

Health Information and Quality Authority

An tÚdarás Um Fhaisnéis agus Cáilíocht Sláinte

Business Plan 2009

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1 Introduction

The Health Information and Quality Authority (the Authority) was established as an independent organisation in May 2007 for the purpose of driving improvements in the quality and safety of Ireland's health and social care services.

The Authority reports to the Minister for Health and Children. Its role, as stated in the Health Act 2007, is to promote safety and quality in the provision of health and personal social services for the benefit of the health and welfare of the public.

Since its establishment, the Authority has made significant advances in driving these improvements and also in establishing a number of new functions. Nevertheless, there continues to be ongoing work in the setting up of its organisational infrastructure and a significant amount of developmental work remains to be done. Delivering quality and safety programmes is a priority for the Authority. A number of significant developments in the health and social care system have already, and will continue, to take place in 2009. These include the following:

- The Report of the Commission on Patient Safety and Quality Assurance recommends further developments in relation to driving quality and safety across the system. One of which is the introduction of a licensing system that will regulate public and private healthcare providers. This system will be established and run by the Authority. Consequently, and in advance of the required necessary legislative changes to introduce a licensing system, the development of standards and methodology for this will be a priority for the Authority during 2009.
- The inspection and registration of residential care centres for older people by the Authority is expected to commence on 1 July 2009. This will consist of a large programme of work that will have significant implications across the health and social care system and will continue to drive quality and safety for our vulnerable older people.
- 3. "Protection of Disclosures of Information" to enable more individuals to be supported in raising concerns in relation to the quality and safety of health and social care services, is a function contained within the Health Act 2007 (Part 14, Section 103). This commences on 1 March 2009. The Authority will be one of a number of regulatory bodies charged with this function.

This 2009 Business Plan for the Authority has taken these areas into consideration and outlines what the Authority aims to achieve during 2009. It is based on the objectives set by the Authority's Corporate Plan, 2008-2010, which outlines the role that the Authority will play in bringing about improvements in the quality of health and social services in Ireland over a period of three years.

The areas within the Corporate Plan that we will continue to focus on include:

- the care for people with cancer
- reducing the incidence of Healthcare Associated Infections
- the standards of care in residential services to safeguard and respect the most vulnerable in our society – older people, children, and people with disabilities
- Health information technology
- Health technology assessments.

The Business Plan has been developed in the context of the current economic environment. It is imperative that the Authority ensures that the work it undertakes adds value and benefit to people using our health and social care services, whilst being mindful of making the best use of limited resources. In so doing, we will focus our resources on driving improvements that provide maximum impact and benefit for patients, vulnerable people and the public.

The Authority will organise itself to maximise current use of resources and provide best value for money. We will also ensure that it works with other agencies to reduce duplication.

It is imperative that services are safe for patients and that decisions impacting on patient safety are informed and based on priorities, population requirements and risks. Similarly, the information that is used to measure and manage services will be key to further ensuring that services are high quality, safe, effective and efficient. Consequently, the Authority will focus more on advising on this area during 2009, through our work in health technology assessment, health information, improving social services and monitoring the healthcare system. Through our programme of activities in these areas, the Authority aims to support the building of a more informed decision-making approach to underpin the provision, management and measurement of health and social care services.

1.1 Mission and Core Values

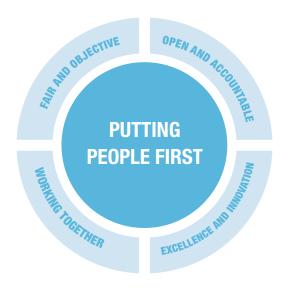
The Authority's mission and core values are important to the organisation and provide the foundation and point of reference for the activities within the Business Plan and also direct how we engage with people to deliver them.

The mission of the Authority is to:

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

Core values of the Authority are shown in Diagram 1

Diagram 1



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

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

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

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

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

1.2 Strategic objectives from 2008 to 2010

The Authority set out its key objectives for this period in its three-year Corporate Plan. Between 2008 and 2010, the Authority aims to achieve the following:

Strategic Objectives 2008 to 2010

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

While there are many factors that have changed over the past year, these objectives remain relevant to the overall focus of the Authority.

1.3 Required Resources

This Business Plan covers the second year of the period of the Corporate Plan 2008 to 2010, and has been developed on the basis of the resources made available to the Authority for 2009. If, during the year, the resources available to the Authority are reduced then the objectives that are stated in this Business Plan will be reviewed at that time.

The Authority is cognisant of the prevailing economic climate and has reviewed its corporate priorities in tandem with the development of this Business Plan with the intention of ensuring that "what we do", and "how we do it", will achieve the maximum impact across the system as we progress our mission of "driving high quality and safe care for people using our health and social services". Similarly, and where appropriate, the approach has been to work with other stakeholders to enable a number of staff to transfer from other parts of the health system, as new functions are commenced in the Authority, in order to optimise the resources currently available within the public sector. These staff will be inducted into the culture and values of the Authority and will be trained and supported in the work that they will be undertaking.

Consequently, at the end of 2009, it is anticipated that the Authority will have 174 staff.

A summary of the Authority's budget for 2009 is set out in Appendix 1.

1.4 Performance Measurement

The Authority is committed to measuring its own performance. Evaluation of the benefits of the work of the Authority will continue over the next two years. Due to the relatively new status of the Authority, early evaluation will be confined to stakeholder perceptions. However, it is intended that a full external review of the organisation will take place at the end of 2010.

2 Organisation Overview

The mission and values of the Authority, as previously stated, represent how we transform our statutory remit into our activities and into our engagement with people receiving services and people providing services. They provide the foundation and ethos upon which our activities are shaped and informed.

These activities are derived from the Heath Act 2007, which sets out our statutory functions. The organisational structure of the Authority reflects the functions in the Act and therefore there are four directorates based on these functions. These are:

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

In addition, there are other core directorates, Communications and Stakeholder Engagement and Corporate Services, and also the Chief Executive's Office. These provide the necessary underpinning support and infrastructural services across the Authority to ensure that the Authority is fit for purpose in the undertaking of its work.

Each of these directorates is led by a person who reports to the Chief Executive. The executive management of the Authority is led by the Executive Team whose responsibility is to ensure the effective delivery of the Authority's functions within a well governed and managed environment, as outlined in the Corporate Plan. The organisational structure for the Authority can be seen in Appendix 2.

The overall strategy and priorities of the Authority are overseen by the Board of the Authority which is appointed by the Minister for Health and Children. Through the Chairperson of the Board, the Chief Executive Officer of the Authority is accountable to the Board. The Board has established a number of sub-committees to assist it in its work.

An overview of the purpose of each Directorate is on the next page. A breakdown of Directorate objectives and the work programme for 2009 is outlined in Sections 3 - 9 of this Business Plan.

2.1 Directorate Overview

Table 1 Summary overview of Directorate Functions

Directorate	Function overview
Healthcare Quality and Safety	Developing person-centred standards for health and social care. Designing and implementing a quality assurance programme to promote improvements in quality and safety standards in health. As deemed necessary, will undertake investigations into suspected serious service failure in health care.
Social Services Inspectorate	Inspecting and registering social care services, including residential services for older people, residential services for children, and residential services for people with a disability. As deemed necessary, will undertake investigations into suspected serious service failure in social care.
Health Information	Identifying and advising on health information deficiencies; establishing an information governance framework and setting standards for health information; evaluating and providing information on the provision of health and social services.
Health Technology Assessment	Making sure that resources in our health services are used in a way that ensures the best outcome for the patient or service user – specifically through the assessment (and supporting the assessment) of the clinical and cost effectiveness of health technologies.
Communications and Stakeholder Engagement	Ensuring that the Authority's internal communication systems are effective and robust, managing the Authority's communications with internal and external stakeholders and developing collaborative relationships across the health and social care systems.
Corporate Services	Ensuring that the Authority is fit for its intended purpose, through effective staff welfare, performance, management and recruitment, premises, management information systems and other key support services.
Chief Executive's Office	Providing effective support to the Board, ensuring an appropriate central monitoring and reporting function which includes risk management and the implementation of a controls assurance framework. Providing a leadership role for embedding the culture of the Authority.

Each directorate contributes to the overall attainment of the seven strategic objectives of the Authority. The Authority also works to develop relationships and partnerships at national and international levels to leverage knowledge, expertise and best practice.

This Business Plan outlines the objectives to be met in 2009, in keeping with the Corporate Plan, 2008 to 2010. The achievement of objectives requires directorates to engage in a wide range of activities, which are organised into distinct work programmes (WPs). An illustration of these relationships is provided in Diagram 2 below.

2.2 Relationship between Directorate Objectives and Work Programmes (WP)

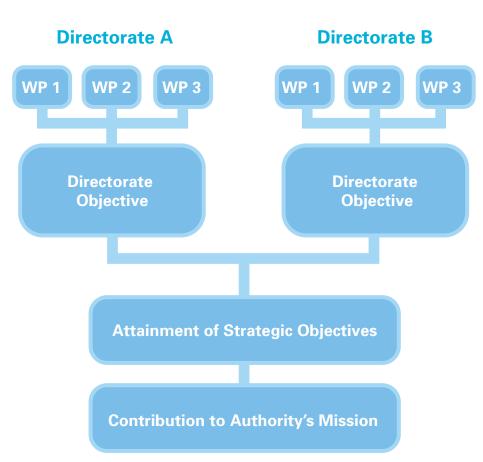


Diagram 2

Links between Directorate Activity and the Mission of the Authority

The remainder of this document comprises of a section for each Directorate, which describes the objectives and work programmes related to that particular area of the Authority, outlining what is to be achieved by the end of 2009.

3 Healthcare Quality and Safety

This section outlines the 2009 Business Plan objectives across the Authority which are broken down by Directorate. They are structured according to the relevant Corporate Objective, as described within the Corporate Plan, 2008 – 2010, followed by the 'Supporting Work Programme' over the three year period and what the Directorate 'Business Plan Action' will be to meet the Corporate Objective in 2009. The 'Delivery Time' reflects the quarter of the year that it is aimed to complete the objective where appropriate. For example, 'Q1' means completion at the end of the first quarter of the year.

Corporate Objective 1

Set priorities and define approach to driving improvements in healthcare outcomes in line with the Authority's Quality and Safety Framework.

Supporting Work	Business Plan	Delivery
Programme (3 yr)	Actions 2009	Time
1.1 Identify and define optimal combination of approaches to inform the quality assurance system.	1.1.1 Finalise quality and safety framework concept to include identification of key approaches to standards, assessment and indicators.	Q1

Corporate Objective 2

Develop and communicate a process for setting standards and defining performance measures in the areas of health and social care.

Supporting Work Programme (3 yr)	Business Plan Actions 2009	Delivery Time
2.1 Design, consult on and implement a process for setting standards, developing guidelines and defining performance measures.	2.1.1 Develop and consult on protocols for the development of standards.	Q1
	2.1.2 Develop and consult on protocols for the development of guidelines.	Q3
	2.1.3 Define corporate approach to indicator development (with Health Information Directorate).	Q2

Develop and communicate person-centred standards for Healthcare Quality and Safety in Priority Areas.

Supporting Work Programme	Business Plan Actions 2009	Delivery Time
3.1 Develop person-centred standards, monitoring methodologies ad performance measures in line with Quality and Safety Framework.	3.1.1 Develop generic standards as part of the quality and safety framework. For each standard, develop shadow licensing and developmental criteria for the acute sector (with Health Technology Assessment and Health Information Directorates).	Q3
	3.1.2 Deliver communication programme for Healthcare Associated Infection (HCAI) standards (<i>Subject to</i> <i>Ministerial approval</i>).	TBC
	3.1.3 Oversee development of guidelines for managing medical exposure to ionising radiation in line with the strategic direction in relation to licensing <i>(Subject to legislation and resources).</i>	Q4
	3.1.4 Develop indicator suite for emergency departments, including value for money indicators (with Health Information Directorate and Health Technology Assessment Directorate).	Q3

Develop and roll out a Quality Assurance System for Healthcare Quality in priority areas incorporating the agreed mix of approaches.

Supporting Work Programme (3 yr)	Business Plan Actions 2009	Delivery Time
4.1 Develop ways of conducting reviews (quality assurance, thematic, organisational value for money and other programmes, including	4.1.1 Develop core portfolio of assessment approaches for monitoring compliance with standards (self-assessment, off-site review, on-site review, risk assessment, registration and licensing inspection) based on the quality and safety framework.	Q4
accreditation).	4.1.2 Design next phase of Quality Assurance Review of Symptomatic Breast Disease Services.	02
4.2 Deliver standards monitoring programme in agreed priority areas.	4.2.1 Undertake next phase of Quality Assurance Review of Symptomatic Breast Disease Services.	Q4
	4.2.2 Undertake targeted and ongoing random spot-check visits against existing hygiene standards.	Ongoing
	4.2.3 Design and launch a self- assessment programme for the Prevention and Control of Healthcare Associated Infection standards.	Q4
	4.2.4 In advance of the commencement of a licensing framework, pilot the organisational assessment system for selected standards in the acute sector.	Q4
4.3 Undertake specific investigations as required.	4.3.1 Conclude the investigation into the quality and safety of services in the Mid-Western Regional Hospital Ennis.	Q1

Develop and roll out the regional structure to drive improvements at local level.

Supporting Work Programme (3 yr)	Business Plan Actions 2009	Delivery Time
5.1 Develop approach to working with healthcare organisations and services in the various regions.	5.1.1 Plan for the design of the Authority's operational model for local operations.	Q3
5.2 Build organisation capacity and roll out field operations.	5.2.1 Develop and document processes including quality assurance mechanisms to support the effective and efficient functioning of the Directorate.	02
	5.2.2 Develop a resource model for implementation of the Authority's operational model for inspection and assessment from 2010.	Q4

Establish a safety and learning process and communicate key lessons.

Supporting Work Programme (3 yr)	Business Plan Actions 2009	Delivery Time
6.1 Design a safety and learning strategy.	6.1.1 Carry out literature review, develop and finalise safety and learning strategy.	02
	6.1.2 Disseminate and communicate the safety and learning strategy.	Q4
6.2 Develop and implement national and international safety initiatives	6.2.1 Engage with the World Health Organisation (WHO) World Alliance for Patient Safety to deliver "When things go wrong" project.	02
and develop international links to ensure sharing of knowledge,	6.2.2 Deliver requirements of European Union Network for Patient Safety (EUNetPaS).	Q4
expertise and best practice.	6.2.3 Develop, design and implement one safety awareness raising initiative – to include work on the "cost of un-safety" (with HTA Directorate).	Q3
	6.2.4 Work with partner institutions to promote the implementation of "Safe Surgery Saves Lives" initiative.	Q2 and ongoing
6.3 Develop approach for risk rating and managing concerns.	6.3.1 Concerns policy to be developed, approved by the Board and implemented.	Q1
	6.3.2 Analyse all concerns to ensure that they inform regulatory and quality functions of the Authority through the role of the Health and Social Care Governance Committee.	Quarterly
6.4 Ensure concerns handling reflects	6.4.1 Develop and implement additional handling protocols.	Q1
requirements of protected disclosure.	6.4.2 Deliver staff training to relevant staff groups.	Q1

4 Social Services Inspectorate

Corporate Objective 1

Develop and communicate person-centred standards and expectations in residential care settings for older people, people with a disability and children in care.

Supporting Work Programme (3 yr)	Business Plan Actions 2009	Delivery Time
1.1 Standards: Revise person- centred standards in prioritised areas in line with agreed standard setting methodology.	 1.1.1 Revise standards for children: in residential care in detention schools with disabilities in residential care in special care units. 	Q2 and Q3
	1.1.2 Publish, for consultation, the draft standards for children in residential care, including standards for children in foster care, detention schools, children with disabilities in residential care and children in special care units.	Q4
	1.1.3 Publish the National Quality Standards: Residential Services for People with Disabilities.	Q1
	1.1.4 Publish the final National Quality Standards for Residential Care Settings for Older People in Ireland.	Q1
1.2 Work with Communications Directorate to communicate standards.	1.2.1 Implement effective methods of communication with stakeholders to communicate standards for residential care settings for older people in Ireland.	Ongoing
	1.2.2 Implement effective methods of communication with stakeholders to communicate standards for residential services for people with disabilities.	Q3

Develop and communicate how standards will be measured in inspected facilities.

Supporting Work Programme (3 yr)	Business Plan Actions 2009	Delivery Time
2.1 Develop Methodology for inspections.	2.1.1 Finalise methodology for registration of services for older people.	Q3
	2.1.2 Finalise methodology for inspection of services for older people.	Q3
	 2.1.3 Review methodology for inspections of childrens' services: inspections of foster care inspections of detention schools inspections of special care units inspections of residential care centres. 	Q4
2.2 Work with Communications Directorate to communicate Methodology.	2.2.1 Implement effective methods of communication and maintain and develop relationships with key stakeholders.	Ongoing
	2.2.2 Develop frequently asked questions for the commencement of inspections of services for older people.	Q1

Promote confidence in the quality of care of social services in Ireland and in the fairness of its regulatory, inspection and investigation processes.

Supporting Work Programme	Business Plan Actions 2009	Delivery Time
3.1 Develop Programme of inspections and investigations in line with service- user needs and priorities.	3.1.1 Develop framework of risk assessment to support programme of inspections.	Q1
3.1a Establish systems for	3.1a.1 Establish representation process.	Q2
representations and appeals.	3.1a.2 Establish protocols for district court.	02
	3.1a.3 Establish protocols for Circuit Court appeals.	02
	3.1a.4 Establish a registration panel to consider representations from applicants in respect of notice of proposal of the Chief Inspector.	Q3
3.2 Publish and make accessible SSI Register and reports.	3.2.1 Continue to publish children's reports from SSI children's services team (pending number of inspections undertaken and reports finalised).	Ongoing
	3.2.2 Design user-friendly inspection report template.	Q2
	3.2.3 Establish register in line with legislative requirements.	Q3

3.3 Publish and make accessible SSI Register and reports.	3.3.1 Ensure concerns are logged and dealt with.	Ongoing
	3.3.2 Develop SSI monitoring system to ensure responses to concerns are dealt with effectively.	Q3
	3.3.3 Develop protocols with the Health Service Executive for communicating information regarding concerns, complaints and dealing with protected disclosure.	Q2

Promote specific improvements in inspected facilities.

Supporting Work Programme	Business Plan Actions 2009	Delivery Time
4.1 Conduct registration and implement a rolling programme	4.1.1 Recruit appropriate mix of inspectors and inspector managers to each region.	Q2 and Q3
of inspections for new areas	4.1.2 Induct and train inspectors.	Q3
under SSI remit (residential care settings for older people and people with a disability*)	4.1.3 Recruit appropriate mix of regulatory support staff to each region.	Q2 and Q3
	4.1.4 Induct and train regulatory support staff in regional offices.	Q3
	4.1.5 Work with Corporate Services to have home working policy and plan in place.	Q2
	4.1.6 Commence registration and inspection process for residential services for older people as soon as relevant section of the Health Act is commenced.	Q3

*Inspection of residential care settings for people with a disability is dependent on whether this function is commenced.

4.2 Continue inspection and prepare for registration of children's services and inspection of detention schools.	4.2.1 Continue inspections of children's residential centres.	Q1 - (22) Q2 - (10) Q3 - (7) Q4 - (6)
	4.2.2 Prepare for commencement of registration process of children's residential services.	Q4
	4.2.3 Continue inspection of foster care services. (HSE local health area)	Q2 - (1) Q3 - (1)
	4.2.4 Complete annual inspection of detention schools.	Q4 - (4)
	4.2.5 Complete annual inspection of special care units.	Q3 - (3)
4.3 Undertake investigations as required.	4.3.1 Develop protocols for undertaking investigations.	Q4
	4.3.2 Set up and train the SSI investigations and enforcement team.	Q4

Provide information to policy makers, service providers, general public and other stakeholders on national findings from inspection and registration.

Provide internal information on the internal quality and performance time frames of inspection and registration activity.

Supporting Work Programme	Business Plan Actions 2009	Delivery Time
5.1 Publish and disseminate national findings and trends	5.1.1 Undertake annual census of children's residential services.	Q4
for services for children in care and direct issues	5.1.2 Produce annual report of findings from children's services inspections.	Q2
to Government, operations, professional and training bodies.	5.1.3 Publish overview reports on "state of the nation" as information is available.	Q4
5.2 Commence development of policy and performance division for services for older people.	5.2.1 Staff in policy and performance division undertake appropriate induction.	Q1
	 5.2.2 Develop the internal structure for cooperative working between policy and performance and operations to ensure: effective information management consistency of practice quality assurance. 	Q1
5.2a Gather data and information from the inspection of	5.2a.1 Review information from pilot inspection of services for older people.	02
services for older people.	5.2a.2 Review information from annual return of services for older people.	Q4

5.3 Initiate development of systems to improve the efficiency, effectiveness and quality of the work of the Directorate within the Authority by the provision and analysis of management information.	5.3.1 Develop SSI Performance Indicators.	Q2
	5.3.2 Directorate wide analysis of management information.	Ongoing
5.4 Identify quality issues and	5.4.1 Identify and prioritise training needs.	Q4
recommend that appropriate training, written guidance for inspectors and changes to methodology are put in place.	5.4.2 Undertake a review of the methodology.	Q4
5.5 Research and start development	5.5.1 Design regulatory support prototype system.	Q2
of framework for information management systems to ensure staff, particularly home workers, are effectively supported in undertaking their work.	5.5.2 Implement regulatory support prototype system.	Q4
5.6 Work with the Healthcare Quality and Safety, Health Information and Health Technology Assessment Directorates to include issues relating to social care.	5.6.1 Develop approach and carry out joint work with Healthcare Quality and Safety, Health Technology Assessment and Health Information Directorates on social care.	Ongoing

5 Health Information

Corporate Objective 1

Promote a robust population health, health service information and personal health information environment in Ireland.

Supporting Work Programme (3 yr)	Business Plan Objectives 2009	Delivery Time
1.1 Analyse the "As Is" health information situation.	1.1.1 Finalise implementation plan for National Health Information Strategy.	02
	1.1.2 Document current national health information framework and identify gaps.	Q4
1.2 Develop a Health Information Governance framework to include governance standard, to inform how data is compiled, protected and used.	1.2.1 Finalise recommendations for a unique health identifier for individuals.	Q3
	1.2.2 Scope the implementation of a unique health identifier.	Q4
	1.2.3 Finalise recommendations for a unique identifier for health and social care professionals informed by international standards and best practice.	Q4
	1.2.4 Finalise recommendations for a unique identifier for health and social care service providers, informed by international standards and best practice.	Q4
	1.2.5 Based on international best practice develop a detailed project plan for an Information Governance Framework.	Q2
	1.2.6 Based on international best practice, and informed by the Health Information Bill, develop high level guidelines for Information Governance.	Q4

1.3 Ensure that information about public health and the performance of health and social care services are widely available and accessible.	1.3.1 In conjunction with the Communications and the Corporate Services Directorates, develop the Business Case, Project Plan and Requirements document for the National Health Data Dictionary which will be the first phase of the National Health Information Portal.	Q3
	1.3.2 In conjunction with Healthcare Quality and Safety Directorate, document how health information will integrate into the Quality and Safety Framework.	Q3

Develop national standards for health information.

Supporting Work Programme (3 yr)	Business Plan Objectives 2009	Delivery Time
2.1 Develop policy and procedures for the development of health information standards.	2.1.1 Develop policies and procedures for the operation and work practices for the National Information Standards Steering Committee and its Working Groups in accordance with the Authority's Quality Assurance Framework.	Q2
2.2 Prioritise areas for health information standards setting.	2.2.1 Using processes for prioritisation (developed in 2.1.1), develop a work plan for the National Information Standards Steering Committee for standards approval.	Q3
	2.2.2 Organise and facilitate workshops to progress the awareness of technical standards relevant to health information to stakeholders and relevant parties.	02, 03, Q4

2.3 Develop health information standards	2.3.1 Using the policies and procedures documented for the National Information Standards Steering Committee recommend a specification for a messaging standard for Primary Care.	Q3
	2.3.2 In conjunction with Healthcare Quality and Safety Directorate, develop a set of key performance indicators for Emergency Departments.	Q4
	2.3.3 In conjunction with Healthcare Quality and Safety Directorate, develop a set of key performance indicators for Symptomatic Breast Disease Services.	Q2
	2.3.4 Commence work with stakeholders on specifications for standardised information structures for clinical concepts and clinical documents (for example diagnosis, medication item, discharge summary).	Q4

Develop and communicate how standards will be measured in inspected facilities.

Supporting Work	Business Plan	Delivery
Programme	Objectives 2009	Time
3.1 Develop procedures for monitoring compliance with health information standards.	2.1.1 Develop a procedure for annual monitoring of progress on the implementation of the National Health Information Strategy.	02

6 Health Technology Assessment

Corporate Objective 1

Establish HTA Directorate and commence HTA Programmes for medicines, devices, diagnostics and health promotion activities in cancer and other disease priorities.

Supporting Work Programme (3 yr)	Business Plan Objectives 2009	Delivery Time
1.1 Develop HTA Quality Assurance Framework, programme structure and team to advise	1.1.1 Dependent on approval of structure, recruit and build skilled directorate. during 2009 with necessary multidisciplinary skills to carry out assessments	Q3
and carry out assessments.	1.1.2 Establish a Programme Advisory Group (PAG) to advise on the HTA process.	Q2
	1.1.3 Agree a framework for the HTA Work Programme informed by recommendations from the PAG.	Q4
	1.1.4 Consult with Scientific Advisory Group (SAG) to provide continued expert advice on methodology for effective HTAs.	Q1 / Ongoing
	1.1.5 Implement the elements of the Quality Assurance Framework in accordance with a structured plan.	Q1
1.2 Establish HTA referral and prioritisation process and mechanism for managing assessments.	1.2.1 Define the HTA referral process and procedures for the prioritisation of assessments in consultation with the PAG.	Q2
	1.2.2 Implement the HTA referral process and procedures for the prioritisation of assessments.	Q3

1.3 Establish a HTA research programme for identifying new technologies and publishing assessment outcomes.	1.3.1 Implement research strategy for the HTA Directorate to manage and coordinate research within the division.	Q1
	1.3.2 Implement the Horizon Scanning process / methodologies to identify new health technologies that may impact nationally.	Q1 / Ongoing
	1.3.3 Pilot and publish approved horizon scanning output reports to key stakeholders at regular intervals.	02
	1.3.4 Identify research resources required to support ongoing HTA activities.	Q1

Provide robust independent advice on the clinical and cost effectiveness of health technologies as well as the social, ethical, organisational and legal aspects of HTA, as appropriate.

Supporting Work Programme (3 yr)	Business Plan Objectives 2009	Delivery Time
2.1 Carry out a defined number of system-wide HTAs dependent upon available capacity and funding.	2.1.1 Engage with key stakeholders to identify high priority HTAs that maximise efficiencies and deliver value for money for a fixed-budget healthcare system.	Q1
	2.1.2 Appoint evaluation teams (internal/ external) according to available resources and manage HTA projects according to established polices and procedures.	Q1 / Ongoing
	2.1.3 Publish HTA outputs.	Ongoing
2.2 Put resources and structures in place to enable the undertaking of HTAs based upon defined standards.	2.2.1 Provide appropriate induction training for six new staff in 2009 to ensure work adheres with standards outlined in the Quality Assurance Framework.	Q4
	2.2.2 Finalise National Economic Guidelines with SAG that define HTA parameters for measuring the cost- effectiveness of health technologies undergoing assessment.	02
	2.2.3 Publish and disseminate Board approved Economic Guidelines to key stakeholders.	Q3
2.3 Establish HTA linkages and collaborate with external decision makers, agencies, service providers and knowledge holders involved in assessments.	2.3.1 Develop and maintain relationships with key national stakeholders including policymakers, service providers, clinicians, patient groups, academics and industry to maximise understanding of HTA and facilitate timely implementation of HTA outputs.	Ongoing

2.4 Establish linkages with international HTA providers to share knowledge and collaborate on HTA	2.4.1 Maintain effective engagement with international HTA networks to include exchange of data and project outputs to facilitate timely and efficient HTA.	Ongoing
production.	2.4.2 In accordance with membership requirements, contribute to EUnetHTA group projects within required timeframes (e.g. core HTA models) to maximise international transferability of HTA outputs.	Ongoing

Provide best practice guidelines and guidance to third parties carrying out HTAs.

Supporting Work Programme	Business Plan Objectives 2009	Delivery Time
3.1 Develop comprehensive national HTA guidelines for all assessments.	3.1.1 Finalise and implement national guidelines (economic, ethical, legal, resource considerations) for the HTA process and publication of assessment outcomes.	Q4
3.2 Communicate national guidelines to service providers carrying out assessments.	3.2.1 Publish and promote HTA economic guidelines to key national stakeholders and to decision makers at a local level.	Q3
3.3 Establish a programme to support HTAs carried out at local level.	3.3.1 Refine and customise a piloted Mini HTA process developed in conjunction with the HSE.	Q2 / Ongoing
	3.3.2 Collaborate with key stakeholders to embed the mini-HTA process to support the use of HTA decision-making capabilities at a local level.	Q2 / Ongoing
	3.3.3 Collaborate with the Health Information Directorate to assess different options available for a unique health identifier for service users.	Q3
	3.3.4 Collaborate with the Healthcare Quality and Safety Directorate to identify practices that are safe, effective and efficient and deliver best value.	Ongoing
3.4 Work with the system to develop HTA capacity and capability.	3.4.1 Support a national development of skill sets for the conduct and interpretation of HTAs.	Ongoing

7 Communications and Stakeholder Engagement

Corporate Objective 1

To establish a clear understanding and awareness of the Authority and our role among the public.

Supporting Work Programme	Business Plan Actions 2009	Delivery Time
1.1 Implement the Authority's communication strategy.	1.1.1 Develop a proactive programme of public engagement for the Authority.	Q1 - Q2
	1.1.2 Achieve increased public awareness of the Authority's role in driving patient safety and safeguarding vulnerable people.	Q1 - Q3
	1.1.3 Drive and support representation of the Authority at appropriate available opportunities to promote the roll and function of the Authority.	Q1 - Q4
	1.1.4 Develop and agree key messages for each Directorate to reflect their goals and objectives, to be used in all media relations where appropriate.	Q1 - Q2

1.2 Manage the production and publication of the Authority's public- facing reports, publications and media launches, in association with other Directorates.	1.2.1 Liaise with Healthcare Quality and Safety (HQS) Directorate to produce the reports of the Quality Assurance Review into Symptomatic Breast Disease Services.	Q1
	1.2.2 Produce, publish and launch the National Quality Standards: Residential Services for People with Disabilities and the versions that meet accessibility requirements. Produce promotional DVD to explain how the standards were developed.	Q1
	1.2.3 Finalise publication and launch <i>National</i> <i>Quality Standards for Residential Care</i> <i>Settings for Older People in Ireland</i> , in association with SSI.	Q1
	1.2.4 Provide communications support to the investigation into the Mid-Western Regional Hospital Ennis.	Q1
	1.2.5 Publish and launch the HTA on colorectal cancer screening programme, in association with the HTA Directorate.	Q1 - Q2
	1.2.6 Implement a communications programme for the commencement of inspections, with SSI.	Q1 – Q2
	1.2.7 Complete publication and launch of the National Standards for the Prevention and Control of Healthcare Associated Infections.	Q2 (TBC)
	1.2.8 Liaise with the HQS Directorate on communicating the protocols for the development of standards.	Q2
	1.2.9 Work closely with the HQS Directorate to promote the Safety and Learning Framework.	Q2 - Q4

1.2.1	 Develop and implement a communications plan to support the promotion of the "Safe Surgery Saves Lives" initiative, with the HQS Directorate. 	Q2 – Q3
1.2.1	Liaise with the HQS Directorate on the communications requirements to support the promotion of the WHO's "When Things Go Wrong" project.	Q3
1.2.1	2 Liaise with the Health Information (HI) Directorate on communications around the promotion of the unique health identifier.	Q2 – Q4
1.2.1	3 Liaise with the HTA Directorate on the publication of the HTA economic guidelines.	Q3
1.2.14	Liaise with the HQS and HTA Directorates on the generic standards framework based on the Quality and Safety Framework concept.	Q3 – Q4
1.2.1	5 Manage communications around the publication of key performance indicators (KPIs) for emergency departments, in conjunction with the HQS and HI Directorates.	Q3 – Q4
1.2.1	6 Manage communications around the publication of the <i>National Guidelines for the HTA Process</i> in partnership with the HTA Directorate.	Q4
1.2.1	7 Work with the SSI to manage communications to support the publication of draft standards for children in residential care.	Q4

To actively engage with key stakeholders to foster a collaborative working relationship (find common ground).

Supporting Work Programme	Business Plan Actions 2009	Delivery Time
2.1 Implement a programme of active engagement with stakeholders to ensure greater understanding and support for the work of the Authority.	2.1.1 Implement a regular proactive organisation-wide stakeholder engagement programme.	Q1 – Q4
	2.1.2 Update and maintain the database of key stakeholders, their roles, responsibilities and issues.	Q1 - Q2
	2.1.3 Facilitate and enable organisation-wide adherence to best practice in processes for consultation and engagement with stakeholders.	Q1 – Q2
	2.1.4 Respond efficiently to all parliamentary questions received from the Department of Health and Children.	Q1 – Q4
	2.1.5 Manage the communication needs for all presentations by the Authority to the Joint Oireachtas Committee on Health and Children.	Q1 – Q4
	2.1.6 Continue to undertake regular briefings with all relevant Government and Opposition spokespeople and other key stakeholders.	Q1 – Q4
	2.1.7 Develop and implement processes and procedures to manage the effective engagement of key contacts across the statutory and non-statutory sectors.	Q2 - Q3
	2.1.8 Provide public affairs advice and actions where necessary to HI Directorate on the next stages of the Health Information Bill.	Q1 – Q4
	2.1.9 Implement the annual "Open Space" forum for stakeholder feedback on the work of the Authority.	Q4

To communicate honestly and openly with all stakeholders in a straightforward and transparent manner, to build trust and assure independence.

Supporting Work Programme	Business Plan Actions 2009	Delivery Time
3.1 Provide framework to enable open and easily accessible information.	3.1.1 Actively maintain two-way open channel of communication to all relevant stakeholders by making information available in the public domain.	Q1 – Q4
	3.1.2 Ensure that all information is provided in formats that meet, where possible, standard accessibility requirements.	Q1 – Q4
	3.1.3 Regularly issue press releases to the national and local media and generate media coverage on the work of the Authority.	Q1 – Q4
	3.1.4 Constantly update content on public-facing website to ensure user-friendly website.	Q1 – Q4
	3.1.5 Manage major redesign and restructure of website to meet the expanding needs of the Authority and enable interactivity.	Q2 – Q4
	3.1.6 Liaise with HI Directorate on planning the development of web infrastructure for the National Health Data Dictionary.	Q2 - Q3

3.2 Develop processes to ensure that all communications with stakeholders engenders trust and reflects the independence of the Authority.	3.2.1 Review all references to the Authority and relevant topics of interest in the media daily and distribute any media clippings to the Executive Team, the Board and others where relevant.	Q1 – Q2
	3.2.2 Produce the Authority's <i>Annual</i> <i>Report for 2008</i> , in association with CEO's Office and Corporate Services Directorate.	Q1 – Q2
	3.2.3 Liaise with CEO's Office on the publication of the Business Plan.	Q1
	3.2.4 Liaise with Corporate Services Directorate on the production of the accessibility guidelines.	Q1 – Q2
3.3 Act as the custodians of the Authority's Corporate Identity.	3.3.1 Complete the House Style guidelines for the Authority and provide staff training to support its implementation.	Q1 – Q4
3.4 Develop an issues management framework to ensure that the Authority is prepared to respond effectively.	3.4.1 Develop and implement issues management plan for the Authority.	Q2 - Q3

To ensure good and effective internal communications processes and procedures are in place to ensure staff engagement and a two-way dialogue across the Authority between staff and senior management.

Supporting Work Programme	Business Plan Actions 2009	Delivery Time
4.1 Develop an effective internal communications strategy.	4.1.1 Develop and roll out the internal communications strategy, to include the internal communication channels: online staff newsletter, team-brief system, dynamic content on Intranet.	Q2 – Q3
	4.1.2 Liaise with HR on the implementation of management forum.	Q2 – Q3
4.2 Develop and implement policies for the Authority to support the implementation of effective internal communications processes.	4.2.1 Develop and implement a policy on design and print of all publications to reduce costs, provide best value for money and improve efficiency.	Q1 – Q2
	4.2.2 Manage media monitoring and media-buying for the Authority to provide best value for money.	Q1 – Q4
	4.2.3 Develop and implement the complaints policy for issues raised about the Authority in association with Corporate Services Directorate.	Q1 – Q2
	4.2.4 Develop and implement the Authority's Customer Charter in association with Corporate Services Directorate.	Q1 – Q2

8 Corporate Services

Corporate Objective 1

To provide the necessary services and resources, in a consistent manner to enable the Authority to deliver our objectives efficiently and effectively and in a well governed way.

Supporting Work Programme (3 yr)	Business Plan Actions 2009	Delivery Time
1.1 Establish the planning, legal, financial and governance frameworks required to support the Authority.	1.1.1 Ensure compliance in areas of the Freedom of Information Act (FOI) and data protection, procurement, invoice and expenses processing and payment, payroll, pensions management and work with the CEO's office in operational reporting and risk management.	Ongoing
	1.1.2 Establish an efficient reporting system to enable timely accurate monthly budgetary reporting for each Directorate.	Q1
	1.1.3 Establish a regular monthly cash flow forecast process, that will facilitate the management of the Authority's cash flow.	Q2
	1.1.4 Ensure that internal audits are completed and reports received on two areas identified as priority.	Q4
	1.1.5 Develop an agreed framework for a Quality Management system for the Authority.	Q4
	1.1.6 With the Chief Executive's Office, continue to establish appropriate corporate governance controls for the Authority.	Q1

1.2 Co-ordinate and drive the Human Resources (HR) Strategy in keeping with best practice to ensure each Directorate has appropriate, well	1.2.1 Redraft, consult and launch of the final suite of HR policies and procedures.	02
	1.2.2 Manage ongoing operational tasks, including employee and industrial relations, and ongoing recruitment issues.	Ongoing
managed human resources to carry out its function.	1.2.3 Leads on the specification, selection and implementation of a HR information system to provide further infrastructure required to support the organisation.	Q4
	1.2.4 Design, launch and implement the Performance Management Development system, consistent with the culture of the Authority, with full training provided to staff.	Q2
1.3 Provide the appropriate physical and operational infrastructure to support the Authority	1.3.1 Manage ongoing operational tasks: facilities management of two new buildings, support of information and communications technology infrastructure.	Ongoing
in carrying out its functions.	1.3.2 Transition Cork-based staff to new offices.	Q1
	1.3.3 Develop requirements for a finance information system that incorporates purchase to payment processes, sales ledger, general ledger, expense management, and management reporting.	Q4
	1.3.4 Develop a Regulatory Support system prototype that allows registration of centres/providers, gathering and storing of information and workflow management. This will support the SSI in commencing its registration and inspection functions.	Q2

1.3.5 Define requirements for a corporate "case management" system that allows registration of centres/ providers, gathering and storing of information and workflow management, resource planning, scheduling and report generation.	Q4	
1.3.6 Support the commencement of nursing homes inspection by the SSI through providing appropriate human resources, financial, ICT and operational support.	Q2	

9 Chief Executive's Office

Objective 1

To provide the necessary services and resources, in a consistent manner to enable the Authority to deliver our objectives efficiently and effectively and in a well governed way.

Supporting Work Programme (3 yr)	Business Plan Objectives 2009	Delivery Time
1.1 Provide an efficient and effective Secretariat to the	1.1.1 Assist the Board in meeting its statutory responsibilities.	Ongoing
Secretariat to the Board in order to ensure that the appropriate support and administration is provided to the Board and its sub- committees.	1.1.2 Support the ongoing implementation of the Codes of Governance and Conduct.	Ongoing
1.2 Support the discharge of the	1.2.1 Provide an effective and efficient Secretariat to the Executive Team.	Ongoing
objectives within the Corporate and Business Plans.	1.2.2 To provide cross-directorate support when appropriate.	Ongoing

To monitor and report on key aspects of governance, risk and compliance within the Authority.

Supporting Work Programme	Business Plan Objectives 2009	Delivery Time
2.1 Further develop the monitoring, evaluation and reporting	2.1.1 Develop, coordinate and maintain the Authority's corporate calendar to ensure that statutory reporting requirements are met.	Ongoing
arrangements against the 2009	2.1.2 Review the Corporate Plan.	Q3
Business Plan and to meet the Authority's statutory requirements, at Board organisational, Directorate, project and individual levels.	2.1.3 Implement the Performance Assessment Framework (PAF) at strategic, programme, project and, together with the Human Resources Team, at individual levels.	Q1 - Q4
	2.1.4 Support the Directorates in effectively using the PAF to inform the operational management of the work of the Authority.	Q2
	2.1.5 Ensure that staff are appropriately trained to populate and use the PAF.	Ongoing
	2.1.6 Develop Business Plan 2010.	Q4
	2.1.7 Ensure compliance with the Ethics in Public Office returns.	Q1
2.2 Ensure that the PAF mechanism is used as a management information and learning tool that helps inform decision-making.	2.2.1 Administrate and support the ongoing collation and use of the PAF for reporting at Executive team and Board level.	Ongoing
	2.2.2 Undertake an ongoing review of the PAF to ensure that it meets the management needs of the Authority.	Ongoing

2.3 Establish and implement a Risk Management	2.3.1 Develop and approve the Risk Management Strategy and Framework for the Authority.	Q2
Strategy and Framework for the Authority that is	2.3.2 Develop and co-ordinate the implementation plan for the Strategy.	Q1
 reported as part of the Performance Assessment Framework. 2.4 Develop and implement an internal Controls Assurance Standards and Framework for the Authority. 	2.3.3 Ensure that the effective identification, management, monitoring and reporting of risks is demonstrable, accurate and contemporaneous within the PAF.	Ongoing
	2.3.4 Develop a Risk Register that is reviewed at quarterly intervals by the Executive Team and the respective Sub-Committees of the Board as appropriate.	Q1
	2.3.5 Coordinate the access to legal advice.	Ongoing
	2.4.1 Together with Corporate Services Directorate, develop the Controls assurance Standards as part of the Quality Assurance Framework for the Authority.	Ο3
	2.4.2 Support the implementation of the Standards and Framework.	Q4
	2.4.3 Undertake a number of audits across the Authority against the controls assurance standards.	Q4

Communicate honestly and openly with all stakeholders in a straightforward and transparent manner, to build trust and assure independence.

Supporting Work Programme	Business Plan Objectives 2009	Delivery Time
3.1 Ensure that all stakeholders who engage with the Office are dealt with efficiently, effectively and appropriately.	3.1.1 Ensure that there is an ongoing professional system and approach for communications within the office that is consistent across the organisation.	Q1
	3.1.2 Provide leadership across the Authority to continue to develop and embed the culture and values for our staff and within the work that we undertake.	Ongoing

10 Stakeholder Engagement

The effectiveness of the Authority is heavily dependent on its ability to sustain the good working relationships developed with key stakeholders, while retaining a high level of independence. These stakeholders include service users and associated organisations; the Department of Health and Children and other Government departments; the Health Service Executive and its staff; other services providers across all sectors; professional and other regulatory bodies; the media and the international health and social care community.

Stakeholder involvement has contributed to the development of the Authority's Corporate Plan and the objectives set out in this Business Plan.

The Authority is committed to supporting, commissioning and evaluating research that informs and furthers its work at both strategic and operational level in the following areas: setting and monitoring standards for the Health and Social Services, collection, use and sharing of Health Information and assessment of Health Technology.

11 Risks

Many of the risks which the Authority has identified previously have become even more relevant and have been reprioritised to reflect the changing environment. The ability of the Authority to meet its 2009 objectives will be subject to a number of key risks which include:

Available Resources – the Authority, in preparing this Business Plan, has prioritised and shifted emphasis on work programmes for 2009 in line with the available funding and maximum impact whilst maintaining the direction of the Corporate Plan. If these resources are reduced then the objectives will need to be reviewed.

Managing the expectations of the public, service users, staff and key stakeholders – whilst the mission of the Authority is driving improvements in quality and safety, it is essential that stakeholders have a clear and accurate understanding of the remit of the Authority during this set up period so that expectations of its role and its ability to undertake pieces of work are realistic.

Challenges – the success of the 2009 work programmes will be dependent on the human and financial resources being made available to the Authority and also on the impact of the current climate on other organisations with whom the Authority will work in order to undertake its work. Whilst being cognisant of current restrictions, key infrastructural systems and skills have yet to be established. Without such resources, there is a risk that the Authority will not be effectively set up to deliver on its functions, particularly in relation to its regulatory mandate.

Unplanned workload – while the Authority accepts that it has a role in undertaking unscheduled investigations it is important that the focus is not lost with regard to initiatives that are designed to achieve sustainable improvements in quality and safety across the wider health and social care system. Consequently, where the Authority is required to undertake unanticipated work, for example investigations, it may need to re-prioritise what it is able to achieve during 2009 at that time.

12 Conclusions

Much has been achieved during the first full year of the Authority's establishment and much more is needed. During 2009, one of our primary objectives will be to drive the necessary improvements that maximise patient safety across our health and social care systems.

There has been significant progress in the development of standards which will help provide a benchmark for driving quality and safety. Recommendations from key investigations are being adopted and leading to improved practices.

However, the development and implementation of a core Quality and Safety Standards Framework is an essential tool to support wider, more sustainable improvement in services and will become the framework for licensing and regulation of public and private healthcare providers in the future.

The development of the Authority's Health Information functions is leading to a greater understanding and appreciation of why and how these functions are central to an improved health and social care system by increasing reliability, consistency and efficiency in the information to be used to drive the quality and safety of services.

The undertaking of targeted Health Technology Assessments will provide advice for, and inform, the investment decisions and current practices for providers and commissioners of services and will be key in assisting the delivery of safe healthcare services in the current economic climate.

Similarly, a priority for the Authority for 2009 will be the commencement of the inspection and registration of residential care centres for older people. This is a substantial programme of work and will have significant implications for the health and social care system.

In everything that we do, we endeavour to embed the values and culture of the Authority which are driven by person-centredness and integrity. By carrying out our actions in this manner we hope to make a difference to the people who use health and social care services, achieve the trust and respect of those who work with us and influence the vision and provision of services by those responsible for planning, delivering and commissioning services.

Finally, the Board and Chief Executive of the Authority would like to take this opportunity to express their gratitude to the staff of the Authority who continue to demonstrate passion and commitment to the work of the Authority.

Thanks also must be given to the many people who have supported and assisted the Authority in its work to date and to the Minister for Health and Children, and her officials, for supporting the Authority.

Appendix 1 Budgetary Summary

Revenue Budget for 2009

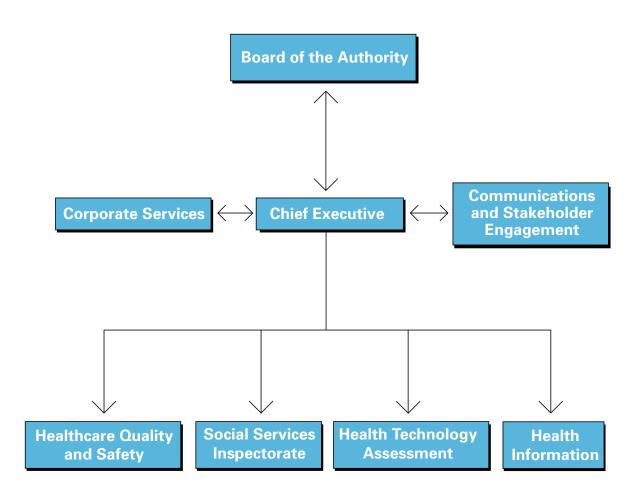
	19,081
Other income	4,981
Department of Health and Children	14,100
	€′000

Expenditure

	€′000
Chief Executive Office	1,355
Healthcare Quality and Safety	2,375
Social Service Inspectorate (including inspection and registration of residential care centres [older people])	8,663
Health Technology Assessment	1,619
Health Information	1,081
Communications and Stakeholder Engagement	881
Shared Costs and Corporate Services	3,107
	19,081

Appendix 2

Organisation Structure



For further information please contact:

Health Information and Quality Authority, Unit 1301, City Gate, Mahon, Cork Telephone: +353 (0) 21 240 94 00. Email: info@hiqa.ie URL www.hiqa.ie

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