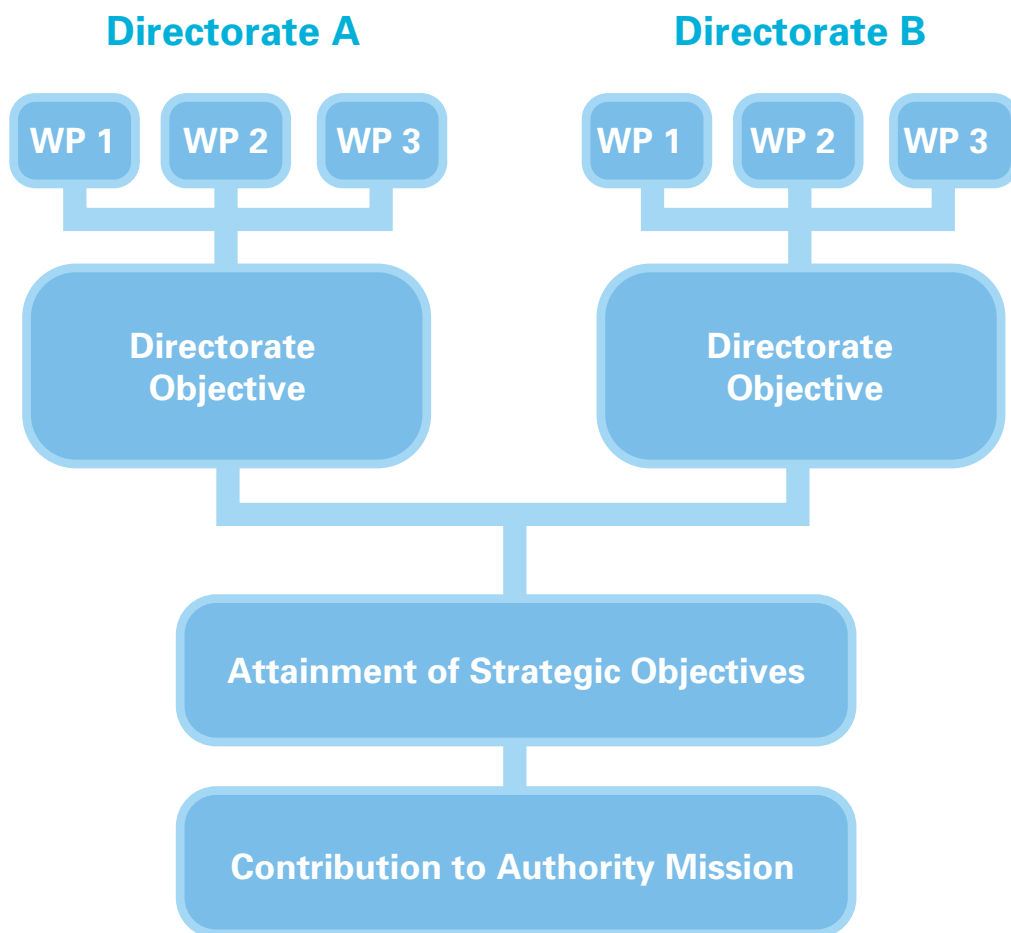
The required contribution of each Directorate to the attainment of our seven overall strategic objectives and, ultimately, our mission is expressed as a series of Directorate-specific objectives.

The achievement of objectives requires Directorates to engage in a wide range of activities, which are organised into distinct work programmes (WPs).

An illustration of these relationships is provided in Diagram 4.2.

Diagram 4.2

Links between Directorate Activity and the Mission of the Authority



The remainder of this chapter comprises six further sections, which describe the objectives and work programmes of our Directorates.

In addition, and with a view to providing a real sense of what is to be achieved by the Authority in each year of the plan, major annual milestones or achievements are also described for each of the Directorates.

4.2 Healthcare Quality

4.2.1 Objectives and work programmes, 2008 to 2010

Directorate Objectives		Supporting Work Programme	
1	Set priorities and define approach to driving improvements in healthcare outcomes in line with the Authority's Quality and Safety Improvement Process	1.1	Identify priority areas and determine the most appropriate allocation of Directorate resources
		1.2	Identify and define optimal combination of approaches to inform the Quality Assurance System
2	Develop and communicate a process for setting standards and defining performance measures in the areas of health and social care	2.1	Design, consult on and implement a process for setting standards and defining performance measures
		2.2	Work with Communications Directorate to communicate process for setting standards
3	Develop and communicate person-centred standards for Healthcare Quality in Priority Areas	3.1	Initiate and roll-out a Programme to develop person-centred standards, and performance measures, in line with the agreed process and priorities
		3.2	Work with Communications Directorate to communicate new, updated and adopted standards
4	Develop and roll-out a Quality Assurance System for healthcare quality in priority areas incorporating the agreed mix of approaches	4.1	Develop assessment and review methods including value for money assessments and the future approach to, and role of, accreditation
		4.2	Develop and implement a rolling quality assurance programme in line with agreed priority areas
		4.3	Undertake specific investigations as required
5	Develop and roll-out the regional structure to drive improvements at local level	5.1	Develop approach to working with healthcare organisations and services in the various regions
		5.2	Build organisation capacity and roll-out field operations
6	Establish a safety and learning process and communicate key lessons	6.1	Design a safety and learning framework
		6.2	Develop and implement national and international safety initiatives and develop international links to ensure sharing of knowledge, expertise and best practice
		6.3	Develop approach for risk-rating and managing concerns
		6.4	Implement learning framework

4.2.2 Targeted Annual Achievements, 2008 to 2010

2008	Targeted Achievements (Healthcare Quality)
1	The overall conceptual framework for standards and indicators has been developed and the content for acute healthcare, primary, community and ambulance services is under development
2	The quality assurance programme for acute healthcare is designed and a piloting phase planned for 2009. The assurance programme for primary and community care and ambulance services is under development. Themed reviews for symptomatic breast disease and infection control standards are underway. Subject to legislation and the report of the Commission on Patient Safety and Quality Assurance, option appraisal on possible approaches to licensing in healthcare commissioned
3	The initial phase of the Authority and World Health Organisation (WHO) collaborative patient safety project has been completed. A comprehensive approach to receiving and handling concerns is in place; the first safety campaign is complete; the Authority is contributing to the EU Patient Safety Network
4	The Authority's operational model for local operations has been designed and phased implementation commenced. Regional teams are being appointed
5	Serious concerns are responded to accordingly
6	A Patients for Improvement Network to contribute to training and programme development has been piloted
2009	Targeted Achievements (Healthcare Quality)
7	Content for acute healthcare, primary, community and ambulance services completed
8	The acute healthcare quality assurance programme has been rolled out and the programme for primary care, community care and ambulance services is being piloted
9	The roll out phase of the Authority/WHO project is underway; a further safety campaign has been completed; the Authority has begun to engage with undergraduate training programmes
10	The Authority's local engagement with healthcare providers is making a demonstrable contribution to driving improvement in acute setting and beginning to engage with primary and community care providers
11	The Patients for Improvement Network is established
12	Serious concerns are responded to and national learning communicated; The Authority's focus is on quality assuring HSE response to serious concerns
13	Subject to legislation, licensing approach is being rolled out

2010	Targeted Achievements (Healthcare Quality)
1	The Authority has implemented a comprehensive standards framework for health and social care which has been presented internationally as a model for others to learn from
2	The healthcare quality assurance programme has been rolled out and the cycle of reporting is ongoing and underway
3	The Authority has a comprehensive programme for promoting patient safety which has been evaluated and presented internationally as a model for others to learn from
4	The Authority's field operations are driving improvement through support and challenge to healthcare professionals and managers and linking with patients and the public to drive improvement
5	Serious concerns are responded to predominantly through quality assuring the response of HSE
6	Improvements in specific areas are apparent including: symptomatic breast disease; infection control and prevention
7	Subject to legislation, licensing regime for healthcare established and regarded as credible by service users and providers

4.3 Social Services Inspectorate

4.3.1 Objectives and Work Programmes, 2008 to 2010

Directorate Objectives		Supporting Work Programme	
1	Develop and communicate person-centred standards and what to expect in residential care settings for older people, people with a disability and children in care	1.1	Develop person-centred standards in prioritised areas in line with agreed standard setting methodology
		1.2	Work with Communications Directorate to communicate standards
2	Develop and communicate how standards will be measured in inspected facilities	2.1	Develop methodology for inspections
		2.2	Work with Communications Directorate to communicate methodology
3	Promote confidence in the quality of care of social services in Ireland and in the fairness of its regulatory, inspection and investigation processes	3.1	Develop programme of inspections and investigations in line with service user needs and priorities
		3.2	Publish and make accessible SSI Register and reports
		3.3	Establish process for handling concerns
4	Promote specific improvements in inspected facilities	4.1	Conduct registration and implement a rolling programme of inspections for new areas under SSI remit (residential care settings for older people and people with a disability)
		4.2	Continue inspection and begin registration of children's residential centres
		4.3	Undertake investigations as required
5	Provide information to policy-makers to support planning for the social services sector	5.1	Identify information requirements for key strategic social services planning
		5.2	Disseminate key strategic social services planning information to relevant parties

4.3.2 Targeted Annual Achievements, 2008 to 2010

2008	Targeted Achievements (SSI)
1	Fully complete list of designated centres
2	Draft standards prepared and finalised for residential services for older people
3	Inspection methodology prepared and finalised for residential services for older people
4	One fifth of children's HSE residential centres inspected. Inspection of foster care services in two LHO areas
5	Commence the registration and inspection process of residential centres for older people
6	Serious concerns are responded to accordingly
2009	Targeted Achievements (SSI)
7	Draft standards prepared and finalised for residential centres for people with a disability
8	Inspection methodology drafted and finalised for residential services for people with a disability
9	One fifth of children's residential centres registered and inspected
10	One fifth of residential centres for older people registered and inspected
11	Commence the registration and inspection process of residential centres for people with a disability
12	Serious concerns are responded to accordingly
2010	Targeted Achievements (SSI)
13	One fifth of children's residential centres registered and inspected
14	One fifth of residential centres for older people registered and inspected
15	One fifth of residential centres for people with a disability registered and inspected
16	Serious concerns are responded to accordingly
17	Registration and inspection requirements in specific areas are met

4.4 Health Technology Assessment

4.4.1 Objectives and Work Programmes, 2008 to 2010

Directorate Objectives		Supporting Work Programme	
1	Establish HTA Directorate and commence HTA programmes for medicines, devices, diagnostics and health promotion activities in cancer and other disease priorities	1.1	Develop HTA Quality Assurance Framework, programme structure and team to advise and carry out assessments
		1.2	Establish HTA referral and prioritisation process
		1.3	Establish a HTA research programme for identifying new technologies and publishing assessment outcomes
2	Provide robust independent advice on the clinical and cost effectiveness of health technologies as well as social, ethical, organisational and legal aspects as appropriate	2.1	Put resources and structures in place to enable the undertaking of HTAs based upon defined standards
		2.2	Establish HTA linkages and collaborate with external decision makers, agencies, service providers and knowledge holders involved in assessments
		2.3	Establish linkages with international HTA providers to share knowledge and collaborate on HTA production
		2.2	Carry out a defined number of system wide HTAs dependent annually upon available capacity
3	Provide best practice guidelines and guidance to third parties carrying out HTAs	3.1	Develop comprehensive national HTA guidelines for all assessments
		3.2	Communicate national guidelines to service providers carrying out assessments
		3.3	Establish a programme to support HTAs carried out at local level (HSE regional level, hospitals etc.)
		3.4	Work with the system to develop HTA capacity and capability

4.4.2 Targeted Annual Achievements, 2008 to 2010

2008	Targeted Achievements (HTA)
1	A core HTA team is established and HTAs delivered initially by external service providers are commenced internally
2	A HTA governance framework is established to manage the implementation of the HTA Quality and Safety Improvement Process, HTA referral and prioritisation process and HTA measurement parameters
3	A HTA Program Board and Scientific Advisory Committee is established
4	A research framework for horizon scanning, information synthesis and international networking is established
5	Engagement with HTA stakeholders (policy makers, clinicians, patient groups, industry and HTA service providers) and relationships formed
6	External capacity building programme initiated to develop HTA skills in the Irish setting
2009	Targeted Achievements (HTA)
7	Commence HTAs delivered internally by the HTA Directorate
8	High quality HTAs are conducted
9	Research capacity and outputs are developed with respect to conference presentations and publications
10	Participation in international HTA fora
2010	Targeted Achievements (HTA)
11	High quality HTAs are conducted on an ongoing basis
12	External peer review of HTA process and outputs is commissioned

4.5 Health Information

4.5.1 Objectives and work programmes, 2008 to 2010

Directorate Objectives		Supporting Work Programme	
1	Promote a robust population health, health service information and personal health information environment in Ireland	1.1	Analyse the "As Is" Health Information situation
		1.2	Develop a Health Information governance framework, to include governance standards, to inform how data is compiled, protected and used
		1.3	Ensure that information about public health and the performance of the health and social care services are widely available and easily accessible
2	Develop national health information standards to support interoperability of health information systems	2.1	Prioritise areas for health information standards
		2.2	Develop health information standards
3	Monitor and report on compliance with Authority standards and recommendations	3.1	Establish a process for monitoring levels of compliance with Authority Health Information governance standards
		3.2	Establish a process for monitoring implementation of Authority recommendations regarding filling of information gaps
		3.3	Develop procedures for monitoring compliance with technical standards

4.5.2 Targeted Annual Achievements, 2008 to 2010

2008	Targeted Achievements (Health Information)
1	A strong partnership is established with key stakeholders, particularly HSE, DoHC, Institute for Public Health and the Data Protection Commissioner with roles and responsibilities in respect of health information clearly identified
2	A National Working Group is established involving key stakeholders and research is commenced to identify the requirements for a comprehensive health information portal for the public, service providers and policymakers are defined
3	Based on best international practice, proposals for information governance and standards in draft form for public consultation are developed and published
4	The National Health Information Strategy is reviewed and updated for submission to the Minister of Health and Children for approval
5	A National Steering Committee is established involving DoHC, HC and NSAI to agree technical health information standards
2009	Targeted Achievements (Health Information)
6	Standards are defined for information relating to public health and the performance of health and social care including minimum data sets and key performance indicators
7	The information requirements for the Authority's priorities are specified, ensuring that the process of populating the portal with this information has begun and key gaps are identified
8	A process is developed for monitoring compliance with nationally adopted information governance standards
9	In collaboration with the National Steering Committee, ongoing development of national technical ICT standards for health information
10	Internal information systems are implemented
2010	Targeted Achievements (Health Information)
11	Continued promotion of the population of the portal with data for the priority areas
12	A concrete set of recommendations for filling gaps in priority areas is produced and a process is developed for monitoring the filling of gaps
13	Continue to ensure that the internal information systems are fit-for-purpose and meets the Authority's needs on an on-going basis
14	Continue development of national health information standards including minimum data sets and key indicators to populate National Data Directory, as well as evolving the technical ICT standards

4.6 Corporate Services

4.6.1 Objectives and Work Programmes, 2008 to 2010

Directorate Objectives		Supporting Work Programme	
1	To provide the necessary services and resources, in a consistent manner, to enable the Authority to deliver our objectives efficiently and effectively and in a well governed way	1.1	Establish the planning, legal, financial and governance frameworks required to support the Authority
		1.2	Coordinate and drive the HR strategy to ensure each Directorate has appropriate, and well-managed, human resources to carry out its function
		1.3	Provide the appropriate physical (for example buildings) and operational infrastructure (for example management information systems, processes) to support the Authority in carrying out its functions
2	To monitor and report on key aspects of governance, risk and compliance within the Authority	2.1	Develop Monitoring and Evaluation Framework for the Authority

4.7.2 Targeted Annual Achievements, 2008 to 2010

2008	Targeted Achievements (Corporate Services)
1	Agreed level of staff is recruited
2	Human Resources processes are implemented including organisational development activities, training, inductions and ensuring performance development review systems are in place and aligned with the Authority's objectives
3	Precise locations for all Authority offices are identified, selected, procured and occupied
4	Key corporate systems are selected and implemented
5	Interim operational systems are implemented
6	Ongoing reporting mechanisms are established - governance, financial and other stakeholders
2009	Targeted Achievements (Corporate Services)
7	Agreed level of staff is recruited
8	Fully developed financial system and budget monitoring system implemented and running smoothly
9	A mixture of interim and permanent operational systems in place
10	First years Training and Development Plan is reviewed and evaluated
2010	Targeted Achievements (Corporate Services)
11	Effectiveness of HR strategy is evaluated through appropriate stakeholder and staff survey
12	Effectiveness and efficiency of financial systems is reviewed
13	Final operational systems in place
14	External review of Authority across a range of our work is coordinated

4.7 Communications and Stakeholder Engagement

4.7.1 Objectives and Work Programmes, 2008 to 2010

Directorate Objectives		Supporting Work Programme	
1	Establish a clear understanding and awareness of the Authority and our role among the public	1.1	Develop and agree the Authority's external communication strategy
2	Actively engage with key stakeholders to foster a collaborative working relationship (find common ground)	2.1	Identify and prepare a database of key stakeholder groups, their roles, responsibilities, objectives and issues
		2.2	Develop and agree communications contact programme between the Authority and stakeholders (who and how)
3	Communicate honestly and openly with all stakeholders in a straightforward and transparent manner, to build trust and assure independence	3.1	Develop and issue the Authority's communications strategy
		3.2	Provide easy access of all information to all stakeholders
		3.3	Prepare Authority response for crisis situations
4	Ensure effective internal communication processes are in place	4.1	Develop an effective internal communications strategy, which includes a mechanism for staff input
		4.2	Maintain and improve staff Intranet
		4.3	Issue regular and appropriate updates on Authority's activities and staff related issues

4.7.2 Targeted Annual Achievements, 2008 to 2010

2008	Targeted Achievements (Communications and Stakeholder Engagement)
1	Established communications team in place
2	Communications strategy is published and implemented
3	Structured communications have been developed with key stakeholders
4	Website is reviewed and updated
5	Intranet is reviewed and updated
6	Publications have standard branding and template
7	Robust internal communications are embedded
2009	Targeted Achievements (Communications and Stakeholder Engagement)
8	The Authority features regularly in national and medical media
9	The Authority is invited to engage in policy making - for example Oireachtas meetings, inter-departmental working groups
10	The Authority has regular and structured communications with major stakeholders
11	Service user surveys to evaluate experience of services are undertaken
2010	Targeted Achievements (Communications and Stakeholder Engagement)
12	The Authority's name is widely recognised by the public and there is a good understanding of our functions
13	Communication structures work smoothly with systems in place and evaluated
14	The Authority is a major point of reference for the public and media about health information and quality issues

5 Measuring our performance

Consistent with leading national and international practice, as well as with Department of Finance guidelines, we will measure our performance using a combination of resource, input, output and outcome indicators.

The new status of the organisation, coupled with the necessary lead-time for the development and implementation of service standards, means that outcome or impact indicators in the period of the first corporate plan will be confined, to some extent, to stakeholder perceptions of the organisation.

However, the true test of the performance of the Authority is being able to demonstrate improvement in the services where it has undertaken work. The priority areas, where significant quality and safety improvements are targeted during the period of this plan, and which will feature prominently in the Authority performance indicator system to the end of 2010 are in:

- *the care for people with cancer*
- *the incidence of healthcare associated infections*
- *promoting high standards of care in residential services catering to our most vulnerable – older people, children and people with disabilities*
- *driving improvements in health information technology.*

We will subject ourselves to external scrutiny in the same way that we would expect of others. A full external review of organisational efficiency and effectiveness is scheduled for 2010.

6 Our work has already begun

This corporate plan covers the period from 2008 to 2010. However, our work has already begun in earnest.

Excluding activities aimed at ensuring that the Authority is fit for the purpose for which it is intended, for example staff recruitment and training, work undertaken to the time of writing (November 2007) includes:

- *the undertaking and publication of an investigation into the placement of children aged 12 and under in residential care in Ireland;*
- *undertaking a National Hygiene Quality Review audit;*
- *initiation of two investigations into symptomatic breast disease services in two different regions;*
- *initiation of a national quality review of symptomatic breast cancer services;*
- *preparation and publication of draft national quality standards for older people's residential care settings;*
- *the undertaking of two health technology assessments;*
- *preparation of draft national quality standards for residential centres for people with a disability;*
- *preparation and planning for all aspects of our programme of work; and*
- *the development of an international network.*

7 Conclusion

The Health Information and Quality Authority has been established to drive high quality and safe care for people using our health and social services.

It is critical that at the end of the period of time outlined within this corporate plan, we are able to demonstrate the impact that we have made in driving improvements in various aspects of quality and safety across the system.

However, there is a challenge ahead - not only in establishing the Authority to be fit for purpose for the work programme that we have embarked upon, but also in establishing and maintaining effective relationships in order to ensure that the public, people who use the services, staff delivering services and other key stakeholders have ownership in the way the Authority undertakes its work.

The work of the Authority will further drive the changes required in order to embed a culture of safety, quality and accountability across health and social care. It is important to recognise we all have our respective roles to play in achieving these changes and this corporate plan outlines the role that the Authority will play in this transformation.

We look forward to working with you and for you, both now and over the coming years and would like to express our thanks for the contributions that have informed the future work of the Authority.

Appendix 1

External stakeholder consultations

The following organisations inputted to this corporate plan, by providing their views on priority areas of work for the Authority between 2008 and 2010.

1. Academy of Medical Laboratory Science
2. Adelaide and Meath Hospital incorporating the National Children's Hospital
3. Arthritis Ireland
4. Athlone Institute of Technology
5. Aware
6. Barnardos
7. BSL Consultancy Services
8. Central Statistics Office
9. Children Acts Advisory Board
10. Clinical Indemnity Scheme
11. Combat Poverty Agency
12. Cork Institute of Technology
13. Data Protection Commissioner
14. Department of Education and Science
15. Department of Enterprise, Trade and Employment
16. Department of Finance
17. Department of Health and Children
18. Department of Social and Family Affairs
19. Dublin City University
20. Equality Authority
21. Europa Donna Ireland
22. Galway Mayo Institute of Technology
23. General Hospital Letterkenny
24. Health Research Board
25. Health Service Executive
26. HSE - Regional Health Service South
27. Inclusion Ireland
28. Institute of Health Lifestyle and Habitat Dublin Institute of Technology
29. Institute of Public Health in Ireland

30. Irish Cancer Society
31. Irish Hospice Foundation
32. Irish Medical and Surgical Trade Association
33. Irish National Accreditation Board
34. Irish Nursing Homes Organisation
35. Irish Nurses Organisation
36. Irish Patients Association
37. Irish Pharmaceutical Healthcare Association
38. Irish Pharmaceutical Union
39. Mater Hospital
40. Minister for Children
41. National Council on Ageing and Older People
42. National Disability Authority
43. National Federation of Voluntary Bodies
44. National Standards Authority of Ireland
45. National University of Ireland, Maynooth
46. Nurse at Regional Hospital
47. Ombudsman for Children
48. Patients Focus
49. Pavee Point Travellers Centre
50. Pharmaceutical Society of Ireland
51. Royal College of Surgeons of Ireland
52. Rehab Group
53. School of Nursing and Midwifery, Trinity College Dublin
54. Service User Surveyor/Co Chair Wexford Patient Partnership Forum
55. St. John's Hospital Newmarket
56. St. Luke's General Hospital
57. St. Vincent's Healthcare Group
58. St. Vincent's University Hospital Dublin
59. VHI Healthcare
60. Women's Health Council

In addition, a number of individuals made contributions.
The Authority wishes to express our sincere gratitude to all.

For further information please contact:

Health Information and Quality Authority

Webworks,
Eglinton Street,
Cork,
Ireland

Phone: +353 (0)21 425 0610

Email: info@hiqa.ie

URL www.hiqa.ie

© Health Information and Quality Authority