

The Northern Ireland Practice and Education Council for Nursing and Midwifery

ANNUAL QUALITY REPORT 2014/15

Quality 2020

NIPEC aims to improve standards of practice, education and professional development of nurses and midwives to facilitate their delivery of safe, effective and person-centred practice.



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Foreword by NIPEC's Chief Executive

This Annual Quality Report recognises the unique contribution of NIPEC over the past year in support of the DHSSPS vision as set out in Quality 2020: A 10 Year Strategy to Protect and Improve Quality in Health and Social Care in Northern Ireland (DHSSPS, 2011). As Chief Executive, I am pleased to present the report for the second year on behalf of the Northern Ireland Practice and Education Council (NIPEC) for Nursing and Midwifery.



NIPEC has a highly dedicated and skilled workforce which supports the organisation to play a vital role in promoting the best practice of nurses and midwives working across a range of diverse health and social care settings comprising the statutory, independent and voluntary sectors. This is achieved through effective partnerships and engagement to provide support to practitioners and organisations to achieve their objectives and aspirations to deliver personalised, safe and effective care.

In support of the delivery of high quality patient and client care, NIPEC retains a focus on work developed through robust strategic alliances to provide resources which strengthen the capacity and capability of the nursing and midwifery professions in Northern Ireland. Whilst the work of NIPEC is focused on the professional practice of nurses and midwives, it is increasingly being taken forward on a multi-professional basis in order to maximise the quality of patient and client outcomes.

NIPEC encourages practice that is ethically sound and reflects the requirements set out by the regulatory body for nurses and midwives, the Nursing and Midwifery Council (NMC), which is articulated in *The Code: Professional Standards of Practice and Behaviour for Nurses and Midwives* (NMC, 2015).

NIPEC is proud of what has been achieved so far. This is due to the dedication and commitment of our Council members, our staff, partners and stakeholders. I thank them and look forward to continuing to work together to enable nurses, midwives and all who work within the HSC system to maximise their contribution to the health and well-being of patients and clients.

Angela McLernon

NIPEC Chief Executive

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Introduction

NIPEC was established in 2002 under the Health and Personal Social Services Act Northern Ireland (2002) as a Non-Departmental Public Body (NDPB) sponsored by the Department of Health, Social Services and Public Safety (DHSSPS).

The statutory responsibilities for NIPEC, as identified within the Act (2002), are summarised below:

NIPEC's Statutory Responsibilities

To promote:

- high standards of practice among nurses and midwives
- high standards of education and learning for nurses and midwives
- professional development of nurses and midwives

and provide:

- guidance on best practice for nurses and midwives
- advice and information on matters relating to nursing and midwifery.

Source: Health and Personal Social Services Act Northern Ireland (2002)

NIPEC, as a Non-Departmental Public Body (NDPB), is enabled to bring stakeholders together with impartiality to take forward its work in support of safe and effective care. A key strength of NIPEC is its ability to work in partnership with a broad range of stakeholders to create high quality innovative solutions which support employers, nurses and midwives, enhance professional practice and, in turn, facilitate the delivery of safe, effective and person-centred care.

As a modern outward facing organisation, NIPEC is acutely aware of the multi-professional nature of contemporary service models and provision within which nurses and midwives work. Consequently, NIPEC is committed to effective, positive partnership working and to establishing, forming and maintaining collaborations and strategic alliances with a wide range of stakeholders from various sectors in order to promote and support the practice, education and performance of nurses and midwives.

NIPEC also plays a particular role in supporting the vision and objectives of the DHSSPS Chief Nursing Officer in the continued pursuit of excellence in the delivery of nursing and midwifery services to the population of Northern Ireland.

In addition to its staff, NIPEC's key stakeholders include the following:

- Nursing and Midwifery Council (NMC) and Registrants
- o DHSSPS
- HSC Trusts
- HSC Safety Forum
- Health and Social Care Board (HSCB)
- Public Health Agency (PHA) and Local Supervising Authority (LSA)
- Patient Client Council (PCC)
- Education provider organisations
- Regulation and Quality Improvement Authority (RQIA)
- Royal Colleges of Nursing (RCN) and Midwives (RCM)
- o Trade Union organisations
- o Independent and Voluntary Sector

Quality 2020: A 10 Year Strategy to Protect and Improve Quality in Health and Social Care in Northern Ireland (DHSSPS, 2011) sets out a clear direction for building on and improving the quality of health and social care services in Northern Ireland. Its vision is for the Health and Social Care (HSC) system in Northern Ireland "to be recognised internationally, but especially by the people of Northern Ireland, as a leader for excellence in health and social care".



In line with the *Quality 2020* principles, NIPEC agrees that quality is everyone's business and is a part of everyday business. Whilst health and social care services continue to be delivered to the highest standards across a system which is supported by highly skilled and motivated staff, there is no room for complacency within a financially constrained system which delivers care against a context of increasing pressures and challenges.

This Annual Quality Report sets out what NIPEC achieved during 2014/15 to improve its services under each of the five strategic goals outlined in *Quality 2020*:

- Transforming the culture
- Strengthening the workforce
- Measuring the improvement
- Raising the standards
- Integrating the care.

Transforming the Culture

Our Vision and Values

NIPEC's vision and values ensure that the quality of the services we provide are of the highest quality and support an open, honest and transparent culture.

Our Vision

NIPEC will continue to act as a 'beacon' for the on-going development of the nursing and midwifery professions in Northern Ireland.

Our Values

- be transparent, open and impartial, acting with integrity and objectivity in the delivery of the responsibilities of NIPEC
- provide leadership that will have a positive impact on the professions
- be accessible and work collaboratively with individuals and interested organisations
- be accountable to the DHSSPS, public, stakeholders and staff for the activities of NIPEC, its stewardship of public funds and the extent to which key performance targets and objectives have been met
- be open-minded and innovative in our approach to our work
- promote a culture of equality and diversity
- maximise value for money through propriety and good stewardship of public funds ensuring the delivery of cost effective and efficient services within available resources, and with independent validation of performance achieved wherever possible.

NIPEC, in fulfilling its statutory responsibilities, places nurses and midwives at the centre of its activities. This includes promoting high standards of practice, education and professional development and providing guidance, advice and information on best practice and matters relating to nursing and midwifery to support the delivery of safe, effective and person-centred care.

NIPEC is not a care provider organisation; however, through its statutory responsibilities it is in a unique position to directly support the delivery of high quality frontline services provided to patients, clients and their families. This is demonstrated in NIPEC's Strategy Map below:

NIPEC - Strategy Map 2013 - 2016

Our Mission	The Northern Ireland Practice and Education Council (NIPEC) aims to improve standards of practice, education and professional development of nurses and midwives to facilitate their delivery of safe and effective person-centred care.				
Key Enablers	Engagement and Communication Governance and Performance Information and Evidence NIPEC Workforce				
Our Core Functions	Practice	Education	Professional Development	Advice, Guidance & Information	
Our Strategic Objectives	To promote high standards of practice among nurses and midwives.	To promote high standards of education & learning for nurses and midwives.	To promote professional development of nurses and midwives.	To provide guidance on the best practice for nurses and midwives; advice and information on matters relating to nursing and midwifery.	
Support the Delivery of Safe, Effective and Person-Centred Care Our Outcomes Inform the Nursing and Midwifery Workforce Influence and Translate Strategic Policy and Direction					

Maintaining Quality within Governance Arrangements

NIPEC reports on the quality of its performance through Annual Reports, Annual Quality Reports, Financial Statements and bi-annual Accountability Reviews with the DHSSPS.

NIPEC is accountable to the Minister for Health through the Department of Health, Social Services and Public Safety (DHSSPS).

Operating within the legislative and policy requirements of Arms

Length Bodies (ALBs) and within the principles of the HSC

Framework, the organisation is also accountable to the Chief Nursing

Officer in relation to professional issues.

As an accountable organisation, robust governance structures and systems are in place (Appendix 1) overseen by the Council which underpin the roles, responsibilities and functions of NIPEC, including an internal audit plan.

In terms of the focus on the quality of services, this is embedded within NIPEC's governance arrangements which ensure that the contribution of the organisation fits strategically and operationally in support of effective and quality care delivery across the HSC, as reflected within the Corporate and Business plans of the organisation. Oversight of the development and delivery of key organisational objectives are developed with key stakeholders and approved through the NIPEC Council which maintains regular oversight of the delivery of organisational objectives. Quality is also a standing item on the agenda of NIPEC Council meetings, Business Team and Professional Team meetings.

The Council regularly oversees the delivery of the Annual Business Plan by monitoring performance against objectives and, on an annual basis, undertakes a self-assessment of performance, used to improve effectiveness of the organisation.

NIPEC's Council is charged with setting the strategic direction of the organisation and overseeing governance responsibilities. The Council meets each quarter and as part of its role to monitor NIPEC's activities and performance, feedback is provided by senior staff by means of written and verbal reports as well as presentations on the initiatives, projects and governance issues.

The Council are regularly updated on all relevant operational issues and actively participate in decisions regarding organisational developments in relation to broader strategic themes emerging from a range of sources. These include regulatory and legislative requirements such as those from the Nursing and Midwifery Council (NMC) and DHSSPS, along with the learning from RQIA and other inspections and reviews. As such the Council along with NIPECs staff have the opportunity to influence broader and internal policy and practice by responding regularly to consultations and outcomes of reviews and inspections. For example, two strategic workshops were convened during 2014/15 for NIPEC Council members and staff to consider and respond to the outcomes of the *Donaldson Report* (2014) and the draft DHSSPS Nursing and Midwifery Strategy (publication pending).

One major area of work embarked upon by NIPEC has been the support provided to the NMC and DHSSPS in taking forward the development of a model for revalidation for nurses and midwives across the UK. The Council provided its full support for this important programme of work from an early stage and continued to ensure that resources were targeted towards this key regulatory requirement which emanated through the NMC from the *Francis Inquiry* (2013).

As part of the Council's annual governance cycle the members also participate in NIPEC's annual stakeholder workshop to review and quality assure the current

organisational business objectives and plan for the next year's objectives in the context of stakeholder engagement and broader professional regulatory and strategic priorities.

NIPEC's Senior Management Team, which comprises five Senior Professional Officers and the Head of Corporate Services, supports the Chief Executive in the operational aspects of its business.

During 2014/15, NIPEC maintained a robust governance and accountability framework by:

- ensuring that Business Risk Management remained firmly integrated within the organisation, so that risks to the organisation were managed effectively and proportionately
- o maintaining its robust financial governance arrangements
- o complying with statutory and regulatory requirements
- ensuring the safeguarding, and proper and effective use of public funds, together with the stewardship of assets and resources
- o quality assuring its project work using the NIPEC Quality Assurance Enhancement Framework.

In accordance with NIPEC's Records Management policies and procedures and the principles outlined in Records Management: Good Management Good Records (DHSSPS, 2011a), a system is in place to ensure effective and efficient storage and retrieval of records, documents and resources. This supports a paper-light system of records management within NIPEC. This will be reviewed during 2015/16 to provide assurance and inform any need to further develop NIPEC's governance arrangements.

As NIPEC continues to develop and take forward work into the future every opportunity will be used to improve systems based on new information and evidence along with internal reviews of extant policies and procedures.

Communication and Engagement with Stakeholders

Health and Social Care provision in Northern Ireland is delivered within a context that requires effective working across a wide number of organisations and agencies and across the professions.

NIPEC has developed a strong ethos of collaborative working with its key stakeholders across all areas of activity and has developed a reputation for facilitating successful regional projects and initiatives.

During 2014 - 2015, NIPEC continued to engage with its stakeholders, working in partnership and in a facilitative manner to engender positive working relationships. It is also relevant to note that within the current economic climate, NIPEC is committed to using relevant technologies to facilitate multi-site working.

The work of NIPEC was also guided and supported by the range of stakeholders invited to participate and contribute to the full range of work streams. Examples include:

Regional agreement progressed for specific project outcomes of the Delivering Care project in Phase 2: Emergency Care settings, Phase 3: District Nursing Teams and Phase 4: Health Visiting Teams. A range of workshops were convened with various project groups to enable regional stakeholder discussion and agreement with 141 staff representing the five HSC trusts, Public Health Agency and DHSSPS across emergency departments, district nursing services and health visiting teams who attended a total of nine events throughout 2014 -

2015. On occasions this included access to national experts for nursing workforce planning

 Engagement with clinical experts in endoscopy, mental health, learning disabilities and children's care settings via face to face workshops to progress regional nurse records and data sets for use across the five HSC Trusts. Five events were facilitated within this work



stream, enabling 52 people to engage as experts in their area of practice to advise the development of this work. A further 40 people were updated at a regional event in May 2014 in relation to the use of the endoscopy day care record.

NIPEC was asked by the Chief Nursing Officer to work in partnership with the Emergency Nurse Network to facilitate a project to advance the professional development of the Emergency Care Nursing workforce in Northern Ireland. To support the project NIPEC made arrangements for engagement with ED front line nursing staff across the five HSC Trusts. The purpose was to inform staff about the project and used a short questionnaire to capture what learning and development opportunities are available to support staff and explore how these could be enhanced. NIPEC Officers were present in EDs during December 2014 and January 2015. Over 200 questionnaires were completed either on the engagement visits or via link on the NIPEC website. To ensure on-going engagement and ownership of the project by key stakeholders, NIPEC organised an engagement event at the end of Phase one of the Professional Framework for

Emergency Care Nursing Project. This event was attended by twenty seven staff specifically nominated by the project steering group members to represent frontline staff across all Bands.

Senior Professional Officers keep stakeholders informed and updated on any actions, decisions and/or outcomes of the projects and initiatives by the circulation of action notes which are also posted on the NIPEC website in the relevant/current work page. There is also the opportunity for the dissemination of bulletins, flyers and newsletters to the wider HSC independent and voluntary workforce which includes independent hospitals, hospice and nursing homes.

Each project has its own page on NIPEC's website, which provides project information to all those interested in the project including members of the Project Group. Information on the project webpage usually comprises the project plan, agenda, approved notes of meetings, any relevant presentations and links to other relevant websites, including the NMC.



Workshops may be held to gather further feedback on resources which are developed. This approach facilitates engagement with key stakeholders and ensures that a user friendly effective resource is developed. *Gotomeet* has proved an effective piece of software to facilitate Project Group members to have virtual meetings to edit documents in real time while remaining at their own location. This software was particularly useful during the following Projects:

- Review of Midwifery Supervision: eight members of the expert reference group (ERG) reviewed the content of the final report allowing for majority agreement to its content
- Healthcare Support Worker: enabling engagement with 5 Senior Nurses from HSC Trusts and Staff Side Organisations as part of a small editing group
- Advanced Nursing Practice Framework: facilitating an editing group of 5 senior nurses from HSC Trusts, Universities and Professional Bodies.

NIPEC worked to better understand key priorities and needs across the HSC system and across independent, voluntary and education provider organisations and at individual registrant level. Notable examples in this regard include:

o Implementation of a Partnership Framework to guide NIPEC in continuing to strengthen its partnership arrangements. Utilising a six principle approach to assess effective partnerships, NIPEC can reassure itself and its stakeholders that the arrangements are successful and have fulfilled their purpose. This framework has been tested with the Practice Education Facilitators (PEFs) and Practice Education Coordinators (PECs) from HSC Trusts during 2014/15 and a programme to review other partnerships arrangements will be agreed for 2016/2017.

o Implementation of an Engagement and Communication Strategy which included the Implementation of NMC Revalidation, Strengthening the Commitment: NI Action Plan and the Professional Framework for Emergency Care Nursing. Each of these work streams have in place a robust engagement and communication plan using the principles within the NIPEC engagement and communication strategy. Frequency of communication/communiques/updates are decided and agreed by the project Steering Group. NIPEC reviewed its previous Communication Strategy during 2014/15 to include engagement with key stakeholders. This is a guide to support staff during any engagement process within work streams and to ensure that the wider HSC organisations remain informed of NIPEC's work. This strategy will continue to be regularly reviewed and updated.

NIPEC's Annual Stakeholder Engagement Workshop (October 2014) focused on identifying priorities for 2015–16. Twenty three senior representatives attended from a wide cross-section of stakeholder organisations, including the Nursing and Midwifery Council (NMC), HSC Trusts, the Royal College of Nursing, the Royal College of Midwifery, the University of Ulster, the HSC Clinical Education Centre and the Independent and Voluntary sectors. A report of the event was prepared and this was used to inform NIPEC's Business Plan (2015/16).



o An annual report in relation to the nature of enquires received through the NIPEC enquiry line and other sources, to provide internal assurance that responses

were appropriate and timely. The purpose of the report is to identify areas which may require further strengthening on NIPEC websites or information leaflets.

One of NIPEC's main vehicles for communicating to stakeholders is its website. NIPEC applies robust mechanisms to ensure that its website is an effective and easily accessible resource for nurses and midwives supporting them in their practice, education and professional development. The site received an average of 185,794 (April 2014 to March 2015) hits per month (Figure 1) from 17,370 unique visitors (Figure 2), with the most visited areas being Implementation of Revalidation for nurses and midwives in NI, Professional Framework for Emergency Care Nursing, Midwives and Medicines, Record keeping and events/presentations. The website is continually growing and being adapted to ensure that it continues to meet the needs of nurses and midwives within Northern Ireland.

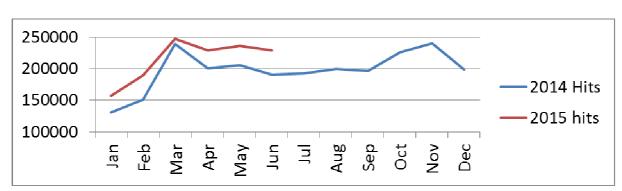
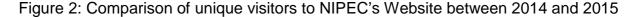
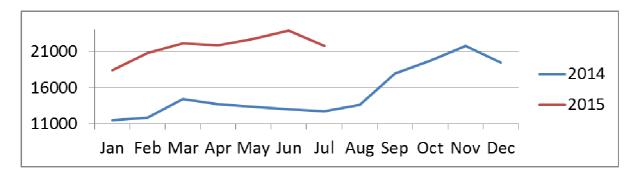


Figure 1: Comparison of NIPEC website hits per month between 2014 and 2015

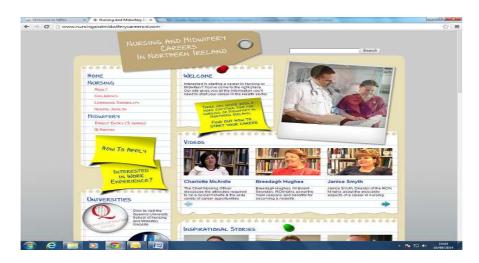




Visitors from over 28 countries accessed NIPEC's website during 2014 and 2015.

During 2014/15, information available on the website was added and/or enhanced to ensure the provision of up to date and relevant information. For example, information on the website includes:

- o Implementation of NMC Revalidation for Nurses and Midwives in NI: along with the usual information on NIPEC website pages regarding project updates, this web page provides information for use by registrants to help them understand revalidation, the implications of revalidation and where to get further support and information. It provides direct links to a range of resources developed by the NMC including frequently asked questions and was also used to advertise NIPEC revalidation road shows geographically spread across Northern Ireland
- o Promotion of a Career in Nursing or Midwifery for young people through the website www.nursingandmidwiferycareersni.com. The website and the associated nursing and midwifery career leaflets were presented to approximately thirty students at the Newtownards and Lisburn campuses of the South Eastern Regional College in November 2014. The students on the programme were undertaking a Diploma in Healthcare and had applied for a place on a nursing or midwifery pre-registration programme.



The average hits on the *Career in Nursing or Midwifery* website increased by 14% in 2015 to 35,502, from 31,535 in 2014 (Apr-Mar). Similarly the unique visitors to the site increased 37% in 2015 from 2742 in 2014 to 3756 in 2015.

- A wide range of projects and resources which provide details on the progress of projects, how resources were developed and who was involved in the work.
- NIPEC's online portfolio was further refined to meet the requirements for NMC revalidation https://nipecportfolio.hscni.net. The portfolio is designed to assist nurses, midwives and specialist community public health nurses, to keep a record of their practice, reflections and learning and development activities. The portfolio was also updated to enable midwives to keep an electronic record of their annual midwifery supervision review.



Ocompetence assessment tools are available on the NIPEC website and on the online portfolio website. These tools enable nurses and midwives to complete a self-assessment in order to identify their learning needs and develop their knowledge, skills and attitudes. Three competence assessment tools were added to the website between November 2014 and March 2015: Attributes Framework, Safeguarding Children and Young People, a Competency Framework for Nurses and Midwives and Respiratory Competency Assessment Tool.

Regular newsletters and communiqués are also used to promote awareness of NIPEC among HSC staff and service users including *SCAN* and *NIPEC News*:

o SCAN highlights current topical health and healthcare issues, key publications and events, under the broad headings of governance, leadership, workforce, education/development and patient experience. SCAN is a useful resource which keeps recipients up to date by bringing together relevant information on professional developments and recent publications in nursing and midwifery at local, national and international level.



SCAN is issued via email to ninety-three Senior Nurses and Midwives in the statutory and independent sectors including HSC Trusts, PHA, DHSSPS, Independent Hospitals, Hospices and Nursing Homes, as well as Education Providers and Staff Side organisations. SCAN is then circulated by these individuals within their organisations. It is also published on NIPEC's website and promoted through NIPEC's social media. NIPEC intends to conduct a survey of those who receive SCAN in April 2015 in order to ensure it continues to meet the needs of registrants.

o NIPEC News is normally published twice a year and contains project updates which highlight the important work that NIPEC undertakes, along with staff

changes, information on current surveys, further events and updates from NIPEC conferences held during the year. It facilitates the Chief Executive and Senior Professional Officers to correspond directly to the readership, directing them towards further information on our website. The newsletter is distributed electronically to nurses and midwives, is accessible on NIPEC's website and Social Media Fora and distributed in hard copy to HSC Trusts, GP surgeries and Health Centres, and independent/private nursing homes across Northern Ireland.





In addition, during 2014/15, survey management technology via

NIPEC's website was used to gather information relating to various projects being taken forward. This included a region wide engagement exercise on behalf of the Chief Nursing Officer for

Northern Ireland with nurses, midwives and members of the public to provide early feedback on a new Nursing and Midwifery Strategy for Northern Ireland to span 2015 – 2020. Information from this exercise informed the production of the final draft strategy document for consultation during the latter half of 2015. A total of 222 responses were received via the NIPEC online questionnaire which provided the DHSSPS with rich information informing the future development of the strategy. A wide range of individuals responded, both registrant and non-registrant across statutory sector and independent and voluntary sector organisations, including education. Similarly, as part of the Workforce Plan for Nursing and Midwifery (2015-2025), which NIPEC project managed on behalf of the CNO, final (3rd) year Student Nurses and Midwives were asked to participate in a survey to ascertain their views on taking up a post in Northern Ireland following completion of their educational programme and NMC registration. Ninety six students commenced the survey with 87 (90.6%) completing it.

During 2014/15, NIPEC's work streams, conferences and workshops were planned, co-ordinated and evaluated within existing resources, by a small team of experienced staff which incorporated administrative and clerical, IT and nursing or midwifery staff, who successfully delivered each product and event to the highest standard. Success was regularly reinforced by feedback and evaluation (informal and formal). The aim of this was to provide a forum where all speakers who represented all levels and backgrounds across the system, could share with the audience how their work associated with professional standards enhanced practice and person centred, safe, effective care.

o Midwives and Medicines (NI) 2014 was launched at the NIPEC Conference October 2014. This resource supports midwives to safely undertake their role and responsibilities in relation to medicines management including those relating to Midwives Exemptions. The resource is an online interactive tool which

includes an e-learning package provides midwives with and valuable education materials to support the delivery of safe and effective practice. In the development of this resource NIPEC engaged with all five HSC Trusts via the Steering Groups members to key stakeholders in midwifery and pharmacy professions along with Education, Health and Social Care system



and Royal Colleges. The aim of the engagement was to conduct small scale testing to ensure the product would be fit for purpose. Following the testing, additional changes to the product were adapted and reviewed again by all five HSC Trusts. Access to the resource is available at:

One hundred and fifty delegates from across NI attended the conference and evaluations were extremely positive and affirmed that the aims of the conference were achieved which was also evident from feedback on the day.

The idea that the professional standards ensure the patient and person centred care is at the heart of all we do





Sharing of excellent up to date knowledge and practice

Valuing Staff

NIPEC is a person-centred organisation, guided by a set of important values that directly impact on what it does and how it does it.

NIPEC as an organisation values its workforce. As a small and effective organisation, team working and the promotion of a positive culture, in order to develop and maximise the contribution of the workforce, is central to the delivery of corporate objectives.

In October 2014 staff from NIPEC were invited to participate in a Team Effectiveness Event with the following objectives:

- Understand the value and diversity of individuals and how they contribute to the team
- Get an insight into team roles and individuals behaviours
- Provide an opportunity to discuss and understand what being an effective team looks and feels like for them
- Have space and time to discuss team challenges
- Have some time to reflect on the achievements and positive contributions and enjoy the opportunity to reflect on these.

As a result of this event, an action plan with 6 key objectives, actions and outcomes, was developed and agreed with all staff. These objectives form part of NIPEC's Business Plan for 2015/16 and will be monitored and reported on throughout the year.

A follow up Team Effectiveness Event is planned for June 2015 to review the action plan, provide staff with an opportunity to update their colleagues on progress made on the various actions, and discuss and agree any new priorities. This programme of work has given everyone working in NIPEC an opportunity to be involved in building a model of good teamwork, provide their own views on how the team can operate, whilst also looking at team behaviours and attitudes and how these can contribute to a safe and supported working environment where their contribution is valued and acknowledged.

A range of policies and mechanisms are in place to support staff in the workplace including NIPEC's Working Well Together Policy and Capability/Competence Procedure, the range of HR 'family friendly' policies, the availability of a suggestion box, our internal meeting structure (Business Team, Corporate Services Management Team, Professional Team, Admin meetings, staff meetings and 1:1 appraisal and development meetings) and line management structure.

These support and encourage staff to be involved in decision making, problem solving and innovation and to raise concerns in a safe environment and have these listened and responded to; and address problems and challenges when improvement is recommended.

Staff are also involved in a number of working groups on a regular basis (eg. health and safety; health and social wellbeing) and on ad-hoc basis (eg. conference planning). Their contribution brings a wealth of knowledge, skills and experience, supports the work of NIPEC and is greatly valued.

NIPEC reviewed its sickness KPI in 2013-14 and reduced the target from 5.2% to 4.7%. For 2014-15 NIPEC's absence rate was 3.0%. However, it should be noted that due to the relative size of NIPEC's staffing structure i.e. 19 staff, a short period of long term absence can skew the yearly average figure.

Staff are able to make a self-referral to the Occupational Health Service and to the HSC contracted staff support service, Carecall. Both of these services provide invaluable support and advice to individuals.

As NIPEC is a relatively small NDPB within the HSC family of organisations, it is important that the well being of staff is a high priority. Staff can avail of the HSC occupational health facilities and the annual flu vacation process. Staff absence is one of NIPEC's KPIs which is monitored monthly by the Business Team and quarterly by the Audit and Risk Committee.

The Joint Negotiation and Consultative Committee (JNCC) continued to meet on a regular basis during 2014 - 2015 and NIPEC ensured that its HR policies and procedures were in line with best practice by utilising the services of the BSO's Human Resources and Equality Officers.

Strengthening the Workforce

Nursing and Midwifery Workforce

A range of recent changes and challenges are significantly impacting on the nursing and midwifery workforce in Northern Ireland including; changing population demographics; an increase in public health roles; working within integrated teams; changes in modes of service delivery from predominantly acute to primary and community based care; enhancing multi-disciplinary and multi-agency working; a revised NMC Code; the impending introduction of Revalidation and the further development of Advanced and Specialist Practice roles. NIPEC's culture welcomes and supports change and innovation and effective leadership at all levels within the nursing and midwifery professions. During 2014/15, NIPEC fulfilled its leadership role through supporting the translation of policy into nursing and midwifery practice and aligning work streams to regional strategies and professional and regulatory developments.

This was aimed at strengthening the capacity and capability of the nursing and midwifery professions.

NIPEC also played a particular role in supporting the vision and objectives of the DHSSPS Chief Nursing Officer in the continued pursuit of excellence in the delivery of nursing and midwifery services to the population of Northern Ireland.

In addition, NIPEC responded to organisations requiring bespoke work programmes, as specific practice based issues emerged.

NIPEC also delivered its responsibilities of promoting high standards of practice, education and the professional development of nurses and midwives to develop leadership knowledge and skills, improve practice and introduce new ways of working. Examples include:

A Workforce Review and Plan for Nursing and Midwifery (2015-2025): NIPEC conducted this work stream in support of the DHSSPS Chief Nursing Officer. The key purpose is to enhance the quality of care delivered to patients by ensuring that the nursing and midwifery workforce has the right numbers, skills, values and behaviours the meet the population in Northern Ireland over the next ten years. A wide range of representatives from stakeholder organisations engaged in the process including DHSSPS, HSCB/PHA, HSC Trusts, Human Resources, the voluntary and independent sector and professional and trade union organisations. A range of methods were employed during 2014 and 2015 to meet the project aim and objectives including gathering and analysing statistical data, conducting a range of workshops, surveys, focus groups and

interviews with stakeholders across the HSC system and reviewing relevant policies and strategies to identify proposed capital and service developments or changes over the next ten years. The findings were used to inform and shape the content and recommendations included within this Plan.





The development of the Advanced Nursing Practice Framework. This Framework was developed with key stakeholders from HSC Trusts, Higher Education Institutions, Professional Bodies and including Advanced Nurse Practitioners. It provides clarity about the role, including academic and competence requirements of an advanced nurse practitioner. The core competencies within the Framework and the associated learning outcomes were specifically designed to guide the curriculum development of MSc Educational and Training programmes for Advanced Nurse Practitioners and will also be useful for the development of job descriptions and guiding continuous professional development. The Framework can be viewed on the DHSSPS Chief Nursing Officer's website at: http://www.dhsspsni.gov.uk/advanced_nursing_practice_framework.pdf

NIPEC also provides leadership to empower staff to transform services and influence change at all levels. Examples during 2014/15 include:

- o The Attributes Framework (DHSSPS 2014) which was developed by the HSC Safety Forum and NIPEC in partnership with key stakeholders within Health and Social Care, including Medicine, Nursing, Midwifery, Allied Health Professions, Social Work, and General Practice to support leadership for quality improvement and safety at all levels in Health and Social Care. The purpose of the Framework is to enable:
 - 1. individuals to assess their current attributes (knowledge, skills and attitudes) in relation to leadership for quality improvement and to determine the learning and development needs for their current role or for future roles

2. organisations to build the capability and capacity of the workforce to participate in, and lead, initiatives which develop quality care and services.

During its development the *Framework* was tested with small groups of key stakeholders and also by undergraduate students. This enabled further refinements to be made so that it was applicable for both those employed and those in training in Health and Social Care. The *Framework* including the online competence assessment tool was launched by Minister Wells on 9th December 2014.

NIPEC continued to work with the HSC Safety Forum and the Quality 2020 Project Manager throughout 2014-2015 to support the Co-Chairs of Task 4 with the implementation of the Attributes Framework. This involved gathering information from HSC Trusts on the numbers of staff trained/competent in each of the four levels of the Attributes Framework and estimated numbers to be trained. This was followed up by a workshop facilitated by NIPEC and the Safety Forum on 11 March 2015 for HSC Trusts and Education Providers to plan for the implementation of the Attributes Framework and training required.

NIPEC and the Safety Forum have held a workshop on behalf of Quality 2020 Task Four Leads to support organisations to determine how to implement the Attributes Framework and develop training to support this.

Knowledgeable and competent practitioners are vital in ensuring the delivery of safe and effective practice. The Nursing and Midwifery Council (NMC) requires that nurses and midwives "...must keep (their) knowledge and skills up to date, taking part in appropriate and regular learning and professional development activities that aim to maintain and develop (their) competence and improve (their) performance" (NMC, 2015).

Key to this is the need for strong and visible leadership at all levels to ensure that innovation and change are supported by informed practitioners and that when things go wrong, that registrants can identify and articulate the issues to effect the right change at the right time on every occasion. As such NIPEC has a unique role to develop resources and tools which support those at all levels within the HSC to identify where improvements can be made (including addressing and where appropriate escalating concerns) and new methodologies introduced to support and take forward transformational change.

During 2014 -2015, NIPEC played an important role and led work along with other key leaders to support a flexible approach to the learning and development of nurses and midwives. Part of this was the production of resources, which can be used creatively and flexibly, to enable registrants to enhance their competence and performance to improve the quality of care they provide to their patients and clients.

Examples include:

- O A Career Pathway for Nursing and Midwifery in Northern Ireland: NIPEC commenced the development of this programme of work on behalf of the DHSSPS Chief Nursing Officer. The Career Pathway will cater for careers in clinical practice, education, research and leadership and management within the statutory and independent sectors. It aims to guide those who are considering a career in nursing or midwifery as well as those retuning to practice or considering a change of career or other career options.
- o Gateway to Nursing: NIPEC led a project to facilitate the production of a strategy which optimises efficiency of application and selection processes and enables the identification of individuals who display attributes which are valued to realise future potential in a career in nursing. Evaluation of the implementation of this strategy has demonstrated efficient use of both university and clinical staff time to select appropriate individuals for pre-registration nursing programmes.
- o Leadership Updates: NIPEC officers are aligned to and work closely with registrant staff in other HSC organisations providing professional update and raising awareness on issues which have the potential to impact on professional practice and ultimately safe effective person centred care provision. This includes HSC Trust Nursing Executive meetings, and other organisations such as the Regulation and Quality Improvement Authority (RQIA).
- NIPEC worked with key stakeholders to develop an Undergraduate Access to Degree Level Study Accredited Prior Learning Information Fact Sheet which was endorsed by the Education Strategy Group during 2014.
- Enhancement of NIPEC's e-resources: the competence assessment tools outlined in Table 1 were further developed in a web-based format to facilitate online completion to support staff with reflection and enhancement of knowledge and skills:

Table 1: Competence Assessment Tools

NIPEC's e-resources:	Available at:
Attributes Framework	https://nipecportfolio.hscni.net/compro/attributes/intro.asp
Respiratory (R-CAT)	https://nipecportfolio.hscni.net/compro/rCAT/myAssess.asp
Safeguarding Children and Young People	https://nipecportfolio.hscni.net/compro/safeNurse/myAssess.asp

NIPEC also promoted improved standards of education and development in collaboration with education and service providers and provided a range of activities and events relating to education, learning and development to facilitate and further develop the competence of nurses and midwives. Examples include:

o Annual Quality Assurance: a sample of DHSSPS funded education and learning programmes and activities were monitored within an agreed framework (NIPEC, 2011). Findings and themes were presented in the form of a report to the DHSSPS. Programmes included in the QA monitoring during 2014-15 are presented in Table 2 below:

Table 2: Programmes included in NIPEC's QA monitoring during 2014-15

Education Provider	Title of Educational Progamme
CEC	Fluid Management in Children and Young people (from 1 month up to 16 years of age only) Care Planning 1 day work shop
RCN	Preparing for Ward Manger post – Developing skills for the complex world of today
UU	Case Management /Chronic Disease Management
QUB	Principles of Critical Care in Midwifery

- In partnership with the Infection Prevention and Control (IPC) Lead Nurses, engaged with Higher Education Institutions to update nursing and midwifery education staff in current IPC policies and procedures
- Continued enhancement of NIPEC's website to support the on-going continuous professional development of nurses and midwives and in anticipation of the revalidation requirements of the NMC;
- o NIPEC supported the DHSSPS Education Commissioning Group by co-chairing a small task and finish group to develop an Education Commissioning Framework. The framework was based on a three year education commission direction established on strategic priorities. The group also developed a foundation for annual education commissioning based on a skills escalator approach. This three year commissioning plan for the first time is entirely driven by Government commissioning directives and service need ensuring registrants access education and development relevant to the needs of service.
- During 2014 NIPEC was commissioned by the CNO to conduct a review of how Manchester Triage Cascade Training is organised across the five HSC Trusts in

- NI. The recommendations from this review have led to further work. NIPEC is currently developing a framework to support the five HSC Trusts in the delivery of Triage Training.
- Competence assessment tools along with NIPEC's online portfolio available at https://nipecportfolio.hscni.net continued to be used by nurses and midwives to enable them to reflect on their practice and enhance professional development. The competence assessment tool developed for ward sisters and charge nurses enables these leaders to plan their learning and development needs in order to improve their competence as a leader. One ward sister commented that she found the competence assessment tool was very useful in helping her prepare for her KSF Development Review and plan her personal and professional development.
- NIPEC enhanced its e-resources during 2014/15 including a range of miniwebsites accessed through NIPEC's main website, for example, the Midwives and Medicines (NI) 2014 interactive pdf. This resource is available to midwives to download to any mobile device and contains information to enable midwives to safely and effectively administer and supply medicines especially those under the midwives exemptions. The resource has an eLearning assessment which tests the midwives knowledge. Following successful completion of the assessment a certificate is available to evidence learning. Midwives are encouraged to include the certificate in their annual midwifery supervision reviews.
- o NIPEC provided the vehicle for the NMC to consult with Northern Ireland in advance of the production of the revalidation model and The Code. In addition, to support the implementation of Revalidation, NIPEC planned an extensive number of Revalidation road shows due to be rolled out from 13th April 2015.

NIPEC also encouraged nurses and midwives to be involved in decision making, problem solving and innovation at all levels. Examples include:

- Oblivering Care: NIPEC managed and coordinated the testing of an approach to regionally determine the number of nursing staff required for all (nine) type one emergency department in Northern Ireland. A regional pilot of the Baseline Emergency Staffing Tool produced by the Royal College of Nursing United Kingdom (RCN, UK), led to agreement on a way forward for this area of work force planning.
- Draft Mental Capacity Bill: NIPEC officers worked with staff from the DHSSPS
 Justice and Health departments to lead and coordinate a response on behalf of
 Nursing and midwifery to the public consultation of the draft bill during July and
 August 2014. This involved four sessions which were geographically spread

across NI to facilitate as many registrants as possible to attend. In total 150 registrants attended the sessions which outlined the content of the bill and potential impact to practice and services. Subsequent feedback was offered to the joint Departmental working group and for consideration.

- O Strengthening the Commitment NI Action Plan: A Northern Ireland Regional Collaborative has been established to take forward the NI Action Plan. The Collaborative is supported by a NIPEC Senior Professional Officer. The NIPEC SPO worked with the NI Collaborative to plan co-ordinate and deliver information sessions across the five HSC Trusts regarding the NI Action Plan. In total six information seminars were delivered; one session in each of the five HSC Trusts and one in Four Seasons Health Care; ninety three staff attended in total ranging from pre-registration Learning Disabilities nursing students to Assistant Directors of Mental Health and Learning Disabilities and Executive Directors of Nursing.
- Delivering Excellence: Supporting Recovery (DHSSPS, 2010): NIPEC, in partnership with the Public Health Agency (PHA), has established a Regional Group to support implementation and monitor progress of the Professional Framework for Mental Health Nursing. The Group has agreed an Action Plan and NIPEC are supporting the development of a range of resources, guidance and competency frameworks to support HSC Trusts to improve the safety and effectiveness of mental health nursing services and the experience for people with mental health needs and their carers. An annual report was submitted through the PHA to the Chief Nursing Officer (CNO).
- O Resources to support Healthcare Support Worker roles: NIPEC developed the following at the request of the Director of Human Resources and Chief Nursing Officer, DHSSPS; A Code of Conduct, Job descriptions for Band 2 and Band 3 Nursing Assistants and an Induction and Development Pathway. These have been submitted to DHSSPS and are under consideration for implementation in HSC Trusts.

NIPEC's Workforce

NIPEC is a relatively small NDPB within the HSC family of organisations, providing effective and efficient service to its stakeholders. Our organisational chart is presented in Appendix 2. As a person-centred organisation, NIPEC is guided by a set of important values that directly impact on what it does and how it does it. The contribution of the workforce is central to the delivery of NIPEC's corporate and business objectives and therefore staff are at the heart of what NIPEC does.

NIPEC has an embedded system of staff development and performance reviews with individual roles and responsibilities and objectives discussed and included in annual personal development plans and reviews to ensure high quality outcomes. Through this process during 2014/15 all staff were able to identify, with their line manager.

their learning and development needs and learning opportunities enabling staff to keep up to date and avail of opportunities both internal and external to the organisation to support them to work effectively within the team.

In addition, systems and processes exist to monitor the NMC registration of NIPEC's professional staff and support their mandatory continuing professional development (CPD) activities.



During 2014/15 NIPEC has supported the leadership development of nurses substantively employed within the HSC Trusts through secondment opportunities. Selected through a recruitment process, a number of HSC Trust staff had the opportunity to support elements of project work regionally, acquiring and building leadership and strategic professional practice skills under the supervision and direction of senior professional staff. Examples during 2014/15 include: a professional officer for the Recording Care project and a professional officer for the Professional Framework for Emergency Care Nursing.

A NIPEC Officer participated on behalf of nursing and midwifery in the region in the 2014/15 HSC Change Day core team. On HSC Change Day, which was linked to the



national and international Change Day, there were 36 events organised which ranged from a Back to the Floor event in BHSCT to coffee mornings, project launches, healthy lunches, arts events, pledges booths and twitter Significantly, a photograph was taken with the entire Health Committee in Stormont to support change day and 5 explained pledgers their individual pledges to a patient safety conference run by the CNO.

Evaluation following the events has demonstrated system wide involvement of no less than 5000 people with significant participation from service users and carers. In addition, NIPEC hosted an organisational event on March 11th 2015 (Change Day) to encourage all staff to participate in this ground up quality movement, making their own pledge for change and improvement.

Effective communication with staff

Although NIPEC is a relatively small organisation whose workforce are all based in the same location, effective internal communication is still important in ensuring all staff are kept informed and involved in the business of NIPEC. Improved working relationships, morale and team working are all by-products of effective internal communication, and regular internal briefings, staff noticeboard and informal face to face updates are all used to ensure staff are kept informed and up-to-date.

Staff are brought together on a regular basis to share information, provide updates and seek feedback on issues affecting the organisation. In addition, a number of internal meetings are held on a regular basis to involve and inform staff at various levels; these include Business Team, Professional Team, Corporate Services Management Team, and Administration Team meetings. The Chief Executive also holds regular 1-1 meetings with members of the senior team.

Staff health and wellbeing

The health and wellbeing of staff is a high priority for NIPEC and a range of family friendly policies are in place to support staff in achieving a work life balance. The establishment of a Health and Wellbeing Committee in February 2015 is an example of how the organisation strives to nurture and improve staff relationships and support staff in accessing a range of activities aimed at improving their health and wellbeing.

The Committee, comprising of professional and corporate services staff, has overseen the development and implementation of a programme of activities and events for all staff throughout the year: these include health screening and awareness sessions; 10,000 Step Team Challenge; monthly health breaks ('Fruity Fridays'); and a Halloween coffee morning and shoebox appeal for local charities. Staff participation is entirely voluntary and an evaluation of all the activities will help inform planning of events in the future.



Absence is managed and in a supportive and proactive manner following agreed regional policies and procedures. Staff can avail of the HSC staff support service (Carecall), BSO occupational health facilities and the annual flu vaccination process.

Investors in People

NIPEC has demonstrated an on-going commitment to the principles of Investors in People over a significant period of time. NIPEC achieved its third successful post recognition review in February 2015 and the assessment process provided an opportunity to feedback on people management and development practice undertaken to inform future strategies and plans. A small number of areas for further development and improvement were proposed by the IiP assessor and NIPEC has developed an action plan to explore and progress these.

NIPEC's Business Plan 2015-16 identifies a number of people priorities including: the capability of managers to lead and engage teams to achieve the business plan objectives; and the development of a competent and valued workforce. The Team Effectiveness Event is an example of how NIPEC continues to involve staff in exploring and agreeing steps to achieving high performance and effective team working.

Accreditation by External Bodies

NIPEC continues to hold <u>Investors in People</u> (IIP) accreditation. A small working group, comprising of senior professional and corporate services staff, has been established to co-ordinate NIPEC's application for future reassessment.

Measuring the Improvement

Gathering Information and Examining Data

NIPEC is committed to developing, producing and disseminating evidence-based, quality and accessible information and resources. This is undertaken in partnership with a wide range of key stakeholders across the nursing and midwifery professions within the statutory, voluntary and independent sectors.

During 2014 – 2015, NIPEC continued to support nurses and midwives to remain up to date on major strategic and policy issues through the provision of advice and information and the development and dissemination of a range of relevant publications which are available online. On occasions, NIPEC facilitates wider engagement and support for registrants to respond to broader consultations and raise awareness regarding the outcomes of regional and national inquiries.

Each NIPEC work stream, which has been set up in support of the achievement of a specific corporate objective, is championed and led by a designated Senior Professional Officer (SPO) who is accountable for the effective management and delivery of the aims and objectives of each project. SPOs are assisted by administrative and clerical support and have ready access to IT and library support in order to ensure the effective utilisation of skills and technologies. The work of NIPEC is underpinned by research and evidence from a review of relevant literature.

There are a number of examples which demonstrate how NIPEC supports nursing and midwifery practice specifically through gathering and examining data including the following:

- Audit information relating to the standard of nurse record keeping practice across the five HSC Trusts is gathered continuously on the NIPEC Online Audit Tool (NOAT). The audit scores are reviewed within each organisation and improvement action plans put in place. They are then presented quarterly to the Recording Care Steering Group for strategic review and following that, to the Chief Nursing Officer and Executive Nurse meeting, DHSSPS. This has led to specific work related to improving nurse care planning during 2014/15 and the development of a practice framework for Health Care Support Work staff who write in nursing records. The standards outlined within NOAT are also used by the Regulation and Quality Improvement Authority to review record keeping practice across the region in both statutory and independent and voluntary sector organisations
- In December 2014 March 2015 NIPEC supported an online survey gathering and analysing data relating to the quality and experience of professional

supervision processes in HSC Trusts including the perceived impact to patient and client care and experience. This information was collated and presented back to HSC trusts to support their annual report to the Chief Nursing Officer on professional supervision. In particular, clinical areas of low uptake have been identified and potential reasons for this occurrence

Ouring 2014-2015 the Safeguarding Children and Young People: A Core Competency Framework for Nurses and Midwives (2012) was assessed for its impact on practice. NIPEC's Impact Measurement Framework was used to undertake this assessment. The findings of this project will be reported in 2015/16 to NIPEC Council and the DHSSPS Chief Nursing Officer with recommendations to support effective implementation of the Framework by Nurses and Midwives

Each year the Northern Ireland Ombudsman continues to make mention of the standard of record keeping practice across all organisations and professions. NIPEC recognises that this area of practice remains an improvement challenge and has therefore maintained consistent resourcing in this area of work through the leadership and management of the regional Recording Care project the aim of which is to improve the standard of nurse record keeping practice in Northern Ireland. NIPEC had no complaints in 2014-15, so no lessons can be drawn from this with regard to improvements to the work of NIPEC however as an organisation we are not complacent and continue to use feedback from stakeholders along with new evidence to shape and take forward work.

NIPEC also participates in the HSC Control Assurance Standards which are defined by the DHSSPS. From the nine standards which are relevant to NIPEC's role and function it obtained the level of 'substantial' compliance i.e. a score of 75- 99% for all nine areas. The individual compliance scores for the year 2014-15 compared to the year 2013-14 are as follows:

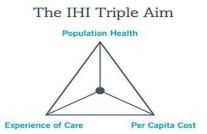
Control Assurance Standard	Score in 2014-15 - %	Score in 2013-14 - %	Variation in %
Governance (Core Standard)	94	94	-
Financial Management (Core Standard)	88	88	-
Risk Management (Core Standard)	89	90	-1
Health & Safety	92	91	+1
Information Management	84	82	+2
ICT	94	94	-
Fire Resources	96	96	-
Human Resources	97	97	-
Management of Purchasing & Supply	91	91	-

Use of Improvement Techniques

NIPEC's projects often include quality and more general improvement approaches and methodologies. In addition, members of project groups, for example, Working Groups and/or Expert Reference Groups, often bring a wealth of knowledge and experience in relation to quality improvement. Examples include:

o Co-ordination of a Regional Professional Advisory Group, in partnership with the PHA, Chaired by the DHSSPS Chief Nursing Officer. The purpose of the Group is to identify Key Performance Indicators (KPIs) for Nursing and Midwifery to measure, evidence and monitor the impact and unique contribution of nursing and midwifery on the quality of patient and client care.

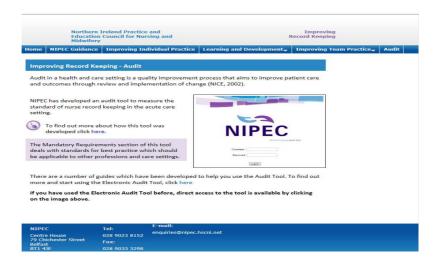
The work of this Group is underpinned by the principles of *The Triple Aim* (IHI, 2012), based on improving the health of populations and enhancing the patient and client experience, while optimising costs.



A range of KPIs have been agreed, presented under the domains of Safe and Effective Care, Organisational/Professional and include the Patient Experience KPIs identified by McCance et al (2010). A range of quality improvement methodologies and tools have been applied on a regionally agreed basis to support implementation and monitoring. During 2014/15, KPIs relating to pressure ulcers and falls were implemented and monitored across all five Trusts. The work programme for the next three years includes development of further KPIs relating to nutrition, omitted and delayed medications, sickness absence, vacancies, use of bank and agency staff, supervision, appraisals, mandatory training and specialist areas of practice including safeguarding children, district nursing, health visiting and mental health nursing.

- Development of an Advanced Nursing Practice Framework to provide clarity about the Advanced Nurse Practitioner role in Northern Ireland (DHSSPS, 2014)
- With the Safety Forum NIPEC led the development of the Attributes Framework and has continued to work with the Co-Chairs of Task Four Professional Leadership to support its implementation across the HSC system
- o Leadership and management of the regional Recording Care Project seeks to continuously monitor the standard of nurse record keeping practice to demonstrate improvement, whilst simultaneously developing resources including a regional children's in-patient nursing record: a new model of nursing care planning and a framework to support the record keeping practice of health care support workers. The project approach includes an audit and improvement cycle

for nurse record keeping practice, supported by relevant resources within the NIPEC Improving Record Keeping Practice mini site.

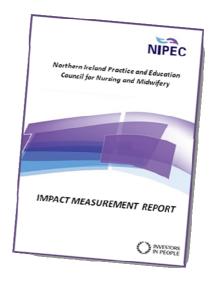


Oco-ordination and management of the production and adoption of Phase 1 of the Delivering Care: Nurse Staffing in Northern Ireland Framework (DHSSPS, 2014) resulting in the release of £12 million in funding by commissioners to support nurse staffing in the acute care settings of general and specialist medicine and surgery. In addition, the on-going development of subsequent phases for Emergency Department settings (Phase 2) and District Nurse teams (Phase 3), and provision of advice relating to the construction of Phase 4 which focuses on Health Visiting teams.

Outcome measurement and report on progress

To ensure continuous improvements in the quality of its work and relevance to professional practice, NIPEC examines the impact of its products and resources, all

of which are informed by the extant literature and designed and developed with stakeholders. For instance, during 2014/15 there was a particular focus on measuring the impact of NIPEC's Safeguarding Children and Young People - Core Competency Framework for Nurses and Midwives (2012) across the five HSC Trusts. This was taken forward through the implementation of NIPEC's Impact Measurement Framework. Reports produced from this approach contain data and insights which are used to support planning, benchmarking and strategy review processes.



In addition, NIPEC supports relevant stakeholder organisations to measure improvement. Examples include:

- o Annual evaluation of supervision in nursing across the five HSC Trusts which demonstrated a 224% increase in responses on the previous year
- o NIPEC chaired a Steering Group, on behalf of the Scottish Government, the aim of which was to evaluate the development and implementation of the *Leading Better Care Project for Senior Charge Nurses* across Scotland. The Group membership included the Associate Chief Nursing Officer and Senior Nurses from the Regional NHS Boards, NHS Education for Scotland and the Higher Education Institutions. A range of methods were developed and employed to collect information and data to inform the evaluation including questionnaires, workshops, focus groups, interviews and document analysis. The final report celebrates the excellent work achieved during the development and implementation phases of Leading Better Care. It also includes details demonstrating the synergy with other NHS Scotland programmes of work and makes recommendations for on-going implementation as well as areas for further improvement.
- Delivering Excellence: Supporting Recovery (DHSSPS, 2010): The PHA, in partnership with NIPEC, has established a Regional Group to support implementation and monitor progress of the Professional Framework for Mental Health Nursing. The Group has agreed an Action Plan and NIPEC are supporting the development of a range of resources to support HSC Trusts to improve the safety and effectiveness of mental health nursing services and the experience for people with mental health needs and their carers. These include Guidance for Supervision and Reflective Practice and a Core Competence Framework for Recovery Orientated Practice.
- o Strategic Framework for Practice Development: NIPEC co-ordinates and facilitates a Regional Implementation Group, chaired by Professor Tanya

McCance, Head of the Personcentred Practice Research Centre at UU. The Group is aligned to the Central Nursing and Midwifery Advisory Sub-Committee for Safety, Quality and Patient Experience. During 2014/15 the Group continued and drive the oversee implementation of an Operational Plan and a Products Portfolio, aimed at enhancing practice development, knowledge, skills, expertise and



capacity across the HSC system. The Group also contributed to informing and influencing the development, commissioning and evaluation of practice development programmes and activities locally and regionally which reflect organisational needs.

NIPEC provides a unique role in comparison to other parts of the UK and the Republic of Ireland. NIPEC's performance is monitored by the DHSSPS bi-annually, through Accountability Reviews.

In terms of ensuring that NIPEC continuously monitors and improves the quality of its work and relevance to professional practice, NIPEC examines the impact of its products and resources, all of which are informed by literature and designed and developed with stakeholders.

On an annual basis NIPEC engages with stakeholders to review the previous year's work and to identify the needs of nurses and midwives to inform the next annual business plan thus ensuring that the corporate objectives remain fit to meet the needs of practitioners.

During 2014/15, NIPEC also sought opportunities to contribute to the continuous professional development of nurses and midwives, for example:

- NIPEC presented to participants undertaking Nursing Leadership Programmes delivered by the HSC Leadership Centre and Clinical Education Centre. During these programmes, NIPEC explains its role and function and also provides information on a range of its projects and resources which participants report they find very useful in relation to their specific areas of practice and any service improvement projects they are involved in as part of the programme
- O NIPEC also demonstrated its website, resources and online portfolio during these Nursing Leadership Programmes as well as other organised events including a range of training and development sessions organised by Four Seasons Health Care across the province. This approach encourages participants to record and reflect on their continuous professional development, an NMC requirement for Post Registration Education and Practise (PREP).

Raising the Standards

Evidence-based Standards and Best Practice Guidance

NIPEC's projects are informed by the extant literature and underpinned by robust, evidence based research in order to support quality improvement. NIPEC's Senior Professional Officers also lead or contribute to a wide range of regional strategic forums and networks to support innovation and quality improvement and to build links with local research organisations.

The delivery of safe and effective care within a person-centred culture is the responsibility of all nurses and midwives and their employing organisations. This care must be delivered within an organisational environment that promotes evidence-based practice and utilises effective risk management processes.

Quality 2020 recognises that culture is critical to ensuring quality throughout the HSC system and as part of its mission of creating a culture of learning and continuous improvement, transforming the culture is included as one of its five strategic goals.

NIPEC fulfils a unique role in Northern Ireland by providing guidance on best practice and matters relating to nursing and midwifery. The organisation is committed to supporting practitioners and organisations to deliver safe and effective high-quality, personcentred care and achieves this by adopting a responsive and proactive approach to the requests and needs of key stakeholders, to assist them in addressing current and future challenges.

NIPEC is committed to supporting practitioners and organisations in the delivery of safe and effective, high-quality, person-centred care. NIPEC achieves this by adopting a responsive and proactive approach to the requests and needs of key stakeholders, to assist them in addressing current and future challenges. Its activities focus on enabling nurses and midwives to improve their practice to meet the needs of patients/clients and their carers through:

- enhancing information and communication processes to meet the needs of its stakeholders
- supporting safe and effective practice through the delivery of a wide range of activities, providing resources, advice and information for registrants and their employers
- o implementing a work programme that focuses on activities which impact on quality and safety in relation to the delivery of care

o exploring opportunities for increasing its involvement in multidisciplinary projects and initiatives.

Activities focus on enabling practitioners to improve their practice to meet the needs of patients/clients and their carers. During 2014/15:

- NIPEC continued to enhance information systems and communication processes to meet the needs of its stakeholders in support of safe and effective practice by providing resources, advice and information for registrants and their employers, whilst exploring opportunities to increase its involvement in multidisciplinary projects and initiatives
- NIPEC's Senior Professional Officers contributed to local and national professional advisory panels regarding the regulation of nursing and midwifery. For example, in advance of NMC plans to review existing nursing and midwifery prescribing standards (2014-15), NIPEC has been working with the NMC to support the preparatory phase of this work. This project reviewed the impact and status of Nurse prescribing in NI, engaging with 274 nurse prescriber registrants and 150 service users. The impact on service users was reported as being very positive.
- A Senior Professional Officer gave evidence to the NICE Safe Staffing Steering Committee during October 2014 on the approach used within the *Delivering Care* Project: Nurse Staffing in Northern Ireland (DHSSPS, 2014)
- A Senior Professional Officer was a member of the Pathway to Paperless Project group which defined the potential for the production of an electronic care record for Northern Ireland
- A Senior Professional Officer was invited to participate in a national event to discuss support, learning and development requirements for nurses in the UK to engage with emerging technologies for health care. The outcome of this event was an intention to begin a national programme of work to support this important and emerging area of practice
- NIPEC also participated in UK wide work led by the Queens Nursing Institute and supported by the NMC, to develop voluntary education standards for District Nurses
- o Following publication of A Review of Midwifery Supervision in Northern Ireland (Kings Fund, 2015), NIPEC initiated and led a regional review to provide reassurances in relation to Midwifery Supervision to the CNO and Executive Directors of Nursing. The report is due to be submitted to DHSSPS in June 2015 and will include options for consideration by the CNO and EDoN's on the future

model of Midwifery Supervision for NI. It is anticipated that further work to agree and implement the most appropriate option will be taken forward during 2015.

NIPEC is committed to ensuring that all information held, produced, developed and disseminated by NIPEC is managed effectively and based on the best available evidence to support the delivery of the strategic and operational objectives. This is undertaken in partnership with a wide range of key stakeholders across the nursing and midwifery professions within the statutory, voluntary and independent sectors.

NIPEC's role in supporting the provision of safe, effective, person-centred care is achieved through providing tools and resources to review and monitor standards of practice and ensure that the right people with the right skills, are in the right place at the right time to care for the public of Northern Ireland. This work will often involve improvement methods or development plans to ensure that the nursing and midwifery workforce is fit for current and future care provision.

To support this during 2014-2015 the following examples demonstrate how NIPEC focused on its core responsibilities to drive up quality and support the delivery of safe and effective person-centred practice:

- o In support of the introduction of Revalidation by the Nursing and Midwifery Council (NMC), NIPEC has fully engaged with the NMC at UK level to: Support and consult on the development of a new Code for Nurses and Midwives which will underpin the introduction of a final model for revalidation to be finalised in October 2015; develop and pilot a model for revalidation across the UK; Support the development of resources for use by registrants and employers; supported engagement with registrants and employers across Northern Ireland.
- O NIPEC has been designated by DHSSPS to lead a programme of work to ensure that nurses and midwives along with their employers across all settings are aware and ready to fulfil their responsibilities in relation to revalidation. This is being taken forward by NIPEC through a programme of work underpinned by a project plan which will continue into 2015/16.
- Support for the introduction of Regional Bereavement Guidance and a set of Pathways for the holistic care of women and their families who experience a miscarriage, stillbirth or neonatal death up to 28 days: developed in partnership with the DHSSPS to support the implementation of the Regional Guidance (DHSSPS, 2014a).

Personal and Patient Involvement

During 2014 - 2015, NIPEC continued its efforts in regards to Public and Patient Involvement (PPI). Specifically this included NIPEC seeking representation to, and establishment of a small personal and public involvement e-forum; this is comprised of members of the public interested in the work of NIPEC.

Although NIPEC is not a direct care provider organisation it does, through some of its projects and initiatives, engage and seek the views of service users. For example:

- o The production of the Gateway to Nursing strategy included gathering the opinions of the public in Northern Ireland, via an online questionnaire, face-to-face workshop and also securing the support of the Patient Client Council (PCC) to 'poll' their membership scheme for feedback on the attributes which were valued by the public for nursing. A total of 299 individuals responded to the questionnaire, 5.7% (n= 17) of which were members of the public.
- NIPEC continued to play a vital role in quality assuring non NMC regulated education activities commissioned by the DHSSPS through the Education Commissioning process for Nurses and Midwives during 2014/15. During this process, NIPEC promotes the involvement of patients, clients and carers in the design and delivery of educational programmes where appropriate.
- A NIPEC SPO is a member of the Personal & Public Involvement Training Subgroup which informed the design and development of a PPI training package for use within the HSCNI.

NIPEC recognises the power, importance and impact of service user and carer involvement in its work streams and takes opportunities, where possible and/or relevant, to engage with service users, carers and the general public or seeking their views and opinions in online /or face to face consultations, including the following:

- o The Community Maternity Care Project addresses implementation of a number of the objectives from the Strategy for Maternity Care in Northern Ireland 2012-2018 (DHSSPS, 2012). The project has reviewed the current service and now is in the process of developing new models and choices of community maternity services. These will include:- a regional information leaflet for women; a self-referral form so that women can refer themselves to the service and a core care pathway to inform women and guide professionals The outputs from this project is via extensive collaborative engagement with service providers (350 midwives, 50 obstetricians and 117 general practitioners) and 1,130 service users.
- o A service user and carer is a member of the aforementioned Regional Implementation Group for *Delivering Excellence: Supporting Recovery*

(DHSSPS, 2010). In addition, service users have been invited to attend specific meetings of the Group to share their knowledge and experience which has proved invaluable in guiding and supporting decision making regarding the design and implementation of an action plan and work programme for the Group.

Similarly, the needs and values of individuals and their families, highlighted through broader HSC mechanisms, for example, the regional 10,000 voices project, are considered in the planning, development and review of all NIPEC's work. During 2014/15 NIPEC invited the 10,000 voices Project Lead to present findings from this work at a Professional Team Meeting.

NIPEC promotes a shared-decision making approach through its projects and workstreams and the development of resources: representation from the voluntary and independent sectors are sought/included in these. NIPEC has also set up a number of actual and virtual forums through which opinions might be sought, for example, the Independent and Voluntary Sector Forum and the Personal and Public Involvement Forum.

Integrating the Care

Multidisciplinary Team Working

Health and Social Care provision in Northern Ireland is delivered within a context that requires effective working across a wide number of organisations and agencies and across the professions.

NIPEC has developed a strong ethos of collaborative working with its key stakeholders across all areas of activity and has developed a reputation for facilitating successful regional projects and initiatives.

In support of the delivery of high quality patient care, NIPEC retains a focus on work developed through robust strategic alliances to translate regional direction and policy into practice and provide resources which strengthen the capacity and capability of the nursing and midwifery professions in Northern Ireland. This often involves effective, positive multi-professional partnership working and collaboration with a wide range of stakeholders from various sectors in order to promote and support the practice, education and performance of nurses and midwives. Examples of multi-disciplinary working during 2014/15 include the following:

- NIPEC's Chief Executive and Senior Professional Officers were members of a range of multi-professional regional fora including GAIN, Quality 2020 Project Groups and the Regional PPI Forum, within which they provided strategic and professional advice and guidance on matters related to the nursing and midwifery professions
- o Membership of the HSCB Integrated Care Partnership (ICP) Stakeholder Reference Group
- o Development of the *Attributes Framework* involved multidisciplinary team working across, nursing, medicine, including General Practice, allied health professions, social work, and across statutory and education sectors. Staff side organisations and Professional Bodies were also involved in its development.
- NIPEC also conducted further work in partnership with the Clinical Director of the Safety Forum to promote awareness of and embed the use of the *Attributes* Framework to support Leadership for Quality Improvement and Safety in Health and Social Care.

Shared Opportunities for Learning and Development

One of NIPEC's statutory functions includes the promotion of high standards in the education and training of nurses and midwives. NIPEC plays an important role in supporting a flexible approach to the learning and development of nurses and midwives and continues to explore the production of resources, which can be used creatively and flexibly, to enable registrants to enhance their competence and performance in order to improve the quality of care they provide to their patients and clients.

NIPEC collaborates with education and service providers to promote high standards in the delivery of education for nurses and midwives. This objective is achieved through active engagement with key stakeholders, and taking forward a range of activities to support and monitor the quality of education delivery.

During 2014/2015, NIPEC contributed to UK four-country level work relating to the development of the nursing and midwifery professions specifically through its involvement in the NMC Education Advisory Group.

NIPEC also continued to enhance its websites to support the ongoing continuous professional development of nurses and midwives and in anticipation of the revalidation requirements of the NMC (from December 2015). In addition, NIPEC promoted improved standards of education and development in collaboration with education and service providers and provided a range of activities to facilitate and further develop the competence of nurses and midwives.

Each year the DHSSPS commissions NIPEC to quality assure a sample of DHSSPS funded education and learning programmes and activities. The monitoring is undertaken in accordance with an agreed framework (NIPEC, 2011). The criteria for Quality Assurance are presented as good practice statements, and address:

- o the need for transparency of the provider's intentions
- o links with improving patient and client care
- o the requirements to make best use of partnership working
- o value for money.

NIPEC benchmarks each activity for QA against the good practice statements and make recommendations as appropriate. Recommendations are followed up with the education provider at the following year of QA activity to establish how the recommendations have been progressed. NIPEC submits an annual report the DHSSPS, detailing key findings of the QA activity, highlighting any issues arising and a suggested action plan.

Conclusion

In relation to Quality, this Report provides evidence and demonstrates how NIPEC, as a regional organisation, fulfils its statutory responsibilities in supporting and promoting high standards of practice, education and the professional development of nurses and midwives thereby facilitating their positive contribution to safe, effective and person-centred care.

Moving forward across the HSC in Northern Ireland there will continue to be an increasingly challenging agenda in terms of continuing to improve services within finite resources.

A key strength and role of NIPEC is its ability to work in partnership with a broad range of stakeholders across the UK and Northern Ireland in the development of high quality innovative solutions which support employers, nurses and midwives, enhance professional practice and, in turn, facilitate the delivery of safe, effective and personcentred care.

The role has become increasingly significant resulting in a high volume of work with tangible outcomes and products articulated through work taken forward directly in response to professional, policy, strategic and clinical priorities.

The work of NIPEC also continues to grow in response to broader risks and challenges which exist across the delivery of health and social care.

The regional approach adopted by NIPEC secures effective, timely and efficient approaches which reduce duplication of effort across other ALBs and ensures consistency of practice which is evidence based and impartial to commissioning or provider pressures.

Further examples of projects undertaken by NIPEC in earlier years, which remain relevant, can be accessed on http://www.nipec.hscni.net

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NIPEC's Governance Framework

NIPEC applies the principles of good practice in Corporate Governance and continues to strengthen its governance arrangements. NIPEC does this by undertaking continuous assessment of its compliance with best practice, by having in place an 'Annual Governance Cycle' for the Council. This covers the areas of:

- Strategy
- o Performance
- o Risk
- Regulatory
- o Other (Equality, etc.).

The Council receives an annual report and quarterly feedback from the Audit and Risk Committee, which monitors and adheres to DHSSPS and Northern Ireland Audit Office (NIAO) governance policy and guidance.

With regard to the wider control environment, NIPEC has in place a range of organisational controls, commensurate with the current assessment of risk, designed to ensure efficient and effective discharge of its business in accordance with the law and Departmental direction. Every effort is made to ensure that the objectives of NIPEC are pursued in accordance with the recognised and accepted standards of public administration. For example, NIPEC's recruitment and selection policies are based on the principle of equality of opportunity, and controls are in place to ensure that all such decisions are taken in accordance with the relevant legislation.

Governance Framework

The Council exercises strategic control over the operation of the organisation through a system of corporate governance, which includes:

- o a schedule of matters reserved for Council decisions
- the regular review of governance documents, including standing financial instructions, standing orders, the standards of business conduct for all staff and the review of this Governance Statement
- o a 'scheme of delegation', which delegates decision-making authority within set parameters to the Chief Executive and other Officers
- o the establishment of an Audit and Risk Committee and a Remuneration Committee, and a regular review of their terms of reference.

Membership of the Council and the Committees is as follows:

Council:

Membership

- o Chair
- Chief Executive and eight Professional Members (who all must hold a current registration on the Nursing and Midwifery register)
- Six Lav Members
- o Ex-Offico Member (Chief Nursing Officer, DHSSPSNI).

During 2014- 2015 NIPEC's Council met on five occasions (four public meetings and one workshop).

Audit and Risk Committee:

Membership

- Two Professional Members
- o Two Lay Members
- Also, in attendance are the NIPEC Chief Executive and Head of Corporate Services; and representatives from NIPEC's External Auditors - Northern Ireland Audit Office, Internal Audit, BSO and a financial representative from the BSO.

Functions

The Audit and Risk Committee is an advisory body with no executive powers, other than those specifically delegated in the Terms of Reference. It is authorised by the Council, however, to investigate any activity within its Terms of Reference, and to seek any information it requires from staff, which are requested to co-operate with the Committee in the conduct of its enquiries. Requests for work, and reports received, from internal audit is channelled through the Chief Executive.

The Audit and Risk Committee is authorised by the Council to obtain outside legal or other independent professional advice and to secure the attendance of outsiders with relevant experience and expertise, if it considers this necessary. The Committee completes annually the National Audit Office's 'Audit Committee Self-Assessment Checklist' in which it assesses itself against best practice. A copy of this is forwarded to the DHSSPS's Central Arm's Length Bodies Governance Unit. The outcome of the 2014-15 self-assessment was that it adhered to best practice for those areas which were applicable i.e. 90% of the questions. During 2014/15 NIPEC's Audit committee met on a total of four occasions.

All audit assignments included in the 2014-15 Internal Audit Plan, approved by the Audit and Risk Committee, were completed.

A mid-year assurance statement was provided from the Head of Internal Audit to the Audit and Risk Committee meeting held in October 2014, as part of the process to assist the Chief Executive in the completion of the DHSSPS Mid-Year Assurance Statement.

Also, in a report dated 19th March 2015, on a year-end follow-up on outstanding internal audit recommendations, the Internal Auditor noted that, "90% of the 31 recommendations examined were fully implemented, a further 3 (10%) were partially implemented at the time of the review." No priority one findings were outstanding.

The Internal Audit Review outcomes for 2014-15, therefore, showed the following to be classified as:

- Risk Management 'Satisfactory Assurance'
 - No priority one weaknesses identified
 - Two priority two weaknesses identified
- Financial Review 'Satisfactory Assurance'
 - No priority one weaknesses identified
 - Six priority two weaknesses identified
- One priority three weaknesses identified
- Board Effectiveness 'Satisfactory Assurance'
 - No priority one weaknesses identified
 - Six priority two weaknesses identified

The Head of Internal Audit's 'Annual Report for the Year' gave the following opinion:

"My overall opinion for the year ended 31 March 2015 is that there is a **satisfactory** system of internal control designed to meet the organisation's objectives."

As an example of how NIPEC seeks to improve its systems and procedures is the internal audit report on the 'Council Effectiveness', were the following actions have been taken forward based on the recommendations contained within the report:

- Declaration of Members Interests now a standing item on the agenda for each meeting.
- o Formal action plans will be produced after each meeting identifying issues to be followed up, officer responsible and date of completion.

- The Council Governance Self-assessment tool will now be presented to the full Council.
- Code of Practice. All Council Members annual appraisals records and resultant personal development plans will be retained within the NIPEC office.

All NIPEC Internal and External Audit reports together with the management responses go to the Audit and Risk Committee for consideration.

As well as the normal formal organisational two way information channels for NIPEC to communicate with and from staff, NIPEC has in place a 'staff suggestion box' which enables staff to anonymously raise an issue together with suggested ways to improve the matter. All responses are considered by NIPEC and feedback is given to the staff via staff meetings.

NIPEC has in place two risk registers. A high level risk register which is updated monthly and goes to each meeting of the Council and an operational risk register which is also updated monthly and goes to each meeting of the Business Team and the Audit and Risk committee.

Remuneration Committee:

The Remuneration Committee comprises a membership of all the Council Members, with the exception of the four who serve on the Audit and Risk Committee. Its role is the managing and overseeing of the NIPEC performance management process by:

- o encouraging effective appraisal of staff
- o scrutinising objectives for:
 - consistency
 - robustness
 - alignment with Government and Department priorities and local priorities
- o ensuring that robust process has taken place
- monitoring for consistency of assessment
- o recommending an overall banding and award for Senior Executive.

Information on the quality of NIPEC's activities:

All meetings of the Council were quorate and only one meeting of the Audit & Risk Committee was inquorate during the year. At each Council meeting a number of reports were provided and normally included:

- a report by the Chief Executive on NIPEC's activities
- o a corporate services update report and 'executive financial management summary'

o an overview of NIPEC's work streams/initiatives which is generally complemented by a more detailed presentation on a specific initiative.

Operational Management:

In addition to the above, NIPEC has a Senior Management Team (SMT), which is comprised of the Chief Executive, five Senior Professional Officers and the Head of Corporate Services. The SMT met and continues to meet on a monthly basis as part of the organisation's Business Team. This team supports the Chief Executive in the operational aspects of the organisation. The Chief Executive held and continues to hold a monthly, one-to-one meeting with each member of the SMT, which covers all aspects of each officer's work.

Governance Performance

NIPEC identified a strategic objective for 2013-16 to maintain a robust governance and accountability framework through the effective management and monitoring of corporate and financial performance. At an operational level and on a day to day basis the Head of Corporate Services plays a key role in this regard. Key activities and achievements which are of relevance to *NIPEC's Quality Report 2014-15*, include the following:

- (a) NIPEC updated the assurance framework monthly and took an updated version to each quarterly meeting of both the Audit and Risk Committee and the Council during the year. This register covered the following seven areas:
 - 1. Governance: Financial Break Even
 - 2. **Partnership & Communication Engagement**: Engagement and Influence with Stakeholders
 - 3. Governance: Service Level Agreement With BSO
 - 4. Governance: Council Membership
 - 5. **Governance**: Organisation's Future Role and Function
 - 6. **Practice, Education, Advice & Guidance and Governance**: Meeting Statutory Responsibilities
 - 7. Practice, Education, Professional Development, Advice & Guidance and Governance: Delivering productivity and cash releasing efficiencies.

The operational risk register was updated each month at the Business Team meeting and reported on at the quarterly meeting of the Audit and Risk Committee. The total number of risks, over nine areas, as at the 31st March 2015 had been identified as 20, with one (5%) shown as high, 14 (70%) as

medium and 5 (25%) as low. Both registers, with updates, were posted regularly on the website during the year.

(b) NIPEC received, on 5th September 2014, details of its revenue resource limit (RRL) for 2014-15 of £1,393,936 and an indication that due to significant challenges in 2014-15 for the DHSSPS to secure a balanced budget the Department and ALBs would have their initial RRLs reduced. The outcome for NIPEC was a 2.5% reduction of £34,848. With subsequent amendments, dated November 2014 for £35,000 and February 2015 for £47,000 for the surrender of £82,000 due to easements, this left a final revised RRL of £1,277,088.

NIPEC's financial accounts for the year ending 31st March 2015 showed a surplus of £11,944 or 0.86% which was within the DHSSPS HSC breakeven target of 0.25% or £20,000. An unqualified audit report was obtained from the NIAO on the 2014-2015 financial accounts.

(c) As part of its efficiency programme, within its property asset management plan (PAM), NIPEC had successfully implemented in 2013-14 the agreed accommodation business plan - to move completely onto one floor within Centre House under a new three-year lease with a break clause after year two. With the resulting reduction in its internal capacity to host meetings/workshops or seminars for personnel above 12 persons attending, NIPEC put in place an approval and monitoring system which ensured that the chosen external venues offered the best value for money.

Also, increased use was made of ICT equipment and this resulted in an increase in the number of meetings held in NIPEC that were either face to face or via teleconference due to the reduction in travel across stakeholder groups. NIPEC as the lead organisation in a significant number of programmes of work was required to host these meetings and an analysis of the increase in teleconferencing which NIPEC has observed can be shown in the table below:

Period	Activity – Individual sessions per period	Total Cost
January – December 2013	54	£1,540.94
January – December 2014	74	£3,020.98
January – April 2015	31 (4 months)	£1,145.59

(d) Under the DHSSPS zero-based budgeting approach, introduced in 2012-13, for capital allocations or the Capital Resource Limit (CRL), bids have to be submitted against the three categories of *Contractual Commitments*, *Essential Projects and Desirable Projects*.

In 2014-15 NIPEC was allocated an initial CRL allocation of £13,750, followed later in December 2014 by a further £10,196 arising from tranche 7 of the HSC ICT funding 2014-15.

- (e) During the year, NIPEC complied with its statutory duties in respect of:
 - o Production of the annual report and accounts'
 - o Equality and disability
 - o FOI Act, 2000
 - o DPA, 1998
 - o Records management
 - o Bribery Act, 2010
 - Privacy impact assessment
- (f) NIPEC assured its compliance to obtain the level of 'substantive' compliance i.e. a score of 75-99% in 2014-15 with the nine relevant controls assurance standards identified for NIPEC. The individual compliance scores were as follows and details were placed on the NIPEC website:
 - o Governance 94%
 - o Financial Management 88 %
 - o Risk Management 89%
 - o Health & Safety 92%
 - Information Management 84%
 - o Information & Communication Technology 94%
 - o Fire Safety 96%
 - Human Resources 97%
 - Management of Purchasing & Supply 91%
- (g) NIPEC's policies and procedures are monitored and reviewed during the year, as appropriate, and a 'policy grid' and 'procedure grid' are updated and taken to each quarterly Audit and Risk Committee meeting. As at 31 March 2015, the outcome was:
 - NIPEC/BSO Policies & Strategies

Through a systematic process of review and updating 42 policy/strategy documents - 35 or 83.33% classified as 'green' that is to say were updated within the timeframe for review (of the 7 not in the green sector, 5 were awaiting clarification from HR on regional agreements)

NIPEC/BSO Procedures

Through a systematic process of review and updating 21 documents - 19 or 90.5% classified as 'green' that is to say were updated within the timeframe for review

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