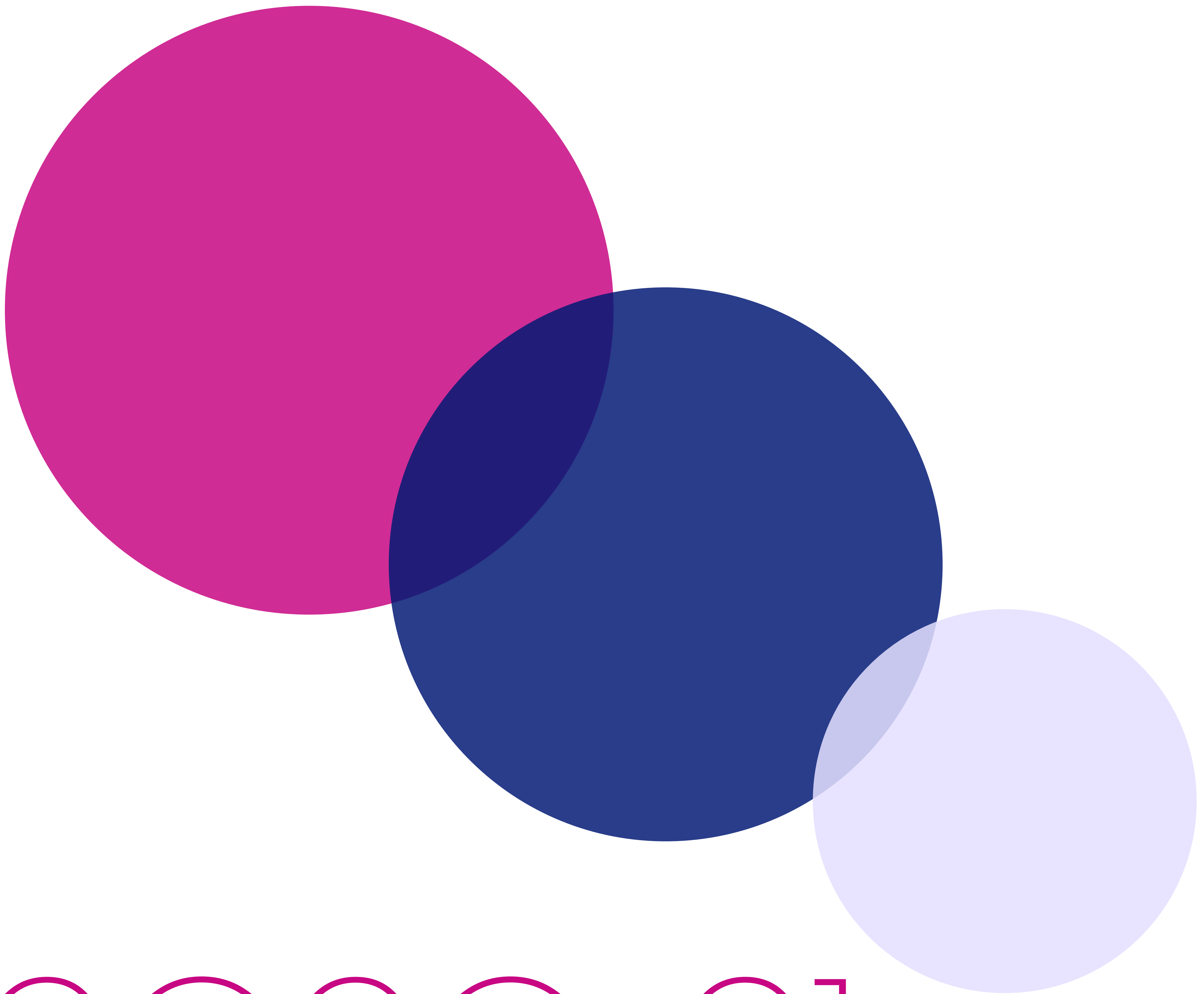




The Regulation and
Quality Improvement
Authority



2020-21

Annual Quality
Report

Table of Contents

02	Foreword
03	Introduction
04	Strategic Goal 1: Transforming the Culture
10	Strategic Goal 2: Strengthening the Workforce
12	Strategic Goal 3: Measuring the Improvement
20	Strategic Goal 4: Raising the Standards
22	Strategic Goal 5: Integrating the Care
23	Learning from the Covid-19 Pandemic



Foreword

This is the Regulation and Quality Improvement Authority's (RQIA's) eighth Annual Quality Report, covering the period April 2020 to March 2021.

The report provides an overview of how RQIA aligns its quality improvement activities to the Department of Health's ten year strategy designed to protect and improve quality in health and social care in Northern Ireland; Quality 2020[1]. It also provides the opportunity to report on how the functions and processes of regulation are operating, evidence of our findings and actions taken to secure quality improvement.

Quality and quality improvement is central to all RQIA plans and the work that we do. As Northern Ireland's regulatory and improvement body for health and social care services, covering both statutory and independent providers, RQIA has an important role in providing assurance, to the public and to the Department of Health, that care provided is safe, effective, compassionate and well-led. RQIA's work programmes aim to assure that as a result of the inspections we carry out, the reviews we undertake, the improvement requirements that we set out with providers of services, that people in Northern Ireland experience a better quality of health and social care.

The work of regulation aims to secure quality health and social care service provision and evidence of continuous improvement, continuing to raise standards. We embed those aims into our plans and work programmes, underpinned by effective governance and corporate performance management arrangements.

RQIA measures improvement in quality across health and social care through inspection of services and facilities, and review programmes against key themes and issues of concern. These programmes assesses the arrangements in place to ensure the delivery of safe, effective, compassionate and high quality care in line with relevant legislation, standards and guidance, as well as the quality of leadership and management in those services which are subject to regulation and review.

A vital part of inspection and review is listening to the experience of service users, and their families and carers. Lived experience is one of the most important aspects of seeking evidence of quality.

As well as listening and talking with service users and others, we receive information and intelligence reported to us.

During 2020-21, RQIA's Service Support /Guidance Team received and responded to a range of complaints and whistleblowing events. These enabled us to capture concerns about health and social care services. From individual experiences of care and through reports and intelligence shared with us, all of this adds to the intelligence used when deciding what regulatory action is required in a range of circumstances. The role of RQIA is an independent regulator of health and social care services.

Independence is important to ensure consistent application of the legislation arrangements under regulation. We challenge poor practice and safeguard the rights of service users. We inform the public of our findings through the publication of our reports and we seek to assure public confidence in health and social care through independent, proportionate and responsible regulation.

While the function of regulation and its application must be independent, RQIA will continue to strengthen our work by building partnerships and collaboration with our communities, with other statutory organisations, with professional regulators and with the wider social endeavours across the region. Partnership creates opportunity for learning, sharing experience and skills, and for securing improvement.

The 2020-21 year has presented many challenges across our whole communities. The health of our population is affected and many have suffered the direct impact on their own health and for loved ones. Health and social care services have experienced the impact of, and continue to respond to, the tremendous challenges of the Covid-19 pandemic.

Throughout this pandemic we will continue to safely carry out the work of regulation, supporting health and social care providers and staff to maintain standards, quality and safety for both service users and for people working within these vital services.

Briege Donaghy
Chief Executive

Introduction

This is RQIA's eighth Annual Quality Report, which provides an overview of how RQIA's quality improvement activities are aligned with Quality 2020: A 10- Year Strategy to Protect and Improve Quality in Health and Social Care in Northern Ireland. It describes RQIA's progress in the areas of quality and continuous improvement from 1 April 2020 to 31 March 2021 to support the delivery of Quality 2020's strategic goals.

The report highlights examples of practice RQIA has contributed to and which are significant in assuring and improving the quality of health and social care for all those in receipt of these services; as well as what RQIA has learnt from the Coronavirus Pandemic; and how RQIA will move forward. This report is focused on the five strategic goals of Quality 2020:

- **Transforming the Culture**
- **Strengthening the Workforce**
- **Measuring the Improvement**
- **Raising the Standards**
- **Integrating the Care**

As Northern Ireland's inspection and improvement body for health and social care, RQIA has a clear vision for how its activities ensure care is safe, effective, compassionate and well-led. Its work programmes help to support and regulate providers to ensure that people in Northern Ireland can experience a better quality of health and social care services.

RQIA registers and inspects a wide range of independent and statutory health and social care services. Through its Review Programme it assures the quality of services provided by the HSC Board, HSC Trusts and Agencies. It also undertakes a range of responsibilities for upholding quality of care for people with mental ill health and those with a learning disability.

RQIA is committed to working closely with providers of health and social care services so that they can deliver improved care. RQIA is also dedicated to hearing and acting on the experiences of patients, clients, families and carers. It is only by working in partnership with users and providers of care that RQIA can effectively encourage and influence improvement.

Through its work, RQIA provides assurance about the quality of care, challenges poor practice, promotes improvement, safeguards the rights of service users and informs the public through the publication of its reports.

RQIA has adopted the regional HSC Core Values. These are: working together; excellence; compassion; and openness and honesty; they underpin all RQIA's work.

RQIA is committed to contributing to the delivery of the Department of Health's Quality 2020 Strategy through its programmes of work, which aim to support and encourage continuous improvement in the quality of Northern Ireland's health and social care services.

Strategic Goal 1: Transforming the Culture

We will make achieving high quality the top priority at all levels in health and social care. We will promote and encourage partnerships between staff, patients, clients and carers to support decision making.

Governance and Assurance

RQIA's Authority and its Sub-Committees are responsible for the oversight of corporate performance and governance arrangements within the organisation. Through regular meetings, Authority Members assess corporate performance reports, which detail the organisation's progress against strategic and operational aims and objectives and its commitment to quality improvement.

As part of the Transition Plan 2020-21, the RQIA Governance Framework was refreshed.

This resulted in an easy-read document, which sets out the roles, responsibilities and procedures for the effective and efficient conduct of its business.

It also highlighted the internal and external elements of governance, outlining a timetable for key governance documentation to be presented to the RQIA Board, its Committees and the Executive Management Team.

As part of RQIA's Performance Management Framework, regular performance management meetings for the two Directorates and Business Support Unit took place. These provided the opportunity for detailed reporting against key performance indicators and progress in meeting set objectives for each Directorate.

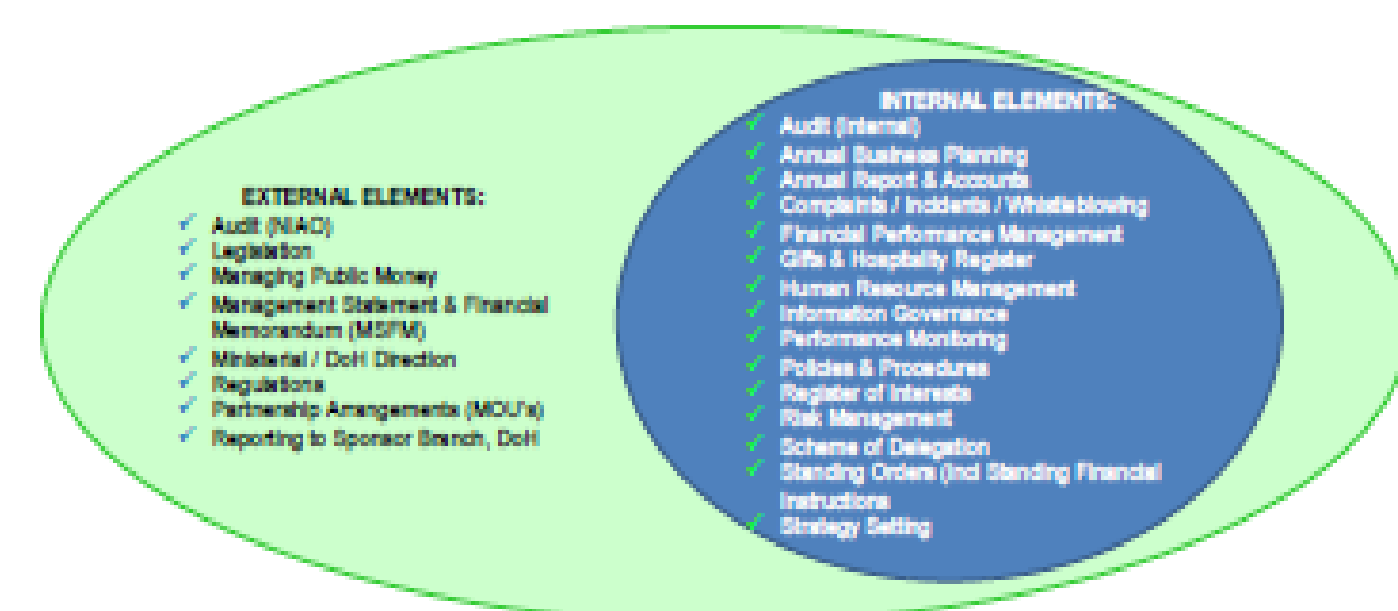
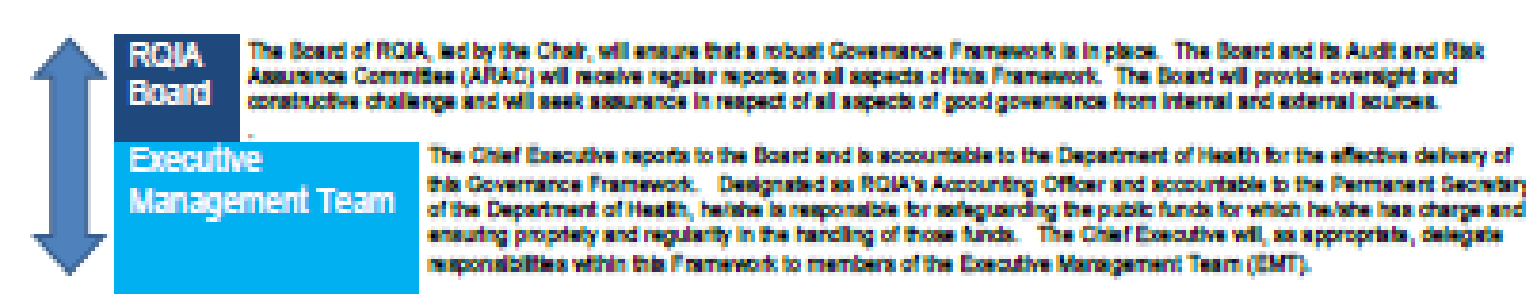
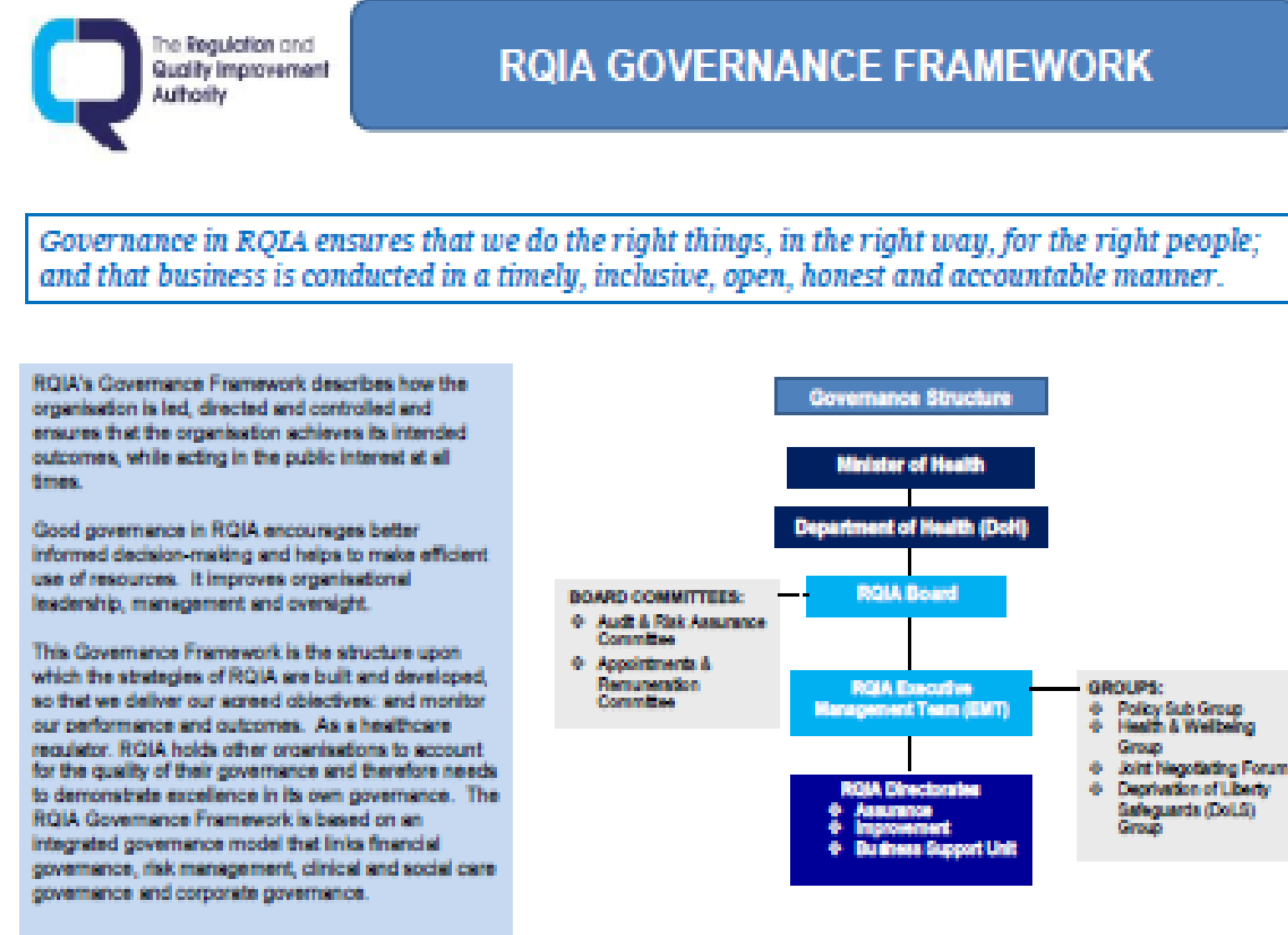
RQIA's Directorate Teams reported on their performance to the Authority Board, showing steady progress on the delivery of the actions identified within the Transition Plan.

Through its Audit and Risk Assurance Committee (ARAC), RQIA also developed a new approach to ensuring the effective identification and management of risks, in our Risk Management Strategy. These were monitored and managed by the Authority through review of the Principal Risk Document.

RQIA's programme of internal audit provides the Authority Members and the Department of Health with assurance on governance arrangements. During the year, the following areas were audited:

- **Financial Review – Limited - Financial governance and oversight and budgetary control Satisfactory - Payroll and Non-Pay Expenditure (October 2020). There was a substantive follow-up in March 2021, which provided Satisfactory assurance;**
- **Intelligence Monitoring – Limited level of assurance received;**
- **Recruitment and Absence Management – Limited level of assurance received.**

RQIA's response to address the recommendations arising from each audit are shared with Authority members through RQIA's Audit and Risk Assurance Committee. The Committee monitors progress through its meetings and provides assurance to the Authority.



Good governance is dynamic and RQIA is committed to improving governance on a continuing basis through a process of evaluation and review.

October 2020

Driving Quality Improvements for Service Users: Listening to the Voice of the Public

The majority of RQIA inspections are unannounced and therefore families will not be aware when inspections are taking place. Due to restrictions in visiting, the Covid-19 pandemic impacted on RQIA's opportunities to meet face-to-face with the family members of those in health and social care services. However, RQIA continued to encourage the public to contact its Guidance Team by telephone or email, where they had queries or concerns relating to their loved one's care.

RQIA's Guidance Team

RQIA Guidance Team inspectors are on duty each day responding to calls from service providers and the public, and during 2020-21 we received over 5,900 calls (see figure below). While the majority of these calls were from staff and management seeking advice and guidance, RQIA also received almost 700 calls from service users and members of the public and concerned relatives wishing to discuss queries or concerns about care services. In each case the Guidance Team inspector listens to the caller, ascertains the issue, and provides appropriate advice. Details of the call are recorded on the i-Connect information system.

Where specific concerns are raised the information provided is assessed and a decision reached on how best to respond. This may include following up the issues raised with management of the service; conducting an unannounced inspection to investigate the concerns; and where necessary, taking enforcement action.

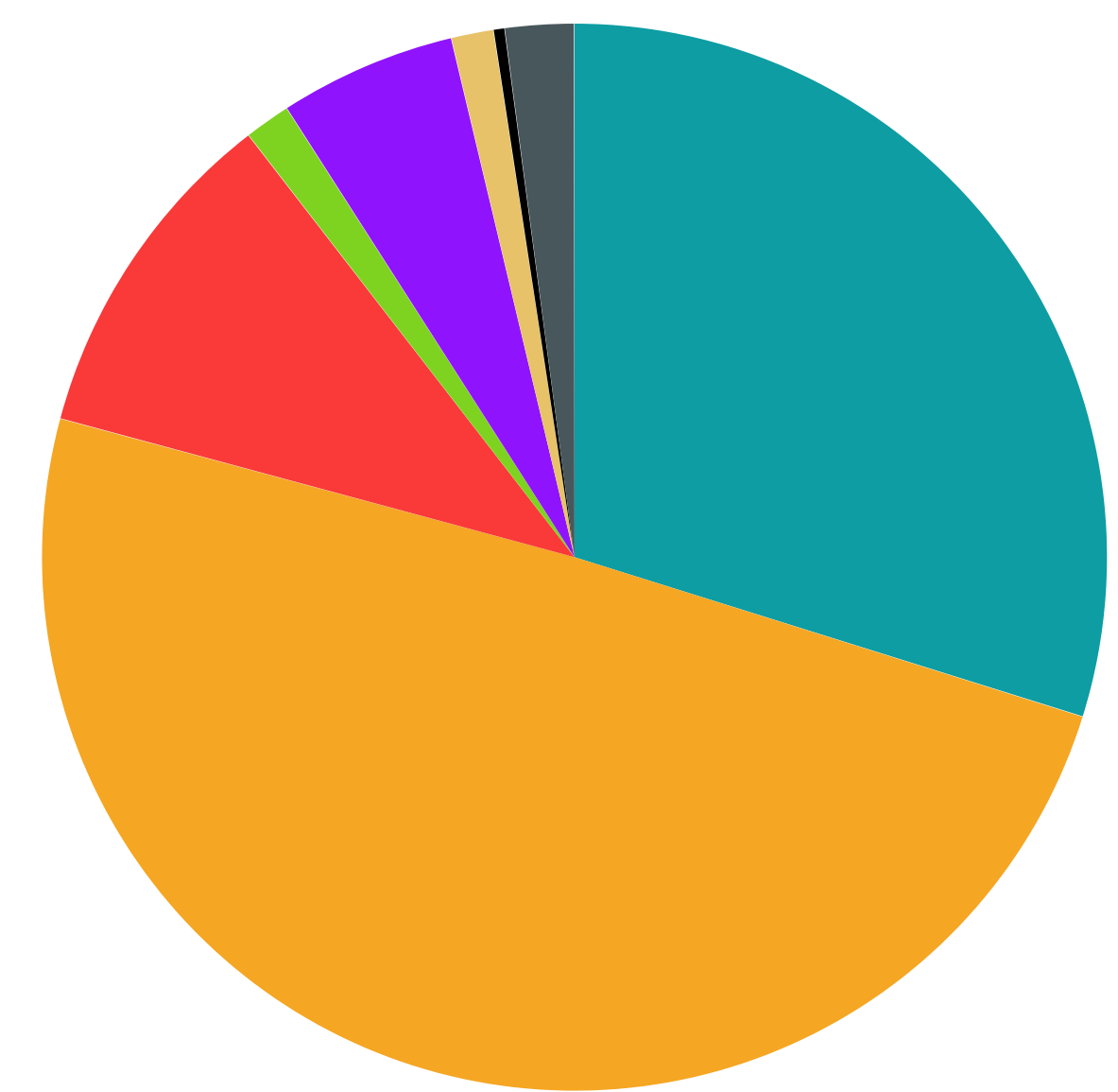
Complaints about Health and Social Care Services

RQIA takes every concern brought to its attention about a health and social care service seriously. The information is carefully considered and assessed to determine if there are any issues that require the immediate action by RQIA. Where necessary RQIA will undertake an inspection or follow the issues up with partner organisations, including the relevant Health and Social Care Trusts.

RQIA's "How Can I Raise a Concern ..?" leaflets provide advice and guidance to support the public in raising a complaint about a service. While RQIA does not have legal powers to investigate complaints about services, RQIA provides contact details for organisations that can help in taking a complaint forward- including the Patient and Client Council and the Health and Social Care Trusts. Where a complainant is dissatisfied with the service's response to their complaint, they may raise this matter with the Northern Ireland Public Service Ombudsman.

Every health and social care service is required to have its own complaints policy and procedures in place. RQIA checks that these are in place during its inspections of these services.

In November 2020, the Patient and Client Council, in partnership with RQIA, the HSC Board and Public Health Agency, established a platform to strengthen engagement and build relationships with relatives of people living in care homes. On a weekly basis, relatives and their representative organisations had an opportunity to discuss concerns in relation to care and visiting and care partner arrangements. These video meetings were also attended by representatives from the Commissioner for Older People Northern Ireland, Age NI and the Alzheimer's Society, and Care Home Advice Support Northern Ireland.



- Current/Former Service Staff (1,764) (29.84%)
- Service Manager (2,917) (49.35%)
- Public/Relative of Service User (611) (10.34%)
- Current/Former Service User (82) (1.39%)
- HSC Trust (317) (5.36%)
- Public Health Agency (77) (1.3%)
- Patient and Client Council (19) (0.32%)
- Other Organisations(124) (2.1%)

HOW CAN I
RAISE A CONCERN
ABOUT AN
INDEPENDENT
HEALTH AND
SOCIAL CARE
SERVICE?



www.rqia.org.uk

Whistleblowing

Under the public interest disclosure legislation anyone wishing to raise concerns about wrongdoing in their workplace can bring these to the attention of RQIA. In 2020-21 RQIA was contacted by telephone, email and in writing by 219 staff, from a range of statutory and independent health and social care settings, who wished to raise concerns about the services being provided in their workplace. This information provides RQIA with an invaluable insight into services, and included concerns around the quality of care, staffing issues, management and general care concerns.

While many staff provided their name and contact details, allowing further information to be sought on their concerns, others wished to remain anonymous. In each case RQIA carefully considered the information to determine what action was required. Where necessary, we conducted unannounced inspections to follow up on concerns, and to drive improvements in quality for those using these services.

Commitment to Excellence

RQIA is strongly committed to ensuring that all its work is of the highest quality. It operates within a shared culture of excellence. RQIA has adopted the regional health and social care values, which underpin its work.

These values are:



RQIA endeavours to live these values in all that it does and how it behaves with service users, providers, carers and the general public. These values also underpin staff behaviours and our personnel management. RQIA is an 'Investors in People' accredited organisation and supports its staff through regular supervision meetings and its staff appraisal programme, where performance is discussed; difficulties identified and achievement is celebrated.

Listening to Staff

The Chief Executive and Executive Management Team lead regular staff meetings, where the latest news is shared. These provide senior management with an opportunity to listen to staff and encourage them to be involved in decision-making, problem solving and innovation. The meetings also provide a platform for staff to share examples of best practice with colleagues across RQIA. Staff contribute to the agenda to ensure the meetings are relevant to employees at all levels.



Complaints About RQIA

As a learning organisation, RQIA welcomes contact from people with concerns about its own actions or how it conducts its work.

During the year, RQIA implemented recommendations from an internal audit of its complaints processes. In August 2020, the Authority approved the implementation of a new, more streamlined and user-friendly complaints policy and procedure for RQIA, taking on board feedback from internal audit and learning from previous complaints. Key staff also undertook training in relation to both whistleblowing and complaints investigations.

Whilst a number of health and social care organisations paused their complaints activity during the pandemic, RQIA continued to accept and manage complaints about the organisation throughout the year. This required a change in approach to some aspects of complaints management, such as complaint meetings taking place via video-conferencing rather than in face-to-face meetings.

RQIA received ten complaints or expressions of dissatisfaction in relation to the work of RQIA during 2020-21. The majority of these related to inspection processes and oversight of health and social care services. Each complaint was managed in line with RQIA's complaints policy and procedure, which reflects the approach laid out in the regional HSC Complaints.

Each complaint was reviewed to determine any learning for the organisation. This learning was then applied to help improve a service we deliver, or where something has gone wrong, to help ensure it does not occur again. Where there are themes or trends in complaints, these are analysed to help ensure any broader learning for RQIA can also be applied.

Where a complainant remains dissatisfied with RQIA's response to their complaints, they are advised of their right to bring their complaint to the Northern Ireland Public Services Ombudsman (NIPSO).

Engaging with the Public

Due to restrictions in visiting, the Covid-19 pandemic impacted on RQIA's opportunities to meet face-to-face with the family members of those in health and social care services. However, RQIA continued to encourage the public to contact its Guidance Team by telephone or email, where they had queries or concerns relating to their loved one's care.

In November 2020, the Patient and Client Council, in partnership with RQIA, the HSC Board and Public Health Agency, established a platform to strengthen engagement and build relationships with relatives of people living in care homes. On a weekly basis, relatives and their representative organisations had an opportunity to discuss concerns in relation to care and visiting and care partner arrangements.

These video meetings were also attended by representatives from the Commissioner for Older People Northern Ireland, Age NI and the Alzheimer's Society, and Care Home Advice Support Northern Ireland.



RQIA is committed to increasing effective engagement with the public and stakeholders to achieve improvements in the safety and quality of services.

During the pandemic due to restrictions on footfall in health and social care settings, it was challenging for RQIA to involve lay assessors in its inspection and review activities. However, as part of RQIA's Transition Plan an increased focus has been placed on the involvement of service users, carers and other stakeholders in RQIA's work.

This included plans to evaluate new models to support the full integration of lay assessors within RQIA's assurance and inspection activities. This work has involved coproduction with the Patient and Client Council, relatives of service users and other individuals and organisations.

Digital Communication

Throughout the year RQIA continued to add new and updated content to its website www.rqia.org.uk to support service providers and the public alike. During 2020-21, RQIA received around 170,000 visitors, resulting in over 750,000 webpage views, a 25% increase on the previous year.

To date, over 14,000 inspection reports for both regulated and HSC trust services have been published and are available directly through the search function on the RQIA homepage. Our inspection pages continue to be the most visited part of the website, with over a quarter million page views during the year. In response to feedback from those visiting the website, each month we publish a list of recent inspection reports made available online over the previous month.

From April 2020, RQIA provided a range of useful resources for service providers and the public relating to Covid-19, which were updated regularly as the pandemic progressed. These pages were accessed almost 90,000 times during the year, a three-fold increase on visits to our Guidance pages during 2019-20. RQIA's website hosted daily updates on the latest PPE supply information from the Department of Finance to allow care homes and domiciliary care agencies to source this essential equipment for their services. This password protected information was accessed by providers almost 2,000 times during the first wave of the pandemic.

Political Engagement

RQIA continued its engagement with representatives from the main political parties, through meetings with representatives, including their health and social care spokespersons, to discuss the role of RQIA and specific areas of interest. Where RQIA undertook significant actions, for example, to cancel the registration of a service the Chief Executive liaised directly with local political representatives to ensure they were fully briefed on the rationale for the action and on the carefully considered steps being taken to ensure the ongoing safety and wellbeing of residents.

In May 2020, RQIA's Acting Chief Executive appeared before the Northern Ireland Assembly's Committee for Health to provide an overview of its role and actions to support care homes and domiciliary care services during the first weeks of the Covid-19 pandemic. In October 2020, RQIA's Interim Chief Executive and Acting Director of Improvement provided evidence to the Committee as part of its inquiry into the impact of Covid-19 on care homes.



At the start of the pandemic RQIA commenced an initiative, using a smart phone app to collect data and to receive requests for assistance from independent sector providers. The value of this data to help support the regional health and social care response to the pandemic was recognised. In June this reporting arrangement was enhanced and on behalf of the Department of Health, PHA, HSC Board and trusts, RQIA collated daily status reports from information submitted by care homes via its Provider Web Portal. This included information on the number of cases, and issues arising which required support or intervention from the Public Health Agency, local HSC trusts or RQIA.

Through its social media channel, RQIA also directs visitors to its website via @RQIANews, the RQIA's Twitter account, where new web-based content can be highlighted immediately to over 5,000 followers.

In its report the Committee for Health recognised the strength of the evidence expressing appreciation for the support and advice provided by RQIA, particularly during the first difficult months of the pandemic, through the first point of contact Service Support Team and on-site support teams assisting care homes to improve infection prevention and control. This service was welcomed by care home staff and other stakeholders such as Positive Futures, Independent Health and Care Partnership (IHCP) and the Royal College of Nursing, who reported that it provided invaluable support to its members.

The Committee also welcomed RQIA's move towards a risk-based assurance framework, taking on board lessons learned from the early days of the Covid-19 pandemic.

Assurance Framework

During the year, RQIA worked with the Queen’s University of Belfast (QUB) to start the development of a new Assurance Framework. This framework aims to consolidate and set out the current best practice being undertaken by RQIA and to build a strengthened approach. The QUB report enabled the development of a refined approach to assurance in order to ensure the methodologies and the approach to regulation and improvement are dynamic and based upon best practice. The report underlined the importance of safety, service user engagement and empowerment, and the meaningful evaluation of the lived experience.

Quality Improvement Strategy

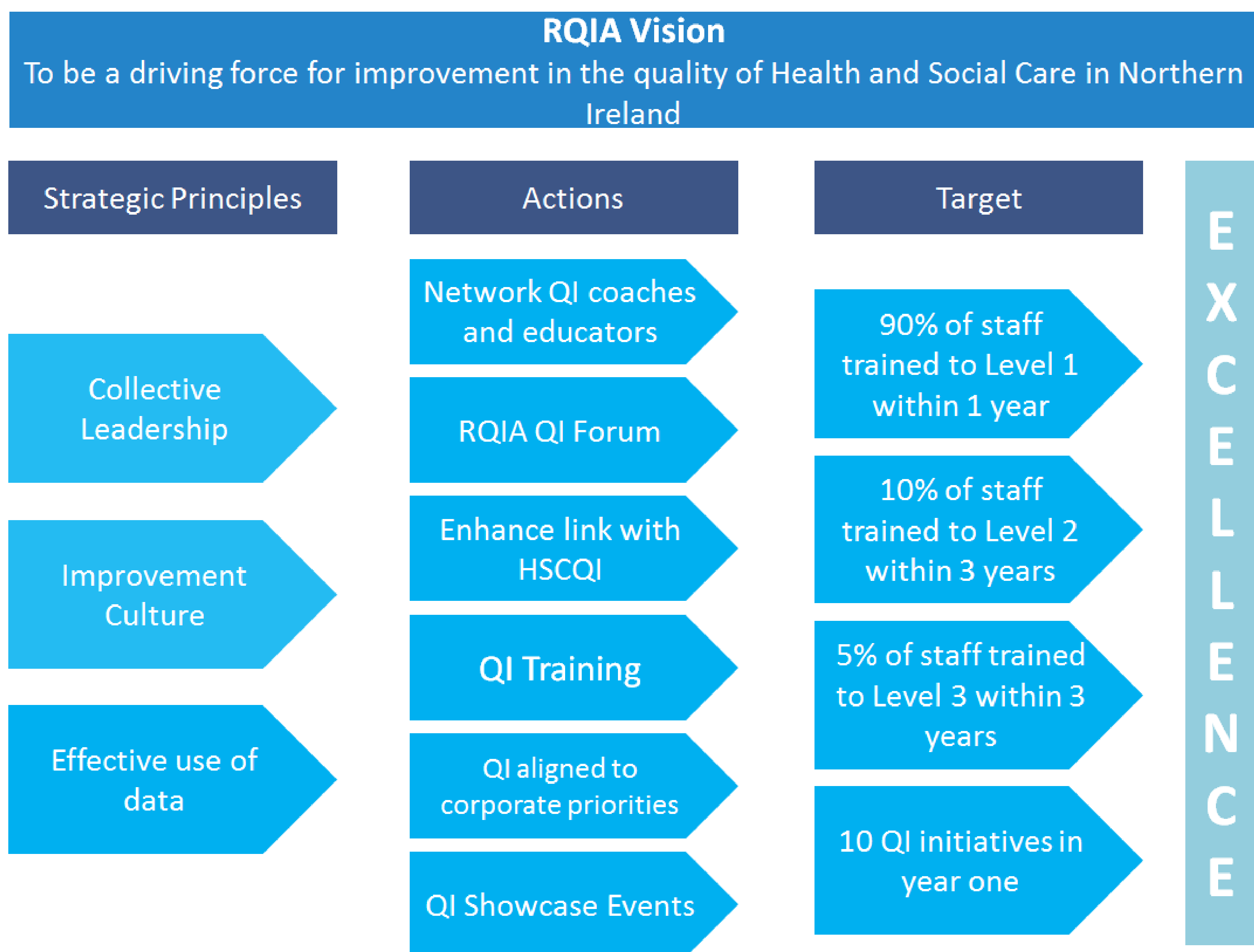
RQIA undertook a baseline capability assessment in early 2019 found that whilst there was strong leadership and staff commitment to improvement along with good service user ethos and a culture that supported openness to learning and improvement, there were significant barriers to QI within the RQIA, namely the lack of QI training and opportunity to use QI skills.

RQIA subsequently developed a strategy to improve QI capacity and capability, which was presented to and approved the by RQIA Board in June 2019. Implementation began in 2019-20, however, due to RQIA’s pandemic response this was delayed. RQIA has now identified a number training providers and staff who are eager to complete level 2 QI training.

RQIA is in a unique position as a regulator to undertake a whole system approach to implementing improvement within HSC. RQIA, through its inspection and review programme, is best placed to identify areas of need where regional work may have maximal impact, whilst utilising resources effectively achieving a value for money approach.

The Covid-19 pandemic, despite creating many challenges for HSC, has also provided an opportunity for innovation to rapidly flourish. Many of these innovations could provide long-term benefits to the health service, if given the right attention in terms of ensuring sustainability, standardisation and scale across the region.

During the pandemic response RQIA did not run its annual QI funding programme but in future years, the RQIA working with HSCQI, and other networks, intends to invite applications for funding for the scaling up and embedding positive impact changes developed during Covid-19.



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Strategic Goal 2: Strengthening the Workforce

We will provide the right education, training and support to deliver a high quality service. We will develop leadership skills at all levels and empower staff to take decisions and make changes.

External Accreditation

RQIA holds Investors in People (IiP) accreditation - the standard for people management. The IiP performance model provides a pathway to future progress and a journey of continuous improvement, which aligns with RQIA's approach to quality improvement. In November 2020, RQIA underwent a Strategic Review by the IiP Assessor and gained an increased award, providing an extension of one year, prior to a full re-assessment which will take place in November 2021.

RQIA Staff

The RQIA's staff are its most valuable asset and responsible for the achievement of our corporate objectives and the effective delivery of the work programme. RQIA has a staffing complement of 120 people (114.33 whole time equivalent), excluding Authority members, bank and agency staff. The staff composition, by headcount, is 75% female and 25% male. During 2020-21, there was an average staff absence rate of 6.94%, against a (regional key performance indicator) target set for RQIA by DoH of 8.44%.

During 2020-21, there was a staff turnover of 12.6%, with 15 members of staff leaving RQIA through taking up new opportunities or retirement. RQIA advertised for a range of administration and inspector positions, which attracted a very high level of interest, and 14 new staff joined teams inspecting care homes, independent health care, hospitals and mental health and learning disability wards and the Business Support Unit.

As a result of the pandemic and in line with government guidance, from late March 2020 RQIA staff worked from home where this was practicable.

Staff Policies

RQIA has a duty of care to every member of staff, supported with a comprehensive range of human resources policies and procedures. In addition, RQIA ensures compliance with relevant employment legislation in this area, including: Section 75 of the Northern Ireland Act, the Disability Discrimination Act 1995 and The Disability Discrimination (Northern Ireland) Order 2006. RQIA has a range of human resources policies in place, which promote equality of opportunity across all Section 75 groupings.

Throughout the year, organisational learning development activities continued to ensure staff were equipped to deliver against the objectives within RQIA's Business Plan. This included a range of mandatory and job-specific training for staff across RQIA. RQIA has ensured that all staff have equal access to development opportunities in line with RQIA's Equality of Opportunity policy and the Agenda for Change terms and conditions.

Through the Joint Negotiating Forum, RQIA takes a partnership approach to working with staff in conjunction with trade union representatives. The Forum continued to meet during the year, acting as a reference group for good practice and a focus for consultation and negotiation on policies and issues affecting staff within the organisation.

RQIA is an equal opportunity employer and its policies and procedures are developed in line with equality legislation to ensure equal treatment for all. RQIA is committed to working with the Equality Commission in all aspects of equality and diversity in employment and occupation.

Staff Training

RQIA is committed to the development of its staff, and ensures that staff have access to training opportunities to enable them to contribute fully to achieving its objectives. In addition to job-specific training, during the year, staff undertook mandatory training on:

- risk management;
- information governance;
- personal and public involvement;
- fraud awareness;
- fire safety;
- display screen equipment and
- cyber security.

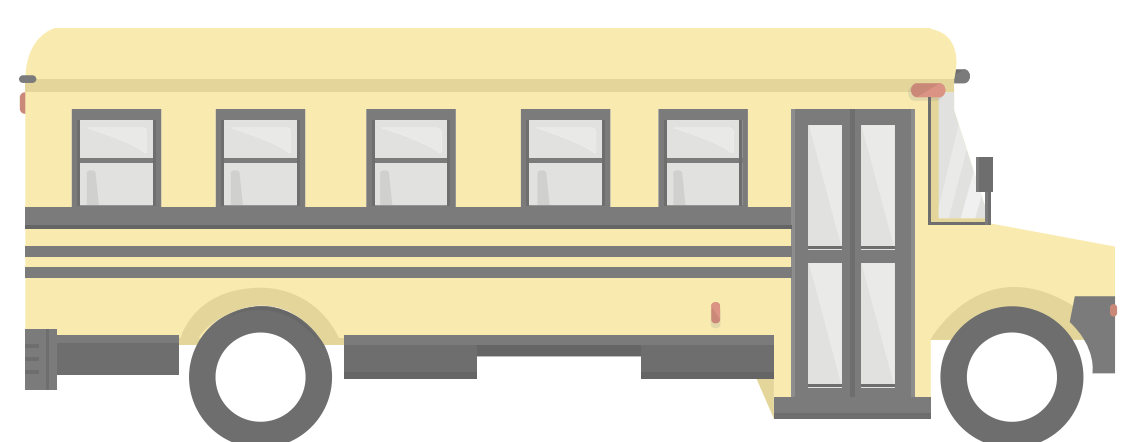
As a result of technical issues across health and social care, staff were unable to access the e-learning platform, which hosts the training courses, from December 2020 onwards. This issue has been escalated through the regional e-Learning team to ensure alternative arrangements can be put in place for 2021-22.



Sickness Absence

RQIA manages all sickness absence in line with its attendance management policy and associated procedures. During the year there was a sickness absence rate of 6.94%, which was within the regional key performance indicator target set by DoH of 8.44%. This compares to an absence rate of 8.88% in 2019-20.

Social, Community and Environmental Matters



While the majority of staff worked from home during the year, RQIA continued to focus on energy reduction, recycling office waste, promotion of healthy lifestyles and use of public transport where this was possible and safe.

In partnership with the Business Services Organisation, RQIA held two health and wellbeing awareness days. In January 2021, representatives from the Royal National Institute for Deaf people and a HSC colleague with hearing loss provided an overview of issues relating to deafness and hearing loss. In March 2021, RQIA was joined by an expert by experience and a peer educator from the Belfast Trust Recovery College to discuss living with bi-polar disorder, and the mental health challenges associated with this condition.

Throughout the year RQIA also shared practical resources on mental health and wellbeing, aimed at supporting staff while working from home.

Strategic Goal 3: Strengthening the Workforce

We will improve outcome measurements and report on progress for safety, effectiveness and the patient/client experience. We will promote the use of accredited improvement techniques and ensure that there is sufficient capacity and capability within the HSC to use them effectively.

Regulation of Services

Registration and Inspection of Health and Social Care Services

RQIA is responsible for the inspection of health and social care services under a range of powers. RQIA registers and inspects care homes; children's homes; domiciliary care and nursing agencies; residential family centres; adult day care services; private dental clinics; hospices; and independent hospitals and clinics. These are known as regulated services.

At 31 March 2021 there were 1,530 services registered with RQIA, an increase of nine from 31 March 2020 (see table below).

Service Type	BHSCT	NHSCT	SEHSCT	SHSCT	WHSCT	Total
Adult Placement Agencies	1	1	0	1	1	4
Children's Homes	11	9	12	8	9	49
Day Care Settings	31	26	27	30	53	167
Domiciliary Care Agencies (Conventional)	29	19	30	19	16	113
Domiciliary Care Agencies (Supported Living Services)	37	46	40	29	37	189
Dental Practices	93	85	65	73	57	373
Independent Clinics	5	0	1	1	0	7
Independent Hospitals	28	14	9	11	11	73
Independent Medical Agencies						7
Nursing Homes	47	67	54	47	33	248
Nursing Agencies						64
Residential Care Homes	44	65	56	30	38	233
Residential Family Centres	1	0	0	0	0	1
Voluntary Adoption Agencies	2	0	0	0	0	2
Total	329	332	294	249	255	1530*

* total includes 7 Independent Medical Agencies and 64 Nursing Agencies that are not registered to a particular trust area.

Under separate responsibilities RQIA also inspects a range of other services, which are not required to register with RQIA. These include:

- HSC hospitals
- Mental health and learning disability wards
- Custody suites and prisons
- Young adult supported housing services
- School boarding departments
- Radiation services under Ionising Radiation(Medical Exposure) Regulations (IR(ME)R)

In each case RQIA assesses the arrangements in place to ensure the delivery of safe, effective, compassionate and high quality care in line with relevant legislation, standards and guidance. RQIA also examines the quality of leadership and management in these services.

How We Inspect

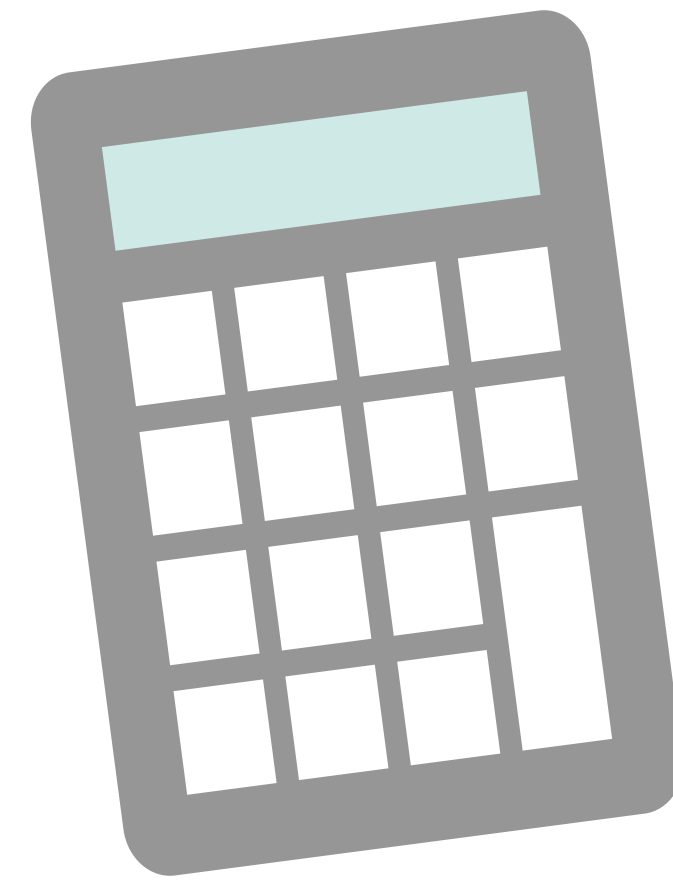
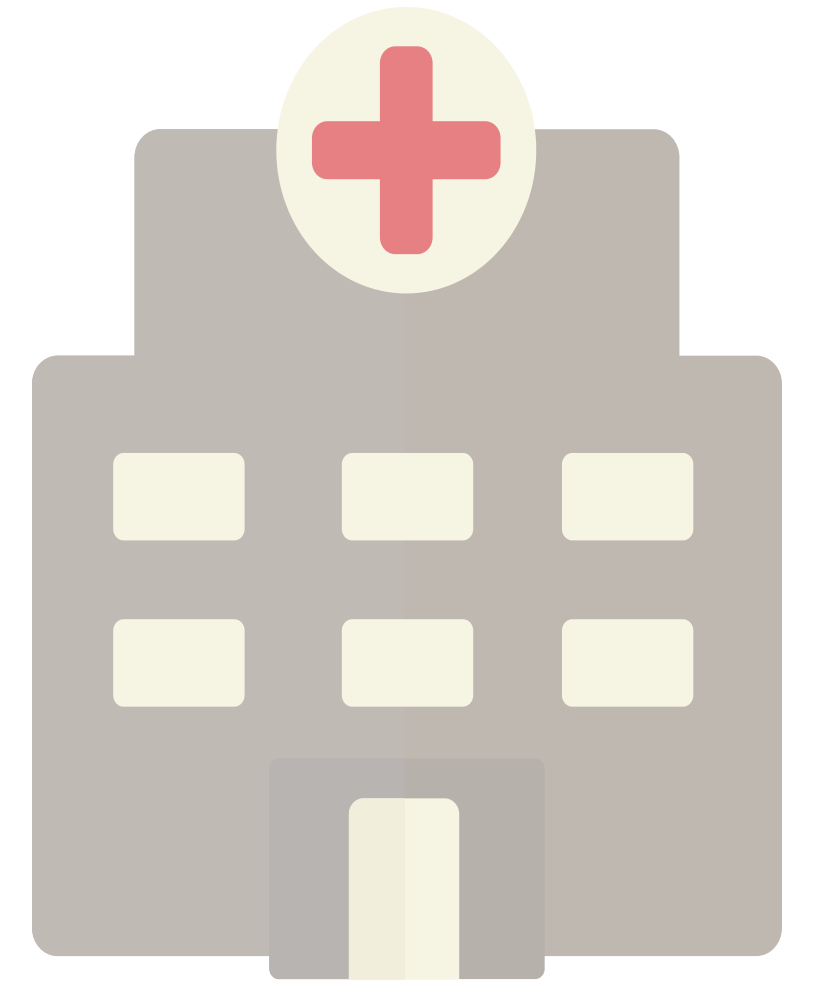
RQIA has a team of experienced nurses, social workers, pharmacists, estates and finance officers, who assess various aspects of service provision in line with relevant legislation and standards. During inspections we may examine a range of issues, including:

- care
- medicines management
- estates issues
- arrangements for safeguarding service users' finances

Before every inspection, RQIA's inspectors review information and intelligence relating to the service, which is held on its i-Connect information management system.

This includes details of the service's regulatory and inspection history - such as serious concerns or enforcement action; intelligence about the service including complaints or compliments from service users, their families or advocates; whistleblowing from staff members; and statutory notifications relating to specific categories of incidents which may have occurred at the service. During 2020-21 RQIA's inspection programme and approach to inspection was significantly impacted by the Covid-19 pandemic.

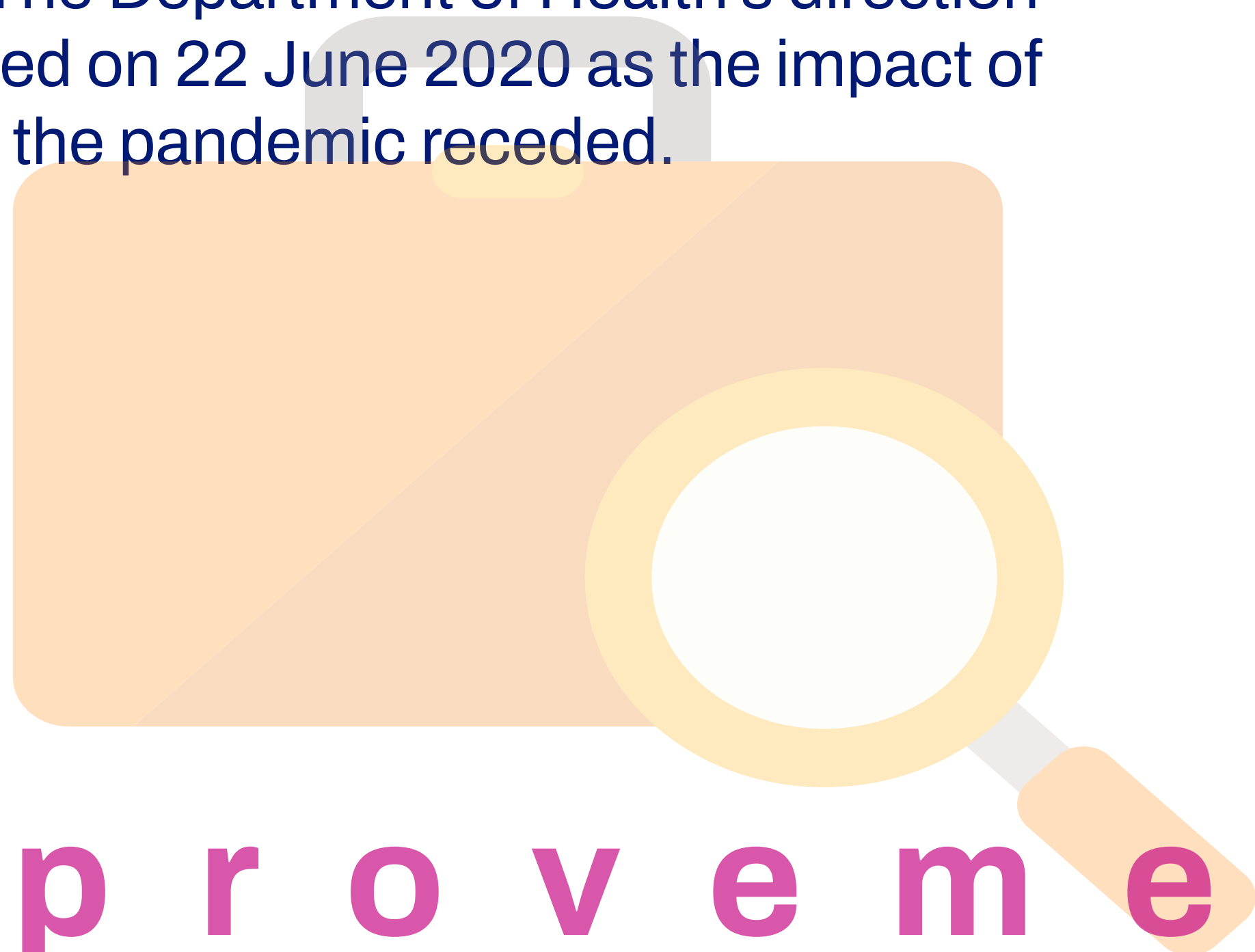
To support the regional response to the pandemic, in late March 2020, the Department of Health issued a direction to RQIA to reduce the frequency of its statutory inspection activity. This approach was consistent with that of health and social care regulators across the UK and Ireland and aimed to minimise the risk of spreading infection to some of the most vulnerable people in society. However, during this period RQIA continued to regulate and respond to risks and concerns, conducting inspections and taking enforcement action where necessary. The Department of Health's direction was rescinded on 22 June 2020 as the impact of first wave of the pandemic receded.



In response to the pandemic, RQIA changed its approach to inspection. In addition to conventional 'on the ground' physical inspections, where inspectors used appropriate personal protective equipment (PPE), remote inspections were introduced, where inspectors requested specific information from providers, which was reviewed in advance of the remote inspection, which took place using video call technology. These calls provided further evidence to allow assessment of the quality of the service. RQIA also designed and conducted 'blended' inspections, combining elements of both physical and remote inspection. These modern approaches proved both efficient and effective, despite the challenging circumstances of the pandemic.

In July 2020, RQIA, recognising the resource and practical constraints, and on the basis of a risk assessment, revised its original target for inspections, moving to conduct a minimum of one inspection at:

- 80% of all nursing homes, residential care homes, children's homes, residential family centres, independent acute hospitals and the children's hospice;
- 50% of day care settings, domiciliary care agencies and nursing agencies.



At 31 March 2021, RQIA had achieved the following results:

- Nursing and residential care homes: 633 inspections, exceeding the revised target (481); delivering 66% of the original target for inspections.
- Day care settings and nursing agencies: 238 inspections, which was below the revised target (267), delivering 45% of the original target for inspections.
- Children's homes and residential family centres: 72 inspections, which was above the revised target (50), delivering 73% of the original target for inspections.
- Independent clinics, (non-acute) independent hospitals, private dental practices and independent medical agencies: 419 inspections, which exceeded the revised target (368), delivering 91% of the original target for inspections.

As cosmetic laser services were closed under the pandemic lockdown restrictions, RQIA did not undertake the inspections scheduled for this category of service

While there is currently no legislative requirement to inspect HSC hospitals (both acute and mental health and learning disability services), radiation (IR(ME)R) services or prisons, RQIA completed the following inspections:

- HSC hospitals: 16
- mental health and learning disability facilities: 7
- radiation services: 5
- custody suites and prisons: 1

During the year, RQIA conducted a total of 1,549 inspections, compared with 2,313 the previous year. The impact of Covid-19 on the inspection programme was particularly notable during April to July 2020, when 159 inspections took place, based on a rigorous assessment of need and risk. During the same period in 2019-20 RQIA undertook 680 inspections.

While RQIA continued to conduct unannounced inspections at services, just over 50% of inspections over the year (784) were announced in order to ensure the safety of those living and working in the services, as well as the safety of the inspection teams. RQIA also completed 159 inspections out of hours and at weekends, compared with 283 the previous year.

How RQIA Uses Information and Intelligence

When conducting an inspection, RQIA examines compliance with regulations and care standards, and assesses:

- is care safe, effective and compassionate, and
- is the service well managed.

Performance is assessed against standards, guidelines and regulations. The Covid-19 pandemic had a significant impact on those who are dependent on health and social care services, particularly the elderly and most vulnerable in our community. This year, RQIA placed a particular focus on how each service was managing its response to Covid-19 in line with the latest guidance and direction from the Department of Health, Public Health Agency and HSC Board.

During assessment of the service RQIA inspectors observe practice and review records of care. To ensure a fully rounded view of the service, inspectors talk to management, staff and health care staff such as GPs, tissue viability nurses, social workers and care managers to hear their views and experience of working at the service.

The most important people in any service are those in receipt of care, and inspectors also talk to service users. Due to visiting restrictions throughout the year inspectors were unable to engage with carers, friends and relatives. However, through RQIA's and Guidance Team, calls were received from the public on their experience or concerns on the services being provided during this time.

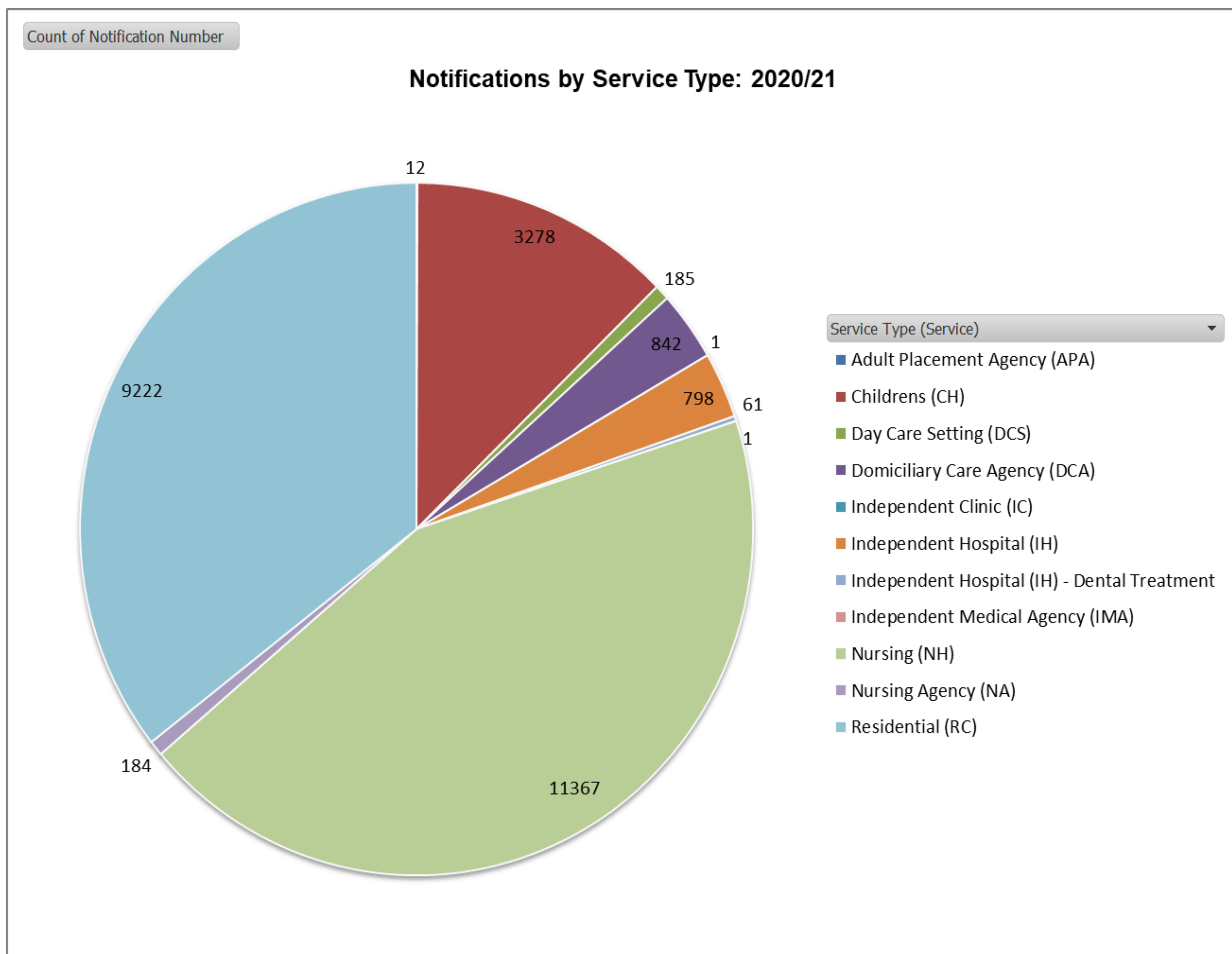
RQIA also worked closely with the Patient and Client Council, Commissioner for Older People and representative organisations to ensure any concerns were followed up and addressed in a timely manner. RQIA also focussed on assessing notifications, concerns and other intelligence for every service. Where areas of concern were identified, additional inspections were conducted and inspectors met with providers. Where it was necessary enforcement action was taken.

The primary means of communication between RQIA and service providers for issues relating to inspections and for incident notifications is via a secure online web-based portal. There are 4,750 registered users on this system – including service providers and managers.

Every provider is required to notify RQIA when specific categories of incidents or events occur within their service. These include:

- accidents and incidents;
- deaths (expected and unexpected);
- injuries and fractures;
- infectious diseases;
- medication issues;
- police incidents, theft or burglary; and
- misconduct.

During the year 25,951 incident notifications were submitted to RQIA via this portal (see figure below), and in each case the Inspector for the service assessed the notification to determine whether further action was required, or if a pattern was emerging that required further consideration.



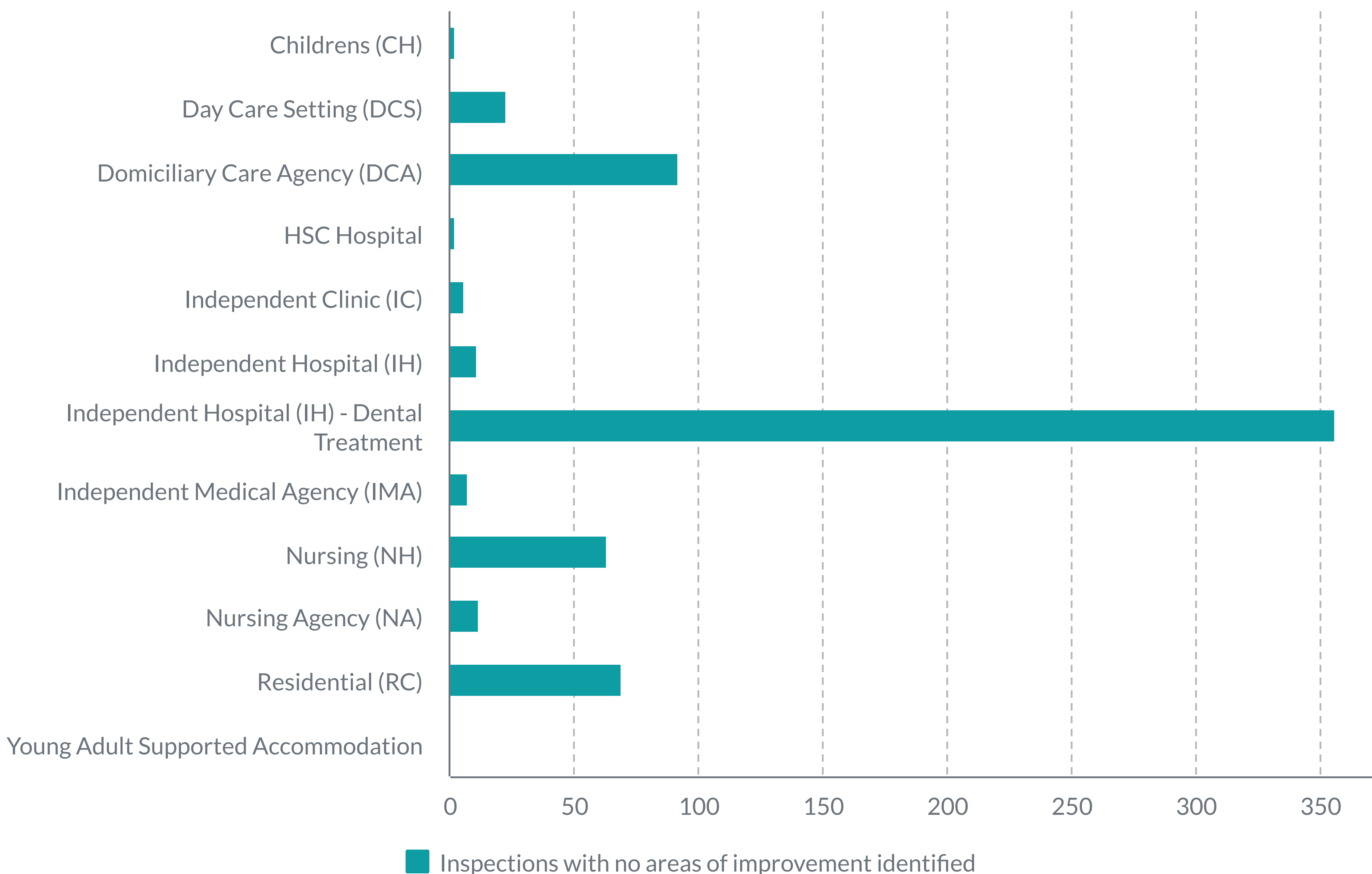
What RQIA Looks For

During an inspection performance is assessed against standards, guidelines and regulations. In RQIA's assessment of the service, inspectors observe practice and review records of care. To ensure a comprehensive overview of the service, inspectors talk to management, staff and visiting health care staff such as GPs, tissue viability nurses, social workers and care managers to hear their views and experience of working in, or with, the service. The most important people in any service are those in receipt of care, so inspectors also talk to service users, carers, friends and relatives to hear their views and experiences of the care provided.

Outcome of Inspections

At the end of each inspection RQIA Inspectors provide verbal feedback to the management of the service, highlighting both good practice and areas that require attention. Inspectors then provide a formal written report of their findings. Where necessary inspectors include a quality improvement plan, which details areas for improvement. The final inspection report also includes the provider's response on how they are addressing any issues raised by RQIA during the inspection. The findings of every inspection (excluding those for children's services) are published on the website www.rqia.org.uk/inspections. Individual inspection reports are also available on request from each service inspected.

In 2020-21 in 644 inspections (42%) services were operating in line with the relevant legislation and standards, with no areas for improvement highlighted by RQIA inspectors (see figure below).



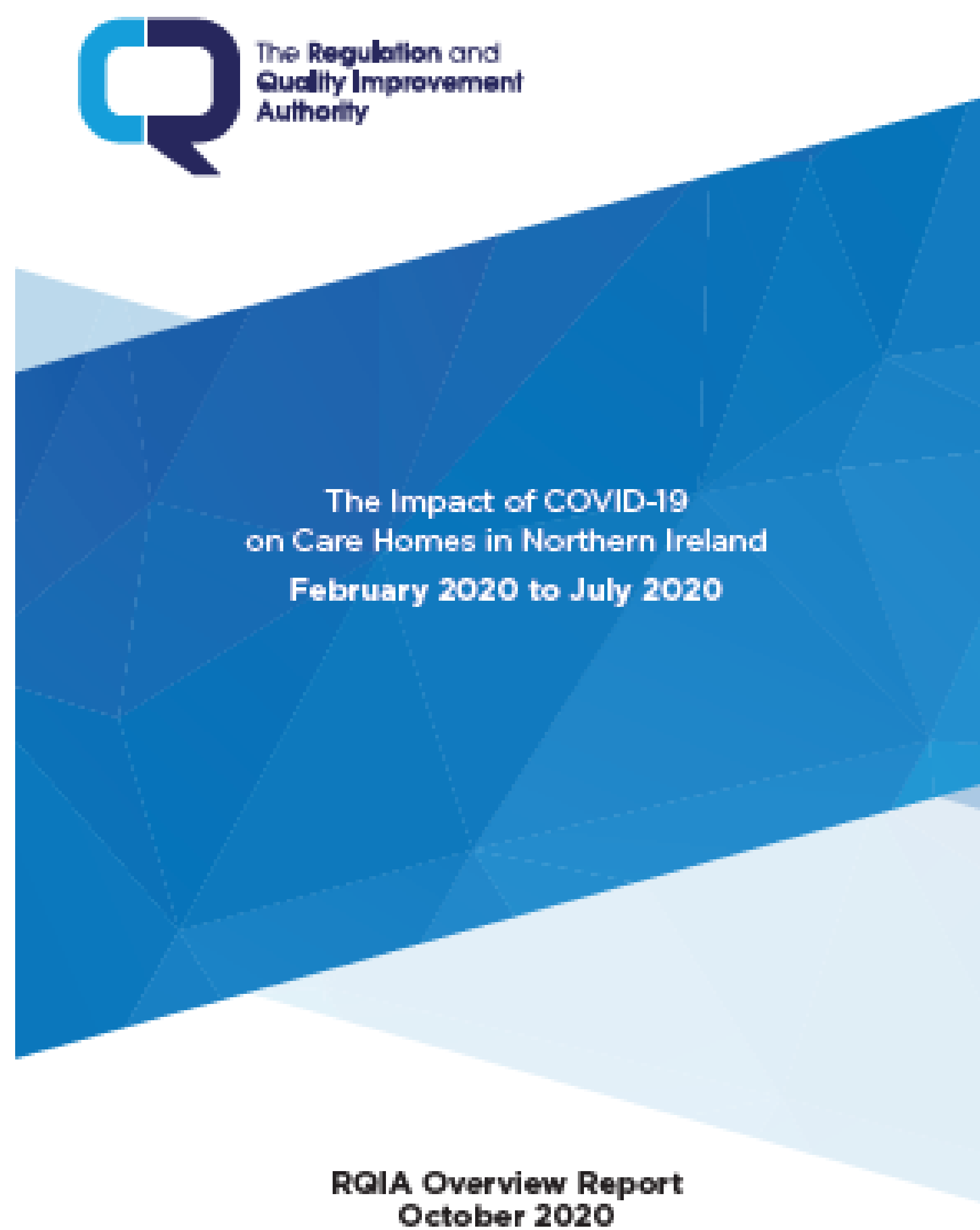
At times, it is important for RQIA to take enforcement action to ensure providers address significant deficits in a service. During the year RQIA took enforcement action on 30 occasions across a range of services. The majority of this action involved issuing enforcement notices to ensure concerns at a service were appropriately addressed. In addition, RQIA moved to cancel the registration of four services where the provider did not adequately address identified concerns, which had the potential to place the health and wellbeing of service users at risk. These included one nursing home and three domiciliary care agencies.

In October 2020, RQIA sought an urgent Order to ensure all patients at a nursing home were moved to alternative accommodation, in order to allow significant refurbishment of the home, including repairs to its water system. This action provided immediate protection for the health and well-being of the residents, and ensured a long-term sustainable service for people with dementia remained available for use.

The Impact of Covid-19 on Care Homes in Northern Ireland

In October 2020, to ensure learning about Covid-19 and its impact on care homes, RQIA undertook an analysis of its data collected during the first wave of the pandemic. This identified common characteristics of those care homes experiencing an outbreak of Covid-19. These tended to:

- be in larger provider groups
- have experienced leadership changes
- serve areas of deprivation
- be nursing homes compared with residential care homes (twice as likely); and
- have been previously recognised as having identified challenges in meeting care standards



In October 2020, RQIA published the findings of this analysis, *The Impact of Covid-19 on Care Homes in Northern Ireland, February –July 2020*.

This was shared with health and social care organisations, with partner regulators across the UK, and the Northern Ireland Assembly’s Health Committee as evidence to their wider inquiry on this issue

Much of this learning has been incorporated into RQIA’s standard practice, and informs how RQIA responds to indicators and identifies services at most risk from Covid-19

From September 2020 to March 2021 and in response to the COVID-19 pandemic, RQIA’s Hospital Programme Team (HPT) carried out a series of infection prevention and control (IPC) inspections of HSC acute and independent hospitals across Northern Ireland. The HPT visited 11 hospitals; across five health and social care trusts and six hospitals within the independent sector. During our inspections, we sought assurances across the following key criteria to determine if each hospital’s approach to infection control was effective in achieving and maintaining a COVID- 19 safe environment.

Overall, we found that HSC trusts and independent hospital providers have responded effectively to minimise the risks of the COVID-19 virus and to keep people safe in our hospitals across Northern Ireland. We also identified some opportunities for improvement and regional learning across our healthcare sector.

Nosocomial* Support Cell

In response to the COVID-19 pandemic, the Department of Health established a Nosocomial support cell, which included an RQIA senior hospital inspector. Members of the cell carried out site visits to each of the five HSC trusts from December 2020 (and continuing into 2021-22). They were tasked with providing multidisciplinary support to HSC trusts experiencing sustained or complex outbreaks and clusters of COVID-19 infections in acute settings, with the over-arching aim of improving patient, staff and visitor safety.

(* an infection that is acquired in a hospital or other health care facility.)

RQIA's Review Activity

Each year RQIA undertakes a programme of reviews of health and social care services, in response to current events, or to examine emerging issues. These reviews may be initiated by RQIA or commissioned by the Department of Health. In planning reviews and reporting on the findings, RQIA focusses on whether care is safe, effective and compassionate; and on the quality of leadership within a service. Review findings are reported to the Minister and Department of Health. In each review RQIA endeavours to highlight examples of good practice and make recommendations for improvement which aim to support and drive quality improvements for service users. RQIA also aims to provide useful evidence to provide a basis for future policy development in the areas under review.

In late March 2020, RQIA was directed by the Department of Health to pause all review work to enable resources to be concentrated on dealing with the first Covid-19 surge period. RQIA recommenced its review programme on 22 June 2020 when the Department of Health rescinded its direction.

In September 2020, RQIA published the findings from the Review of Implementation of NICE Clinical Guideline 174: Intravenous Fluid Therapy in Adults in Hospitals in Northern Ireland.

This Review examined the effectiveness of the implementation of NICE CG174, which includes an assessment of:

- the implementation of the guideline;
- the governance and oversight of implementation of the guideline;
- the knowledge and understanding of healthcare professionals of the guideline, and
- an audit of the resulting clinical practice.

RQIA's Review Team concluded that the NICE Guideline on Intravenous (IV) Fluid Therapy in Adults in Hospitals was not fully implemented in each HSC trust. There were deficits both at key stages of implementation, and in areas to support ongoing assurance of implementation of the guideline. These areas included:

- the HSC Board's oversight of implementation,
- HSC trust dissemination and prioritisation of recommendations,
- staff training/education
- and incident management.

The Review Team made nine recommendations in relation to:

- systems for governance and oversight;
- training and education of staff;
- ensuring awareness in recognising, reporting and learning from adverse events relating to IV fluid management; and
- undertaking clinical audit and sharing learning on the implementation of CG174 across all HSC Trusts in Northern Ireland.

RQIA believes that, if actioned, these will strengthen the implementation of the NICE Guidelines on Intravenous (IV) Fluid Therapy in Adults in Hospitals and assurance of good practice in this critically important area of medicine.

Expert Review of Records of Deceased Patients of Dr M Watt

In May 2018, the Department of Health's Permanent Secretary directed RQIA to commission an expert review of the records of all those patients or former patients of Dr Watt, a consultant neurologist, who had died over the previous ten years.

Given the significant scale of work involved, this Review is being conducted in a phased manner. It is likely to take a number of years to complete.

The first phase involved the extensive preparatory work required for this Review. A legal framework, which allows RQIA to access the clinical records of the deceased patients of Dr Watt, whilst ensuring proper safeguards for patient confidentiality was developed and was formally adopted by the Chief Executives of the relevant health and social care bodies in November 2020.

A suite of operational protocols has also been developed to ensure the safe management of the clinical records in preparation for review by a panel of expert reviewers from outside Northern Ireland.

A project team, with a number of sub-groups, has been established. These are:

- Ethical Advisory Group
- Clinical Advisory Group
- Information and Clinical Records Group
- Communications and Family Involvement and Engagement Group

Ongoing Review Activity

Work also continued on a number of reviews which will be published in the year ahead:

- Review of Out-of-Hours General Practitioner Service
- Review of Governance in Independent Hospitals and Hospices in Northern Ireland
- Review of Serious Adverse Incidents (SAIs)
- Review of Vulnerable Prisoners

A steering group has been established to provide oversight of the review, jointly chaired by RQIA's Acting Director of Improvement and the Professor of General Practice at the University of Manchester. Two Authority members sit on the Steering Group.

During early 2021, RQIA completed preparations for the second phase of the Review, which will consist of the examination of certain of the records, in accordance with objectives developed by the Clinical Advisory Group.

RQIA commissioned the Royal College of Physicians to establish an Expert Review Panel of experienced consultants from outside of Northern Ireland to review the records selected for Phase 2 of the Review and, in addition, to consider any information shared with RQIA by the families of the deceased patients.

This work will commence during 2021-22 and will include the records of:

- those deceased patients whose family members have approached the RQIA with concerns about their care; and
- patients who were included in the Belfast Trust's Cohort 1 neurology recall but unfortunately died before either attending or completing their re-assessment.

Strategic Goal 4: Raising the Standards

We will establish a framework of a clear evidence-based standards and best practice guidance. We will establish dynamic partnerships between service users, commissioners and providers to develop, monitor and review.

RQIA Clinical Audit, Guidelines and Quality Improvement Programme

RQIA is committed to promoting leadership in safety and quality in health and social care. Through its Clinical Audit programme, each year RQIA invites applications from the HSC community for funding to undertake clinical audits, guidelines and quality improvement (QI) projects. The programme aims to ensure that the outcomes for patients, clients and carers are improved through the development and integration of audits, guidelines and QI projects, and as a result of their implementation.

The commencement of the following audits and QI projects was delayed until October 2020 as a result of the impact of Covid-19 across health and social care:

Audits

- Process of care and outcomes for oesophageal squamous cell (and unspecified) cancer in Northern Ireland diagnosed in 2017-18
- Process of care and outcomes for oesophageal adenocarcinoma patients in Northern Ireland diagnosed in 2017-18

A comprehensive annual surveillance audit of NICE Guideline NG 29 (Intravenous Fluid Therapy in children and young people in hospital) was further deferred to April 2021 due to the pandemic's impact on staff availability to undertake this work.

Quality Improvement Projects

- Introduction of Harm Reduction resources for clinical staff in acute mental health settings
- Development and Implementation of Postpartum Contraception Service
- The Pro-Vac Movement - a Quality Improvement and Educational Initiative to promote positive conversations around vaccine safety

We also published the following work which was supported by our programme in 2019-20:

- An audit of the accuracy and positive predictive value of red flag referrals made to the Oral Surgery and Oral Medicine Departments in the School of Dentistry over the nine-month period up to and including September 2019 (Phase 1 Report)
- Regional Re-audit of Medicines Reconciliation on the Immediate Discharge Document
- The Development of Departmental Cancer Guidelines and Patient Information Leaflets

Public Involvement in RQIA Work

RQIA is committed to increasing effective engagement with the public and stakeholders to achieve improvements in the safety and quality of services.

During the pandemic it was challenging for RQIA to involve lay assessors in on the ground inspection and review activities. However, as part of RQIA's Transition Plan an increased focus has been placed on the involvement of service users, carers and other stakeholders in RQIA's work. This included plans to evaluate new models to support the full integration of lay assessors within RQIA's assurance and inspection activities. This work is in progress and involves coproduction with the Patient and Client Council, relatives of service users and other individuals and organisations.

During the year, RQIA established a working group with representatives across the organisation to review our inspection report layout. The aim was to ensure that our reports are clear, concise and represent the inspection process, with a clear focus on promoting improvement and ensuring the care provided is safe, effective, compassionate and well-led. We also engaged with a range of external stakeholders – including TILII (Tell it like it is) service user group, the Association for Real Change (ARC) and a range of service providers - on the layout, taking on board feedback and making necessary changes to ensure the reports are reader friendly. This work will continue during 2021-22 with a pilot exercise to test this approach, followed by training workshops for our staff to ensure adoption of this common approach.

Sharing Learning from Serious Adverse Incidents

In January 2021 RQIA presented at the HSC Board's Regional Serious Adverse Incident (SAI) Mental Health Learning Event in relation to the role of RQIA in the SAI process. At this event RQIA also presented emerging themes and trends identified from a review of SAIs, such as an increase in fire setting by patients, suicide using a ligature in Mental Health inpatient settings and deaths during absence without leave. We have strengthened our relationship with the HSC Board through: collaborative working; engagement and meetings with its governance department; improved engagement with Designated Review Officers; and sharing relevant intelligence, findings and learning to support improvements in patient outcomes.

Strategic Goal 5: Integrating the Care

We will develop integrated pathways of care for individuals. We will make better use of multidisciplinary team working and shared opportunities for learning and development in the HSC and with external providers.

Partnership Working

RQIA is committed to fostering and building strong and effective partnerships with its peer organisations - including health and social care systems regulators, inspectorates and professional regulatory bodies across the UK and Ireland. Through this engagement RQIA shares best practice in regulation and benchmarks its work with peer organisations.

During the Covid-19 pandemic these partnerships were more important than ever to ensure a joined-up and regional response. RQIA worked closely with colleagues across the Department of Health, HSC Board, Public Health Agency and HSC trusts to ensure a coordinated approach to the provision of the most up-to-date guidance in real time to support adult and children's care homes and domiciliary care agencies in managing the impact of the pandemic.

RQIA also participated in the daily Department of Health Covid-19 Emergency Operational Command briefings, providing situation reports on the current and emerging issues in relation to care homes and domiciliary care services. This allowed a coordinated approach across health and social care in responding to the situation as it developed. RQIA is working to "build back better", and to ensure that these relationships and arrangements are carried forward as a basis for future improvement.

RQIA has positive relationships with colleagues at the Department of Health, and other HSC organisations including:

- the HSC Board
- HSC trusts
- the Public Health Agency
- Northern Ireland Social Care Council
- Patient and Client Council
- Northern Ireland Guardian Ad Litem Agency
- Northern Ireland Practice and Education Council for Nursing and Midwifery and
- Northern Ireland Medical and Dental Training Agency.

RQIA engages with these organisations on an ongoing basis and through regular one-to-one liaison meetings and calls, sharing learning and discussing common interests and issues of concern.

RQIA also works closely with other inspectorates and representative bodies including:

- Criminal Justice Inspection Northern Ireland
- Education and Training Inspectorate
- Her Majesty's Inspector of Prisons
- The Prisoner Ombudsman for Northern Ireland
- The Commissioner for Older People for Northern Ireland (COPNI) and
- The Northern Ireland Commissioner for Children and Young People (NICCY).

RQIA also continued its constructive engagement with a range of stakeholder representative organisations, including:

- The Independent Health and Care Providers (IHCP)
- UK Homecare Association
- British Dental Association; and
- The Association for Real Change, particularly in relation to the impact of Covid-19 on services.

RQIA has established memoranda of understanding and information sharing protocols with a range of partner organisations, to support information sharing and cooperation in joint working, and transparency when working on areas of common interest. During the year RQIA met with the Independent Sector Complaints Adjudication Service (ISCAS) a voluntary subscriber scheme for the vast majority of independent healthcare providers, to commence the development of a new memorandum of understanding, which will be implemented in early 2021-22.

RQIA also worked with both the General Medical Council and Nursing and Midwifery Council to review existing memoranda of understanding.

Sharing Best Practice: Engagement with Other Health and Social Care Regulators

During the year RQIA continued to engage remotely with the Care Quality Commission, Care Inspectorate Scotland and Health Inspectorate Wales to share experiences and learning of regulation and inspection during the pandemic.

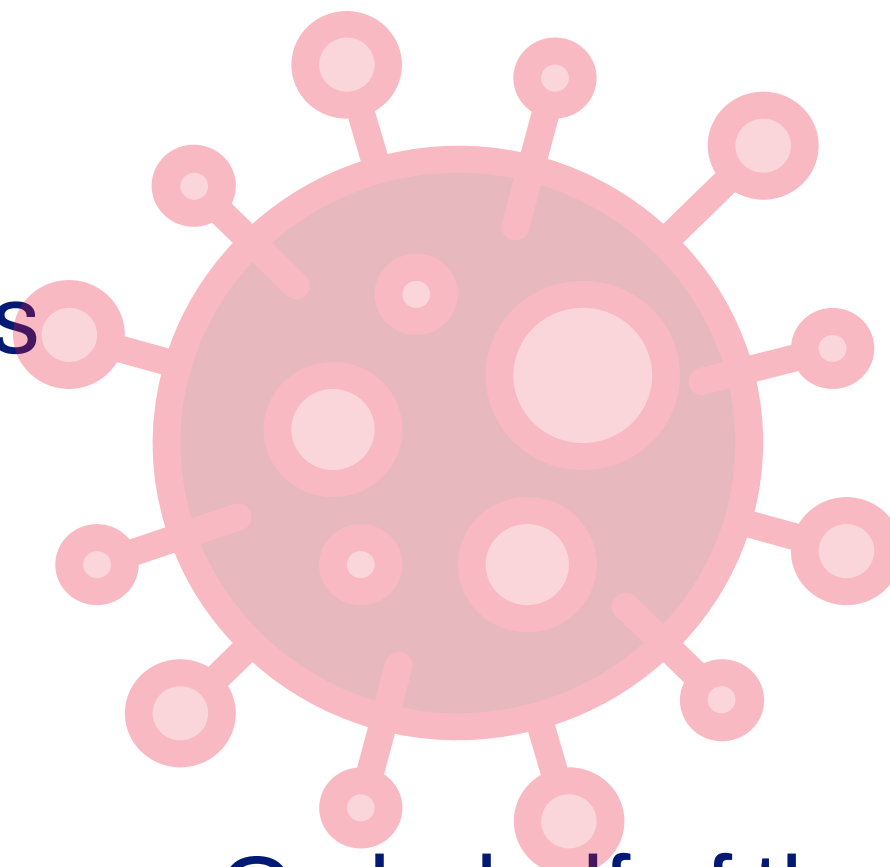
Learning from the Covid-19 Pandemic

Responding to the Covid-19 pandemic has required a strategic and joined-up approach to supporting health and social care services. This has fundamentally changed how RQIA operates, refocusing core services to provide support, advice and guidance to services dealing with the unforeseen challenges of the Covid-19 pandemic.

In line with the Department of Health direction, RQIA re-balanced its role as a regulator with the provision of support to health and social care services. A number of key staff was transferred to other organisations to support the regional response to the pandemic.

During the pandemic, a new operational model developed which went some way towards modernisation of RQIA's regulatory approach – moving from traditional on-site inspection of registered services, to a model which used the RQIA Services Support Team (and as the year progressed the newly established Guidance Team) to provide support for the sector, and enabling collaborative sharing of expert knowledge and information to HSC partner organisations, for example, the HSC trusts and the Public Health Agency.

Partnership with the wider HSC was also strengthened. To support the regional response to the management of the Covid-19 pandemic, RQIA established arrangements to facilitate and collate daily reporting of a suite of key information from care homes, which was shared with relevant HSC partners each day.

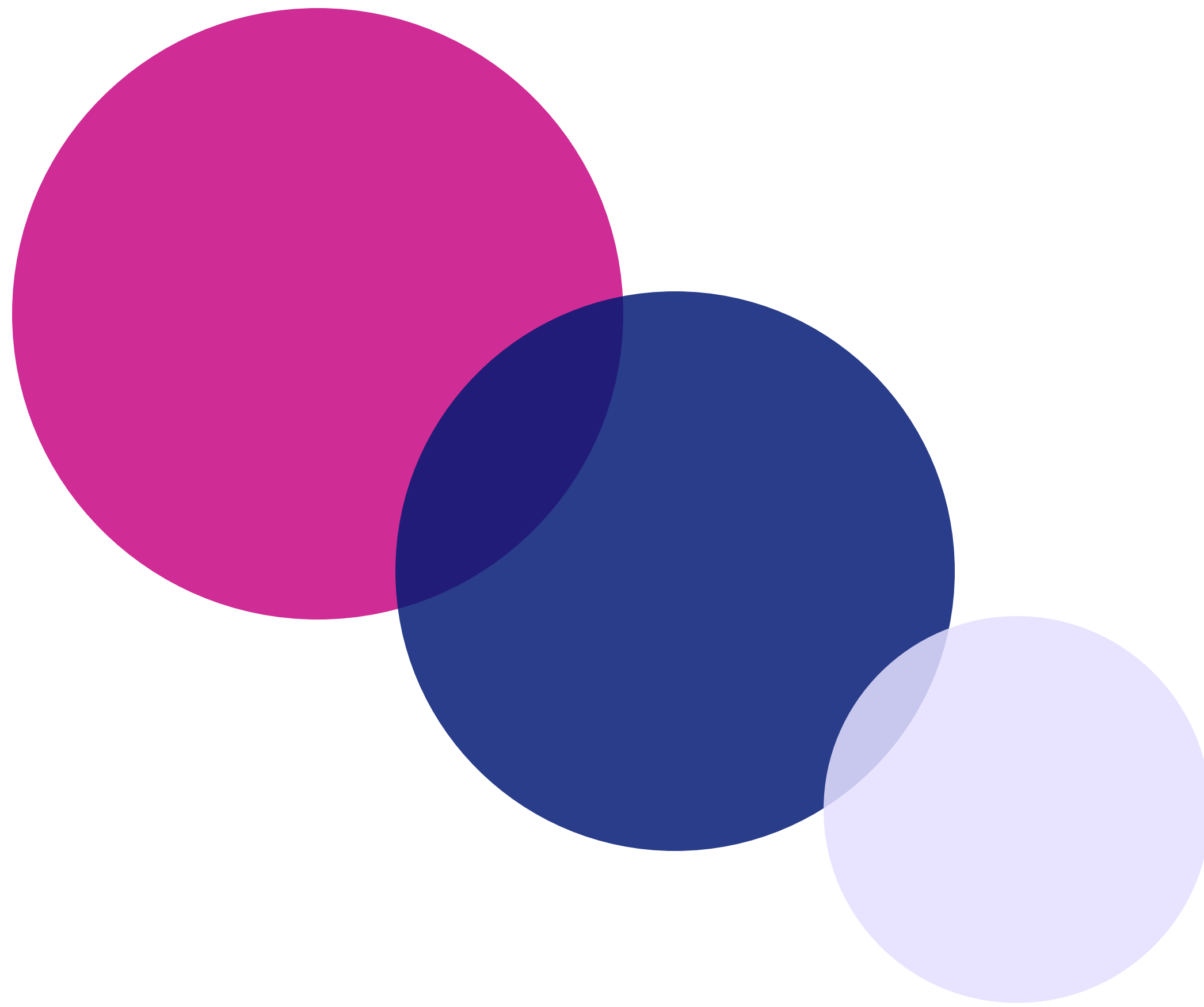


On behalf of the Department of Health, HSB Board, Public Health Agency and HSC trusts, during the year, RQIA disseminated over 350 separate pieces of guidance to independent health and social care services to support the management of Covid-19. This included crucial and time-sensitive information on personal protective equipment; staffing; testing; medicines management; palliative care; visiting arrangements; and training resources.

This temporary shift has enhanced RQIA's regulatory and assurance functions, with a renewed focus on quality improvement.

It is underpinned by comprehensive and positive engagement with service users, their families and representative groups around such topics as visiting care homes. RQIA has also been able to add value by providing real-time data and intelligence, thus directing resources and support where it was most needed at the time.

The response to COVID-19 has emphasised an increased use of continuous assessment, based on information and intelligence, directing proportionate inspection, resulting in the development of a new assurance framework and a modernised approach to regulation.



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