



**Health
Information
and Quality
Authority**

An tÚdarás Um Fhaisnéis
agus Cáilíocht Sláinte

Safer Better Care

Corporate Plan 2010 – 2012

March 2010

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Foreword

The publication of the second Corporate Plan of the Health Information and Quality Authority (the Authority) is an important milestone. Since the establishment of the Authority in May 2007, we have worked hard to establish our approach towards driving improvements in the quality and safety of our health and social services.

Through that work, we have gained valuable insight and knowledge in what is done well and where some of the challenges and opportunities are in health and social care services. These have informed the development of this Plan and have been significant factors in shaping our focus for the next three years.

Our first Corporate Plan, from 2008 to 2010, was framed within very different economic circumstances and at the beginning of our work. The dramatic changes to the economy have, as a consequence, increased pressure on public finances. This has been another major factor in determining what we will do over the next three years and more importantly, that we operate with maximum efficiency and effectiveness to enable optimum impact for people using the services.

The Authority's remit is very broad. It ranges from regulatory to advisory, it includes both health and social care and spans from standard setting, and the monitoring of services, to providing evidenced-based information that enables better decision making across a range of services. Our work over the last couple of years has given us a greater insight into those service areas and issues which require most focus. We are extremely aware of the onus on us to deliver on our remit and make a real and sustainable difference for people and, at the same time, deliver the greatest value for the resources that we use.

When we were established almost three years ago, we were under no illusion regarding the size of the task ahead. The size of this task continues to be significant and will remain so for some years to come. However, a solid foundation has been established and the steps required for ongoing, incremental and sustainable improvements are well underway in many parts of the system.

It is important to acknowledge that the Authority does not, and cannot, work in isolation. Our ongoing commitment to inclusive consultation and engagement with people using services, people providing services and other key stakeholders will continue to be essential if we are to deliver meaningful work that makes a difference.

We hope that the Authority, through its work, can facilitate and harness the significant appetite for ongoing improvement that already exists within the health and social care services and continue to build the momentum so that we can work collaboratively in driving safer, better care.

Pat McGrath
Chairperson

Dr Tracey Cooper
Chief Executive Officer

Executive Summary

Background

The Health Information and Quality Authority (the Authority) was established on 15 May 2007 as the independent organisation with the purpose of driving improvements in the quality and safety of Ireland's health and social care services. Reporting to the Minister for Health and Children, the role 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 Authority's first three year Corporate Plan was drafted at the end of 2007 and covered the period to the end of 2010. It is imperative that we remain relevant and in touch with the current realities for people using services, those providing services and the wider environment. Therefore, in recognition of the significant changes to our fiscal environment, the development of our second Corporate Plan was brought forward.

It is appropriate that we continually review our priorities in order to ensure that they are still appropriate. In so doing, we ensure that we use the resources allocated to us in the most cost effective way, cognisant of our responsibility as a public service body.

The objectives that are set out in this Plan are specifically focussed on endeavouring to deliver maximum impact for people. We have also taken the opportunity to reflect on and examine what we have learned to date and where further developments may be needed so that our programme of work is targeted very specifically and effectively over the coming years.

Key considerations in the development of the Plan have also included:

- what the impact of our work is intended to achieve for those using the health and social services
- what we have learned since we began our work
- where the greatest needs in the health and social care system are and where our efforts can be concentrated to gain maximum impact for people
- the wider environment and how to adapt our way of working within this environment
- relevant reports and policies of national significance
- the views of stakeholders in relation to what our priorities should be for the next three years.

Purpose of the Corporate Plan

The purpose of this Plan is to describe what the Authority aims to achieve between 2010 and 2012 and outline to people what they can expect the outcome of our work to mean for them.

A wide variety of our stakeholders have provided contributions regarding where they see the priority areas for the work of the Authority over the next three years. This has been invaluable in shaping this Plan and we are extremely grateful for all of the contributions received.

Contained within the Plan are *Strategic Objectives* that outline the direction for the Authority over the next three years, in order to deliver our statutory remit and facilitate sustainable improvements in health and social care services.

It is intended that this approach will keep the Authority focussed on what is most important and ensure that our objectives are fully in tune with the needs of the system and the reality of the wider environment. The strategic objectives that are identified for the next three years are forward-looking and will include preparing for additional functions which we anticipate will be assigned to the Authority during that time.

Main Areas of Work from 2010 to 2012

The main areas of work for the Authority, as outlined in the Corporate Plan and in the annual Business Plans, include the following areas:

- implementing a Healthcare Quality and Safety Standards and Monitoring Framework which will provide the structure for building improvements in the quality and safety of health services and will be used to underpin the future licensing of healthcare facilities
- expanding our Social Services Inspection remit for vulnerable people to include the independent registration and inspection of services for children in care and further supporting improvements in the quality of services for people with disabilities
- undertaking ongoing and periodic monitoring of services against the Authority's standards for the Prevention and Control of Healthcare Associated Infections across health care settings
- preparing for, and undertaking, supervisory functions assigned to the Authority in relation to monitoring the quality and safety of medical ionising radiation and designated functions within the Human Tissues Bill. The commencement of these functions will be subject to the enactment of legislation
- preparing for, and commencing as appropriate, functions assigned to the Authority which will be subject to the enactment of the Health Information Bill

- progressing the development of a number of technical standards for health information that will enable improved communication between information systems and clinicians, and information to be used to drive further improvements for patients
- further progressing the development of the Unique Health Identifier to drive more seamless, safer care for patients
- undertaking a series of Health Technology Assessments in priority areas that will inform current and future policy, investment and disinvestment decisions in a range of health technologies so that resources are used for the overall population health gain
- becoming the supervisory body for the recognising and monitoring of ethics committees for clinical trials in 2010 and for further supervisory functions for ethics committees subject to the enactment of the Health Information Bill
- further developing how we organise, govern and manage ourselves to ensure and demonstrate that we have strong corporate governance arrangements in place, efficient and effective business processes that promote “smart” regulation and value for money in the way that we use our resources.

In addition, and fundamental to our approach over the coming years, the Authority intends to develop a supportive role through specific initiatives aimed at driving sustainable improvements in health and social care services.

While our regulatory role is significant and necessary, we are committed to working with providers to help develop appropriate techniques and responses for areas within the services that require strengthening. For example, initiatives will be progressed around the development of key performance indicators in priority areas including emergency care and ambulance services, and a programme of engagement with relevant organisations in order to progress awareness and support for specific interventions led by the Authority.

The delivery of the Corporate Plan will be through the activities described in the annual Business Plans which will reflect the year-on-year programme of work to achieve our strategic objectives.

Given the changing environment, the Corporate Plan will be subject to review during this period to ensure that the Authority maintains the quality and safety momentum, in the right direction, by being adaptable and flexible to the needs of the system.

1 Introduction

1.1 Background

The establishment of the Health Information and Quality Authority (the Authority) represented a significant development in the move towards health service reform in Ireland. For the first time, an independent organisation was charged with setting quality standards for the delivery of health and social care services. In addition, the Authority was given a remit to inspect and monitor how these standards are being met.

The Authority was also tasked with the establishment of a health information improvement agenda so that meaningful, accessible and intelligently-used information could support safe, quality care. The health technology assessment function introduced the practice of assessing medicines, medical devices and other technologies for clinical and cost-effectiveness so that more informed decisions can be made on the best use of available resources.

Following its establishment in 2007, the Authority developed a three year corporate plan that was intended to span until the end of 2010. Because the environment has changed dramatically, and having a firm basis to apply the learning that we have gleaned from our work so far, the Authority has decided to review the original Corporate Plan earlier than required. We have developed a new Corporate Plan for the next three years to ensure that our objectives and approach are as relevant as possible.

In developing the new Corporate Plan we have reflected on what we have learned over the last three years in order to identify areas where we believe improvements are most required in the health and social care system. From this we developed a range of initiatives aimed at addressing these areas and we applied a set of criteria to these initiatives to help us prioritise them. These prioritisation criteria are described in detail in Appendix 1.

1.2 What have we achieved and what difference have we made to date

In structuring our objectives for the next three years, and determining where our work can affect greatest change, we reviewed what has been achieved since our work commenced and more importantly, what we believe the impact of those achievements has been. They span all the functions of the Authority and include:

- **Standards development**

We have embarked on a substantial programme of standards development work since establishment. The publication of standards is a tangible means by which to assess services.

More importantly, standards play a valuable part in informing what people receiving services can expect and what is required of those providing services.

For example, the *National Quality Standards for Residential Care Settings for Older People in Ireland* and the *National Quality Standards for Residential Services for People with Disabilities* clearly put residents at the centre of services, and place a focus on the importance of individual quality of life issues as experienced by a resident.

- **Patient safety initiatives**

We have contributed to the development of national policy on patient safety through involvement in the Commission on Patient Safety and Quality Assurance and will play a lead role in the implementation of the recommendations of the report of the Commission.

In addition, the Authority is the Irish coordinating agency and national contact point for the European Union Network for Patient Safety (EUNetPaS) with involvement in initiatives relating to education and training in patient safety and medication safety. This work provides a driver and conduit for best practice in patient safety and will continue over the next three years.

We have conducted investigations, where we believed there to be a risk to the health or welfare of people receiving services, and the recommendations contained in the reports from those investigations are being implemented. This has helped with the implementation of key concepts of evidence-based best practice in healthcare and in reducing the instances of unsafe healthcare.

- **Monitoring services**

We have monitored, and encouraged progress, towards implementing national standards for symptomatic breast disease and conducted detailed assessments at each designated specialist centre.

National hygiene reviews have been undertaken prior to the monitoring against the standards for the *Prevention and Control of Healthcare Associated Infections* that will commence during 2010. This activity and the resulting publication of reports should not only outline the quality of aspects of services in a facility, but should provide the public, and people using services, with the kind of information to support the questions that they may want to ask to safeguard their own care.

- **Inspections**

The inspection of residential care centres for older people and children's detention centres has commenced while the inspection of residential and special care centres for children remains ongoing.

Our inspection activity identifies unsafe practices in residential centres and foster care services, enabling the Authority to address issues as they arise.

Inspection activity also helps identify which services demonstrate best practice, and our reports include examples of this to support learning and development in the sector.

▪ **Evidence and information**

We have supported and highlighted the concepts of using evidence and information to drive high quality, safe, health and social care, through enabling the use of evidence-based standards, clinical audit, key performance indicators and quality information. A significant report that provided independent advice to the Minister for Health and Children relating to health information has been published, with recommendations for a new unique health identifier (UHI) for the population. This advice will inform the forthcoming Health Information Bill. As a result, the Department of Health and Children has set up a joint working group to further explore the governance and technical infrastructure required for a UHI in Ireland which will facilitate the safe, efficient and reliable use of information for the benefit of those using and providing the services.

Two health technology assessments (HTAs) have been undertaken to help support evidence-based decisions on the use of resources and an assessment of cancer screening resources has also taken place resulting in an alternative model for introducing colorectal screening. This model was outlined in our *Report on the Evaluation of the population health based screening programmes and implementation of colorectal cancer screening*. These assessments have informed the announcement by the Minister for Health and Children in January 2010 of the commencement this year of a national immunisation programme against human papillomavirus (HPV) to prevent cervical cancer and a population-based colorectal cancer screening programme. These programmes will, over time, contribute substantially to improving the outcomes for people with those types of cancer and the overall population health gain.

The Authority is hosting a major Health Technology Assessment international (HTAi) conference in Dublin in June 2010. This will enable Ireland to leverage international knowledge and expertise in the discipline of clinical and cost effective healthcare as well as bringing much needed revenue into the country.

Much of this work was undertaken while the Authority had a skeletal infrastructure. The Authority has now grown substantially and these achievements have helped establish the basis for future improvements. Although feedback and observed improvements have broadly demonstrated a positive impact from our work to date, we remain committed to the formal, independent, evaluation of our work to ensure that it is having a positive impact on the quality and safety of people's care.

2 Corporate Planning Context

The development of the Plan has been informed by the following main areas:

- the Authority's statutory mandate
- what we have learned to date
- the economic environment
- significant and relevant national reports
- consultation with our stakeholders.

2.1 The Authority's mandate

The statutory functions that inform the Authority's work are outlined in the Health Act, 2007 (and the Child Care Acts 1991 and 2001, Children Act 2001, Education for Persons with Special Educational Needs 2004, Disability Act 2005). A summary of the main functions are to:

- promote safety and quality in health and personal social services
- set standards for health and social care services (except mental health services which are monitored by the Mental Health Commission)
- monitor compliance with the standards
- conduct investigations on the safety, quality and standards of services where there is a serious risk to the health or welfare of a person receiving the services
- evaluate the clinical and cost effectiveness of health technologies including drugs and provide advice arising from the evaluation to the Minister for Health and Children
- make recommendations in respect of the services to ensure the best outcomes for the resources available to the Health Service Executive (HSE)
- advise, and make recommendations to the Minister for Health and Children and the HSE, about deficiencies in relation to the information in respect of services and the health and welfare of the population
- register providers and inspect designated centres for the residential care of older people
- inspect HSE residential care services for children, special care units, detention centres and foster services
- operate accreditation programmes and grant accreditation
- operate other schemes to ensure safety and quality as deemed appropriate.

2.2 What we have learned to date

Since establishment, we have undertaken a diverse range of work and have had significant engagement with people using services, those providing and managing services and other key stakeholders.

Where required, we have identified good practice and have made recommendations where improvements are needed. We have reflected on the common themes that have been repeatedly identified as areas that require further improvement across health and social care. These themes include the need:

- to move towards a far more person-centred approach to seamless health and social care
- for clear governance, accountability and decision-making arrangements both within facilities/services and between facilities/services
- for clear leadership and relevant development programmes to support the current and future leaders
- to have a “responsible person” (often a clinician) to be accountable for all aspects of the care episode for a patient
- to strengthen the management of services and the implementation of change
- to build capacity and capability to move towards a more evidence-based and informed approach to decision-making and business planning
- to openly and actively engage and communicate with people using services in order for them to shape their own care and inform the planning for others
- to build a culture of learning and using information to monitor and manage what’s important for the performance of high quality and safe services for patients.

This learning has informed the development of this Plan. It has shaped not only what we do, but also when and how we do it - particularly focusing on building more capacity and capability within the system.

2.3 The economic environment

When the first Corporate Plan was developed late in 2007, the climate was very different to that which prevails today. Value for money has always been central to our approach but never has this been more important than in the current social and economic context.

To ensure that the Authority is adapting appropriately to this changed environment, we decided to review our corporate strategy and bring forward a new Plan so that our work remains relevant and responsive to the changed environment and is focused on the current and future needs of people receiving services and those providing them.

2.4 Significant and relevant national reports

We have taken a keen interest in the findings of a number of reports published in the past year. These reports have been considered in the development of this Plan and include the:

- **Commission on Patient Safety and Quality Assurance**

The *Report of the Commission on Patient Safety and Quality Assurance* was approved by the Government and published in early 2009. This report contained recommendations specific to the role of the Authority, including the development of National Standards for Quality and Safety, standards for information management and technology and the development of a licensing framework for the future of healthcare facilities.

- **Report of the Commission to Inquire into Child Abuse 2009 (The Ryan Report)**

The Government's implementation plan arising from the Ryan Report recommended that the Authority:

- undertake registration and inspection of all children's centres, including special care units
- undertake registration and inspection of all residential and respite centres for children with a disability
- continue inspection of foster care services
- develop standards for child protection and commence inspection against these
- by September 2011
- develop guidance for the HSE for the review of serious incidents, including deaths of children in care.

Some of this work has already begun and, at the time of writing this Corporate Plan, a number of the functions recommended in the Ryan Report are being discussed with the Minister for Youth Affairs, and the Department of Health and Children, regarding the requirements for the commencement of the regulatory functions.

- **Report of the Special Group on Public Sector numbers and expenditure programmes**

This report outlined a range of measures aimed at reducing public expenditure and emphasised the need for efficiencies to be reviewed and impact assessments to be provided in support of the allocation of such funding. The Authority has been cognisant of the recommendations of this report in the context of its business model going forward.

- **Organisation for Economic Cooperation and Development (OECD) Report on the Irish Public Service**

This report highlighted key issues in the public services including a lack of strategic vision, poor leadership, limited accountability and performance evaluation, with many performance initiatives and isolated reforms failing to reinforce each other and act effectively in tandem.

It contained many recommendations aimed at greater efficiency and flexibility through staff mobility, accessing shared services and expanding networks. We have pursued this route by proactively staffing the Authority where possible, without increasing the public sector headcount disproportionately and will continue to reflect this approach where appropriate.

- **Health Research Group Action Plan 2010-2012**

The implementation plan arising out of the Health Research Group's work identifies a number of areas where the Authority can help to maximise the value of health service research by working with other agencies and government bodies to implement a series of actions. These actions include, building capacity in health technology assessment and driving improvements in health information, including the introduction of a unique health identifier.

- **Reports published by the Authority to date**

The Authority has published a number of significant reports since its establishment (listed at Appendix 3) all of which make recommendations for improving health and social care services. We will continue to build on this work and monitor the implementation of the recommendations.

2.5 Consultation with our stakeholders

The staff and Board of the Authority, in consultation with a variety of internal and external stakeholders, have prepared this Corporate Plan. We are acutely aware of the need to work closely with, and obtain feedback from, the public, people using the services and staff who work in health and social care services.

It is essential for us to maintain the commitment to ongoing and inclusive stakeholder interaction as a fundamental component in keeping our work real and of maximum impact for people. Feedback from stakeholders is critically important to our development as an organisation and being responsive to the needs of those involved in delivering and receiving services.

Above all, we are extremely aware of the experience of those who use Ireland's health and social care services. We have engaged with, and received feedback from, a wide variety of people with whom we've met in carrying out our work or who have contacted us directly. These shared experiences have also informed the development of this Plan.

We would like to thank the stakeholders (listed in Appendix 2) who provided views on priorities for the Authority over the next three years. These contributions have assisted us in focusing our work on the real and relevant priorities of the system.

3 The Vision for 2010 – 2012

The vision, mission and values of the Authority can be described as the beliefs of the organisation, which in turn inform the selection of activities and the approach we adopt to implement them. In essence, it can be described as the “personality” of the organisation.

3.1 Our Vision

Our vision is for better health and social care for all, underpinned by standards and decisions that inform and develop safety and quality.

3.2 What does our vision mean and how does it relate to the public?

While the above vision sets out what we strive to achieve, the staff of the Authority feel very strongly that it is important to convey what our vision means in practice and how it translates in a practical way to those using Ireland’s health and social services. Focusing on the desired impact of our work for people using services has helped shape our objectives in a more real and relevant way. Therefore, over the next three years, the public, people using and those providing services can expect that:

- our work progresses the development of high quality, safe, health and social care services
- people are assured that service providers are held accountable for providing safe, quality care and health and social services are provided consistently, in compliance with national standards
- people benefit from the more efficient use of information being applied across the health and social care systems
- people benefit from decisions that are based on best available evidence and the best use of resources
- people using services have an understanding of what safe quality care is and are enabled to use this to their benefit
- providers of services have an understanding of what safe quality care is and are enabled to use this to better lead, manage and provide the services
- health and social care providers are confident that the Authority will always act fairly, professionally and with respect
- the Authority is proven to deliver internal and external efficiencies while driving improvements for the benefit of people.

3.3 Mission and corporate 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 guide and direct all of the activities of the Authority.

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 an organisation. The core values of the Authority are shown in Figure 3.1.

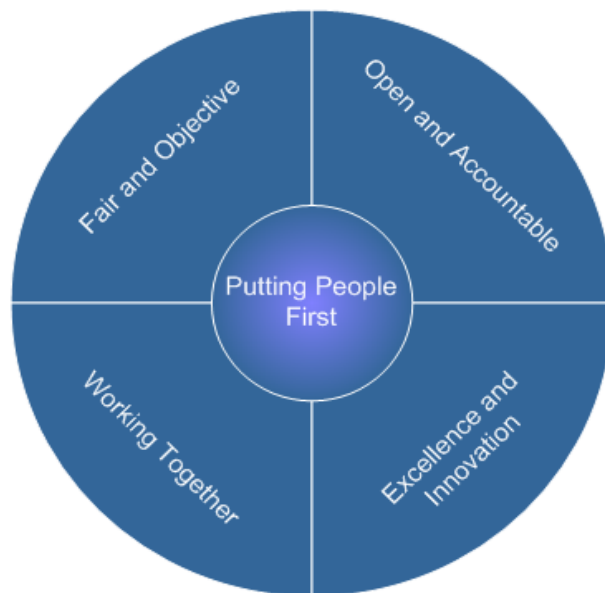


Figure 3.1: Core Values of the Authority

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.

4 Strategic Objectives for 2010 - 2012

Our vision of better health and social care for all has provided the basis for the development of our strategic objectives for 2010 to 2012. That vision has helped us focus firmly on the service user and what the outcome of our work is intended to achieve for their benefit.

The strategic objectives are as follows:

- 1. To develop effective regulatory systems for the quality and safety of health and social care that include national quality and safety standards, assessment and monitoring processes, measures and indicators.**
- 2. To implement a high impact regulatory programme that includes registering services as appropriate, monitoring performance through inspection against national standards, investigating potential risks to the health and welfare of service users and reporting publicly on our findings.**
- 3. To set standards to drive the efficient and effective use of health information and Information Communications Technology to improve the quality and safety of health and social care.**
- 4. To inform investment, or disinvestment, decisions that are safe, effective, maximise population health and wellbeing and achieve good value for money.**
- 5. To promote health and social services excellence by delivering a structured programme aimed at identifying and sharing good practice, building capacity and capability through the better use of resources and facilitating focused activity in proven safety interventions.**
- 6. To demonstrate, by 2012, that the Authority operates as an effective, efficient and well-governed organisation that positively impacts on health and social care services.**

The following outlines a summary of the work that the Authority will undertake over the next three years in relation to achieve these strategic objectives.

Strategic Objective 1:

To develop effective regulatory systems in the quality and safety of health and social care that include national quality and safety standards, assessment and monitoring processes, measures and indicators.

The Authority is mandated to set standards in services covered by the Health Act 2007, the Childcare Acts 1991 and 2001, Children Act 2001 and Health (Nursing Homes) Act 1990.

In order to fulfil this mandate, and achieve this strategic objective over the next three years, our work will include setting National Quality and Safety Standards and developing our programmes to monitor against them.

Our aim is to construct a regulatory system that is flexible enough to incorporate additional regulatory functions without having to redesign our approaches every time, thus shortening the implementation timescale, making most efficient use of resources.

The Authority is also working towards the development of relevant regulatory approaches for functions that have been assigned, or are likely to be assigned, to the Authority and commenced over the next three years. These new functions arise from legislation that is anticipated to provide for the regulation of human tissue retention, the use of medical ionising radiation and acting as the supervisory body for approved research ethics committees. The work of the social services inspectorate is also set to expand and is expected to include the registration and inspection of all residential centres for children and registration and inspection of all residential centres for people with disabilities.

Our targets until the end of 2012 will include:

- completing the development of, and consulting on, draft National Standards for Quality and Safety. And, as part of these Standards, finalising the health information governance and management standards
- developing *National Quality Standards for Residential and Foster Care Services for Children and Young People*
- developing the programme for the registration and inspection of all children's designated centres
- developing approaches for new regulatory functions, as appropriate
- preparing for designated functions provided for in the Health Information Bill, subject to its enactment, including being the supervisory body for approved research ethics committees
- preparing for the regulation of the retention of human tissue, subject to the enactment of the Human Tissue Bill
- preparing for the regulation of the safe operation of medical ionising radiation, subject to the enactment of the respective Statutory Instrument.

Strategic Objective 2:

To implement a high impact regulatory programme that includes registering services as appropriate, monitoring performance through inspection against national standards, investigating potential risks to the health and welfare of service users and reporting publicly on our findings.

The Authority is also mandated to monitor standards. It may investigate where there is reason to believe there is risk to the health or safety of persons receiving services.

The Authority will publish its findings and also actively follow up on the implementation of any recommendations arising.

Under the Health Act 2007, the Chief Inspector of Social Services has the power to register and inspect private, voluntary and public designated centres for children, older people and people with a disability and to enforce regulations and standards if required.

On July 1 2009, the Social Services Inspectorate (SSI) commenced the registration and inspection of designated centres for older people in Ireland. All designated centres for older people are required to be registered by the Chief Inspector by 1st July 2012. The SSI currently inspects statutory children's residential centres, special care units, foster care services and children detention schools and reports on findings to the Minister for Children and Youth Affairs.

As set out under Objective 1, additional functions are anticipated that over the period of this plan will mean extending the implementation of our operational delivery programme.

Our targets until the end of 2012 will include:

- monitoring compliance with national healthcare standards including the National Quality and Safety standards
- continuing and expanding the inspection of residential services for children
- continuing the regulatory programme of registration, inspection, compliance and enforcement for designated centres for older people and publication of reports
- undertaking annual census of relevant services and produce reports based on findings from inspections
- responding appropriately and effectively to information regarding potential risks to the health and welfare of service users, including investigating if appropriate.
- testing the inspection approach to the licensing of public and private healthcare providers and identifying synergies and efficiencies with our existing inspectorate
- using an agreed methodology, contributing to the development of key performance indicators in priority areas.

Strategic Objective 3:

To set standards to drive the efficient and effective use of health information and Information Communications Technology to improve the quality and safety of health and social care.

One of the Authority's functions under the Health Act, 2007 is to advise the Minister for Health and Children, and the HSE, on improvements needed in health information and to set standards in respect of data and information.

Safe, reliable healthcare depends on the access to, and use of, information that is accurate, valid, reliable, timely, relevant and complete. Information and Communications Technology (ICT) has a critical role to play in ensuring that information to drive quality and safety is available when and where it is required. The activities needed to achieve this strategic objective will seek to improve the quality and availability of information to support care delivery as well as decision-making, clinical audit, monitoring and planning.

Although there are a number of examples of good practice, the current ICT infrastructure in health and social care is highly fragmented with major gaps and silos of information. There is therefore a need to develop a coherent and integrated approach. Insofar as is possible, data should be captured at the point of care and therefore a major focus for the next 3 years will be the development of a standard approach to a national electronic health record.

Our targets until the end of 2012 will include:

- mapping the current major national health information sources including information uses, high level information flows and information models
- finalising a road map for the development of technical standards to support the communication between information systems, electronic health records, improving the current ICT infrastructure and progressing the development of these standards
- developing, and evaluating against, standards for national health information systems in order to improve quality, usability and increase usefulness of data collected
- evaluating and monitoring the implementation of technical standards.

Strategic Objective 4:

To inform investment, or disinvestment, decisions that are safe, effective, maximise population health and wellbeing and represent good value for money.

The Authority is mandated to advise on the clinical/cost effectiveness of health technologies. Over the next three years, the Authority's Health Technology Assessment (HTA) work will focus on delivering HTAs in priority areas in order to inform current and future policy and advise the Minister for Health and Children, and the HSE, on investment/disinvestment of new and existing health technologies. Evaluations will also be conducted in order to review the most efficient and effective use of resources for specific services, and or technologies, for the purpose of optimising the benefits for patients and the public.

National Guidelines for HTA will be developed by the Authority, in consultation with stakeholders, to promote the use of HTA to support investment/disinvestment decisions at a national and local level.

Our targets until the end of 2012 will include:

- undertaking HTAs and efficiency reviews, as appropriate
- developing a complete set of HTA guidelines
- collaboration in the EunetHTA Joint Action and other international initiatives to share information and harmonise HTA approaches
- to make recommendations on standards to support the implementation of unique health identifiers for professionals and organisations.

Strategic Objective 5:

To promote health and social services excellence by delivering a structured programme aimed at identifying and sharing good practice, building capacity and capability through the better use of resources and facilitating focused activity in proven safety interventions.

The Authority is mandated to operate schemes aimed at ensuring safety and quality in the provision of the services, where the Authority considers appropriate[±]. While one aspect of our work is focused on monitoring compliance with standards, and making recommendations where they are not being met, international evidence suggests that driving improvement can be more successful when this approach is complemented by identifying and building on strengths to enhance development and learning.

Therefore, we will be developing a supportive and collaborative approach with providers of health and social care services over the coming years. Schemes promoted by the Authority will focus on developing capacity and capability for sustainable improvements across the services. The Authority will identify opportunities to work in partnership with other agencies/government bodies in achieving this. The identification and promotion of emerging best practice, and showcasing examples of safe quality care, will also feature. In addition, our experience over the last three years suggests that some providers would benefit from access to templates or tools to help them plan and deliver quality and safety improvements.

The Authority will continue to demonstrate its commitment to communicating openly and honestly with all its stakeholders to improve the safety and quality of health and social care services, and to ensure we maximise the impact of our work. A key driver of our stakeholder engagement programme is to ensure that a common and shared understanding of the issues and challenges within the health and social care system is achieved.

Our targets to the end of 2012 will include:

- organising and facilitating workshops to progress the awareness of health information standards for stakeholders and relevant parties
- contributing to the development of key performance indicators for the purpose of monitoring, and supporting the management of, health and social care services
- undertaking consultation with relevant stakeholders to engage and involve them in driving improvements in a wide range of services
- contributing to the successful implementation of the Health Research Group's Action Plan
- providing tailored support in prioritised areas for quality and safety.

[±] 1 Health Act 2007, Section 8 (1) (g)

Strategic Objective 6:

To demonstrate, by 2012, that the Authority operates as an effective, efficient and well governed organisation that positively impacts on health and social care services.

In carrying out our work, and on behalf of people using services, we expect high standards from the health and social care providers whom we monitor and inspect. It is therefore incumbent upon us to ensure that we can demonstrate that we too operate to the highest professional standards, that we deliver value for money, are open, transparent and accountable.

We will ensure that we have appropriate corporate governance arrangements in place and have efficient and effective business processes to meet our own compliance requirements and manage our resources effectively and efficiently in order to deliver real benefits to our health and social care system.

Our targets until the end of 2012 will include:

- embedding best practice in corporate governance across the Authority
- continuing to review, and improve where necessary, our business processes, structures and work flows to ensure that we are organised to effectively manage our current and future work in a changing and challenging environment
- developing a programme of work with auditors, regulators and other assurance bodies to monitor and evaluate the performance of the Authority including independent reviews of the efficiency and impact of our work
- recruiting and retaining people with the skills, experience and values to help us deliver our objectives and setting clear goals for individuals, teams and the Authority and managing performance against these
- providing managers and staff with high quality learning and development programmes that support professional development, harvest knowledge and enable the effective delivery of our strategic objectives
- providing a healthy and safe working environment for our staff and complying with all relevant legislation
- demonstrating and applying sound financial management and reporting systems
- optimising our use of technology and ensure that information systems and resources are in place to enable staff to work efficiently and that interaction with the organisations we regulate and other stakeholders are in line with e-Government best practice.

4.1 Factors that may enable or inhibit our success

The current fiscal climate has had a significant impact on many sectors of society and on many health and social care services and is likely to be a prevailing factor over the period of this Corporate Plan. However, it also provides significant opportunities for creativity, efficiency innovation and lean management in the delivery of care. Opportunities are possible around the way we work over the next three years. These include:

- being more innovative in how we work and leverage skills, where possible in a cost-neutral way
- striving towards becoming a best practice model for public services
- acting as an agent for changing cultures and promoting the quality agenda
- supporting providers and service users in improving quality and safety including providing services differently, where required, in order to maximise patient outcome
- developing tools for building capacity and capability in the system
- using Health Technology Assessment to support the better use of resources and more informed decision making
- identifying how existing information in the system can be used more effectively for the benefit of those using the services and the providers.

Inevitably, there are also risks to the successful delivery of our work. Many of the risks which the Authority has identified previously have become even more relevant and have been reprioritised to reflect the changing environment. The potential risks to the Authority, which we need to be aware of and plan for, include the following:

- the output of the Authority's work not making a difference to, or improving, the public's experience of the health and social care services
- the economic downturn resulting in the Authority not being able to adapt accordingly and secure adequate funding for existing and potentially new activities
- the lack of adequate human resources within health and social care services which may have an impact on compliance with national standards or interventions set by the Authority
- damage to the credibility of the Authority due to poor work arising from overstretched and inadequate resources
- inability to demonstrate that we are internally robust and effective when at the same time directing other organisations on how they should operate
- legal challenges to untested statutory powers could absorb resources.

5 How the Authority will achieve its objectives

5.1 Internal structure and external collaboration

Organisational structure

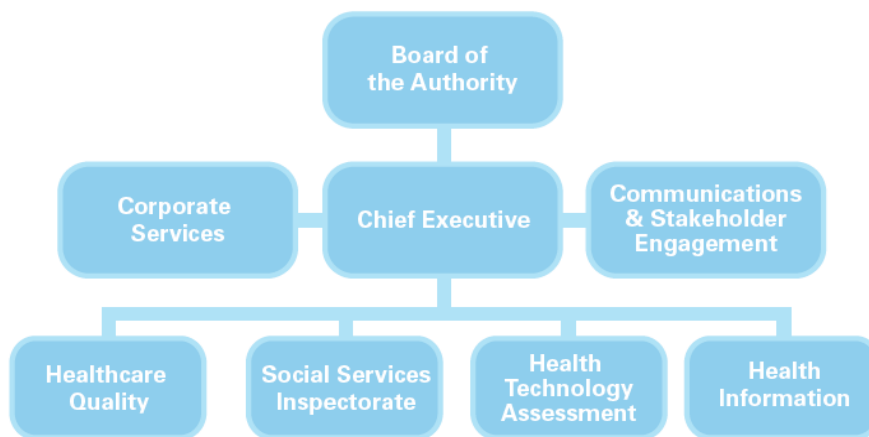
The Authority has four core functions, organised as Directorates, which include:

- Health Information
- Health Technology Assessment
- Healthcare Quality and Safety
- Social Services Inspectorate

In addition, there are three other Directorates: Communications and Stakeholder Engagement, Corporate Services and the Chief Executive's Office. These provide the necessary cross-organisational support, coordination and infrastructural services to ensure that the Authority is enabled to efficiently undertake its work in a well governed, well managed, accountable, open and transparent way.

The activities of Corporate Services relate to the core functions of finance, human resources, information technology and facilities management. The Communications and Stakeholder Engagement function has responsibility for the management of all Authority communications, both internal and external, and the coordination of stakeholder engagement. The Chief Executive's Office coordinates the Authority's statutory requirements, provides the support to the Board of the Authority and oversees the ongoing development and implementation of effective corporate governance and risk management arrangements

An overview of the internal management structure of the organisation, is outlined below.



Summary Overview of Directorate Functions:

Directorate	Function Overview
Healthcare Quality and Safety (HQS)	Developing person-centred standards for health and social care. Designing and implementing a monitoring programme to promote improvements in quality and safety standards in health. As deemed necessary, will undertake investigations when there are reasonable grounds to believe that there is a serious risk to the health or welfare of a person receiving services.
Social Services Inspectorate (SSI)	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 when there are reasonable grounds to believe that there is a serious risk to the health or welfare of a person receiving services.
Health Information (HI)	Identifying and advising on health information deficiencies; establishing an information governance framework and setting standards for health information and health information systems; evaluating and providing information on the provision of health and social services.
Health Technology Assessment (HTA)	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.
Communications and Stakeholder Engagement (Comms)	Managing all the Authority's communications and stakeholder engagements, with both internal and external audiences, and developing collaborative relationships across the health and social care systems.
Corporate Services (CS)	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.
Chief Executive's Office (CEO Office)	Providing oversight, direction and support to enable the Authority deliver its objectives effectively and efficiently and in a well governed way.

External collaboration

In accordance with our values, we will continue to work in a collaborative way with other stakeholders in order to ensure that productive relationships are developed, learning exchanged and best practice promoted. We will continue to seek advice and input from stakeholders on a project by project basis through consultation and expert advisory groups. In addition, we will identify initiatives that correlate with our objectives and are aimed at building capacity and capability in the wider health and social services. Where possible, we will leverage existing information and resources wherever efficiencies and benefits to the service users and providers can be achieved.

These relationships include the:

- wide-ranging stakeholder members of the Advisory Groups that the Authority establishes for the development of each specific programme of work. For example, for Health Technology Assessments, Standards development and Health Information activities. These members include service users, policy makers, managers, clinicians, technology industry, academics and national and international experts
- Health Technology Assessment Programme Advisory Group and the Scientific Advisory Group, with national and international stakeholders represented, that the Authority has established to advise on its methodologies and approach to prioritising Health Technology Assessments
- participation in the Implementation Steering Group and a number of Project Groups for the implementation of the recommendations from the Commission for Patient Safety and Quality Assurance
- participating in the Health Information Interagency Group for Health Information in Ireland
- participating in the Health Research Group to further the developments of health research nationally
- established panels that the Authority has set up for service providers and for friends and relatives of residents to ensure that there is a mechanism to enable healthy and constructive dialogue in relation to the provision of care for older people in residential settings.
- participation in the Health and Social Care Regulatory Forum which provides a mechanism for sharing thoughts and experiences on matters of common interest and allows for the development of more coherent operational approaches by the regulatory bodies across health and social care.

5.2 Performance management

The Authority is committed to measuring its own performance - not only to ensure that we can demonstrate tangible evidence of the impact that we aim to make on the quality and safety of services, but also to ensure that we subject ourselves to the same level of scrutiny that we expect of others.

As an organisation with a mission to drive high quality and safe services, we need to be certain that this is being achieved, from both internal and external perspectives. For this reason, we are committed to being externally reviewed so that the efficiency and impact of the Authority is independently assessed.

In the meantime, we will continuously monitor the recommendations we have made to date in respect of a number of services and will reflect improvements and related trends in services through the publication of our reports on service reviews and inspections.

The Authority is introducing a number of practical internal measures during 2010 in order to develop and improve on our existing performance management framework. These include internally developed project management and performance management development systems for all staff so that we can monitor our activities and support our staff, as effectively as possible.

A set of key performance indicators will also be monitored across a range of functions in the Authority. These will include human resources, finance and key operational activities of the organisation.

5.3 Resource, staffing and finance requirements

To achieve the proposed objectives for 2010 to 2012, we will require sufficient resources to carry out our work and will use these resources in as effective and efficient a manner as possible.

The Authority's primary source of income is the annual grant available from the Department of Health and Children. We are conscious of the many pressures on the exchequer in the current challenging economic climate. However, the delivery of the objectives set out in this plan is dependent on the appropriate level of resources. In addition, any new activities will need to be sufficiently resourced and support will be required to continue to develop our infrastructure to underpin the quality of the service we aim to provide.

The other source of income is fees charged to providers registered with us. These fees are set by the Minister for Health and Children and contribute to the costs of regulating the centres that pay the fees.

The key resources we require are people with the skills, experience and values to help us deliver our objectives. Our structures must be appropriate to deliver our

functions and we will review these in the light of any changing circumstances. We are committed to getting the maximum benefits from technology and information systems to enable staff to work efficiently. We will set clear goals for individuals and manage performance against these and we will provide managers and staff with learning and development programmes that support professional development and corporate objectives.

It is of particular importance for us to have the underpinning information management systems in order to be able to use information intelligently, and consequently provide "smart", efficient and proportionate regulation, and also to provide knowledge back into the system for it to learn from.

If there is a shortfall in staffing or financial resources, the implementation of the Plan will be adjusted accordingly. The consequent impact will be established and a revised Plan, including revised targets, will be prepared and submitted to the Minister for Health and Children.

6 Conclusion

Much has been done since we were established in May 2007 and we have seen significant improvements in how a range of services and providers can deliver and demonstrate safe, quality care. However, this is only the start of our work. For the next three years we are conscious of the need for our work to drive improvements in services that we are yet to engage with. We also recognise the need for continued, sustainable, improvements in the quality and safety of services that we have been working with.

Through our work we have identified a number of issues and areas of concern that service users, service providers, managers and staff have. We know that there is an enormous appetite for initiating improvement and there is a strong momentum building and, as part of the role of the Authority, we must enable and facilitate that momentum in order to build a sustainable platform for a reliable health system.

While we have a very important regulatory role, we also have essential roles in advising on health information, informing decision-making, supporting and promoting the capacity and capability of the health and social care system and reporting to the public on the quality and safety of services. We will work with all those involved in our services, whether providing or receiving services, so that a collaborative approach is used for the benefit of all.

Finally, we would like to thank all those that have worked with us since establishment. We recognise the huge efforts that have made from both within the Authority, and external to the Authority, in striving to implement change for the benefit of us all. We look forward to working with you over the next three years so that real sustainable improvement is achieved and that we can meaningfully maintain and build on our work to play our part in developing a world class health service in Ireland.

Appendix 1: Prioritisation Criteria

We are very aware that innovation and imagination are necessary, particularly in the current climate, to obtain maximum impact for the public funds allocated and will therefore be proactive in applying this approach to its activities. To maximise the impact of our activities, we have applied the criteria set out in the following table in deciding our objectives.

1. Impact	Level of system impact not necessarily in terms of numbers directly affected but rather with the potential for a 'ripple effect' across the system
2. Improvability	Improvement is a real and achievable aim in current context
3. Implementability	Can be realistically implemented in an environment characterised by capacity and capability challenges outlined in the Quality & Safety Mode
4. Alignment	Aligned with and complements existing national policy and priorities
5. Use of HIQA Resources	Optimises use of HIQA resources

Appendix 2 External stakeholder consultations

The following organisations inputted to this corporate plan, by providing their views on priority areas of work for the Authority between 2010 and 2012.

The Authority wishes to express its sincere gratitude to all.

- 1 Age Action
- 2 Age and Opportunity
- 3 An Board Altranais
- 4 Barnardos
- 5 Citizen Information Board
- 6 Crisis Pregnancy Association
- 7 Department of Social and Family Affairs
- 8 Economic and Social Research Institute
- 9 Europa Donna Ireland
- 10 Food Safety Authority of Ireland
- 11 HSE - Consumer Affairs Corporate Office
- 12 HSE - Corporate
- 13 Inclusion Ireland
- 14 Independent Hospital Association of Ireland
- 15 Institute of Community Health Nursing
- 16 Irish Advocacy Network
- 17 Irish Association for Palliative Care
- 18 Irish Hard of Hearing Association
- 19 Irish Heart Foundation
- 20 Irish Hospice Foundation
- 21 Irish Medical Organisation
- 22 Irish Pharmaceutical Healthcare Association
- 23 National Cancer Screening Services
- 24 National Disabilities Association
- 25 National Federation of Voluntary Bodies
- 26 National Treatment Purchase Fund
- 27 Office of the Ombudsman
- 28 Ombudsman for Children
- 29 Pharmaceutical Society of Ireland
- 30 St Vincent's Hospital

Appendix 3 Published reports since establishment

The Authority has published the following publications to date since it was established in May 2007:

2010:

- 10 - March 2010: Guidance for the HSE for the Review of Serious Incidents including Deaths of Children in Care
- February 2010: International Review of Unique Health Identifiers for Individuals
- 25 February 2010: Report into the Quality and Safety of Symptomatic Breast Disease Services in Ireland
Plus 8 individual reports, one on each of the designated centres: Beaumont Hospital, Cork University Hospital, Mater Misericordiae Hospital, Midwestern Regional Hospital Limerick, St James's Hospital, St Vincent's Hospital, University Hospital Galway, Waterford Regional Hospital
- 10 February 2010: Draft Standards for the Safety of Children in Residential or Foster Care
Plus an easy to read Guide to the Draft Standards
- January 2010: An "As Is" Analysis of Information Governance in Health and Social Care Settings in Ireland
- 15 January 2010: Evaluation of the use of resources in the national population-based cancer screening programme and associated services

2009:

- 21 October 2009 –
16 December 2009: National Hygiene Services Quality Review 2009 - 9 Local hospital reports: Our Lady of Lourdes Hospital, Drogheda; Adelaide and Meath Hospital incorporating the National Children's Hospital; Mercy University Hospital; Roscommon County Hospital; St Luke's General Hospital Kilkenny; Mid-Western Regional Maternity Hospital; Midland Regional Hospital at Mullingar; St Columcille's Hospital; Cappagh National Orthopaedic Hospital
- December 2009: International Review of Information Governance Structures
- 04 November 2009: National Children in Care Inspection Report 2008
- 01 July 2009: Guidance for Nursing Home Providers

- including: A guide to registration, Are you ready for your inspection?, Guidance for providers on compliance, Code of Conduct, Fit-person Entry Programme, Notifiable Events, Notification forms
- 29 June 2009: Recommendations for a Unique Health Identifier for Individuals in Ireland.
- 17 June 2009: Health Technology Assessment (HTA) of a population-based colorectal cancer screening programme
Plus the Outline Summary and the Advice to the Minister
- 29 May 2009 Business Plan 2009
- 27 May 2009: National Standards for the Prevention and Control of Healthcare Associated Infections
Plus the easy to read version of the National Standards
- 19 May 2009 2008 Annual Report
- 11 May 2009: National Quality Standards: Residential Services for People with Disabilities in Ireland
Plus an easy to read version, public friendly version and mp3 version
- 09 April 2009: Report of the investigation into the quality and safety of services and supporting arrangements provided by the Health Service Executive at the Mid-Western Regional Hospital Ennis.
- 09 March 2009: National Quality Standards for Residential Care Settings for Older People in Ireland
Plus an easy to read version and Your Right to Know leaflet
- 2008:**
- 22 December 2008: National Hygiene Review 2008
Plus 51 individual reports, one for each hospital in the Country
- 16 September 2008: Draft National Quality Standards: Residential Services for People with Disabilities
- 28 August 2008: Corporate Plan 2008 - 2010
- 26 August 2008: Business Plan 2008
- 05 August 2008: The Role of Human Papillomavirus (HPV) Vaccines in Reducing the Risk of Cervical Cancer in Ireland

August 2008:	Code of Governance Manual for the Authority
15 July 2008:	Investigation Report into the Pathology Service and the Symptomatic Breast Disease Service at University Hospital Galway
10 July 2008:	STARSwab: Evaluation Project
25 June 2008:	2007 Annual Report
04 June 2008:	Health Technology Assessment of the Role of Human Papillomavirus Vaccines in Reducing the Risk of Cervical Cancer in Ireland
03 June 2008:	Draft Infection Prevention and Control Standards: A Consultation Document
June 2008:	National Hygiene Services Quality Review 2008: Standards and Criteria
26 May 2008:	Communications and Stakeholder Engagement Strategy
02 Apr 2008:	Report of the investigation into the circumstances surrounding the provision of care to Rebecca O'Malley, in relation to her symptomatic breast disease, the Pathology Services at Cork University Hospital and Symptomatic Breast Disease Services at the Mid Western Regional Hospital, Limerick
11 Mar 2008:	National Quality Standards for Residential Care Settings for Older People Plus easy to read version
2007:	
13 Nov 2007:	National Hygiene Services Quality Review 2007
10 Oct 2007:	The placement of children aged 12 and under in residential care in Ireland
08 Aug 2007:	Draft National Quality Standards for Older People's Residential Settings

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