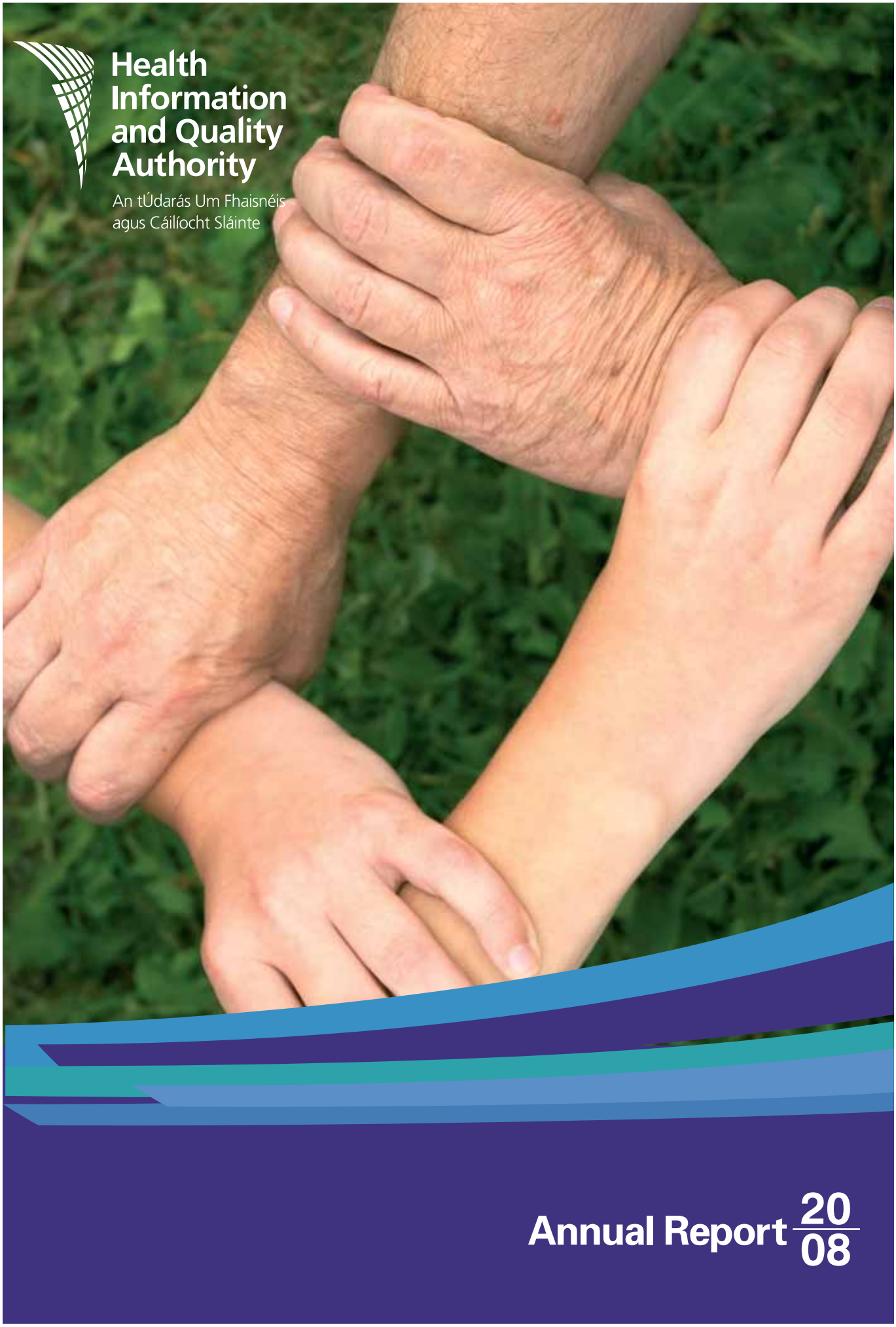

Health Information and Quality Authority

An tÚdarás Um Fhaisnéis agus Cáilíocht Sláinte

Annual Report 20/08

Presented to the Minister for Health and Children in Accordance with Section 37 of the Health Act 2007

Foreword by the Chairperson

The Health Information and Quality Authority has made significant progress in promoting a culture of safer and higher quality health and social care in Ireland, during its first full calendar year, January to December 2008.

We believe our work has already had a direct positive impact on improving experiences for users of our health and social care services, but our work is only beginning, and much remains to be done in achieving our goals.

2008 was a year of considerable work and a number of achievements both for the Authority and people who use and work in our health and social care services. This report outlines some of these achievements, which I will briefly summarise.

We commenced a range of patient safety initiatives during this 12-month period. We also developed and published draft *National Quality Standards for Residential Care Settings for Older People in Ireland,* and, separately, *National Quality Standards: Residential Services for People with Disabilities*.

It is easy to underestimate the significance of these standards for our older people and for people with disabilities. In fact, these will be the foundation in the years ahead for further improvements in services for these people.

During the year, the Authority concluded two major investigations into breast cancer misdiagnoses. We are closely monitoring our recommendations made in the reports of these investigations to ensure that the recommendations are implemented and a culture of learning is developed.

The year also saw the launch of our first health technology assessment, into the role of a Human Papillomavirus vaccination scheme to prevent cervical cancer, and various other initiatives across the work of the Authority.

Despite the work completed to date, we must not rest on our laurels as many challenges remain in the goal of driving safe and high quality care. However, I am confident that the Health Information and Quality Authority has a key role to play in driving this goal.

My fellow Board members and I will continue to provide our support to the Chief Executive, her senior management team and the staff of the Health Information and Quality Authority as it sets about its task of driving continuous improvements in Ireland's health and social care services.

This will ensure that patient safety is our main priority and that driving improvements across Ireland's health and social care services in all sectors achieves tangible benefits for people using the services.

I would like to thank all of the people who have worked with, and supported us, during 2008 and look forward to continuing to work with them once more, and many others, as we continue our work in 2009.

Pat McGrath
Chairperson

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1 About the Health Information and Quality Authority

1.1 Introduction and background

The Health Information and Quality Authority was established on 15 May 2007 as part of the Government's Health Reform Programme. Reporting to the Minister for Health and Children, the role of the Authority is to promote safety and quality in the provision of health and social care for the benefit of the health and welfare of the public.

The Authority therefore has responsibility for:

- setting quality and safety standards for our health and social care services, with the exception of mental health services
- monitoring and, as appropriate, enforcing these standards
- supporting providers and staff in bringing about improvements in service quality
- undertaking investigations where there is a serious risk to the health or welfare of a person, or people, using services
- evaluating new health technologies and, more generally, promoting the better use of resources in our health and social care services
- advising on the collection and sharing of information across the services, evaluating information and publishing information about the delivery and performance of Ireland's health and social care services
- reporting on our work and providing information about health and social care for the public, users of the services, health and social care professionals, policy makers and the Government.

The interim Health Information and Quality Authority, Social Services Inspectorate (SSI) and the former Irish Health Services Accreditation Board (IHSAB) were integrated into the Authority on its establishment.

The former SSI, responsible for the inspection of Health Service Executive (HSE) children's residential care centres, has expanded functions and powers in the establishment of the Office of the Chief Inspector for Social Services within the Social Services Inspectorate of Authority. The former IHSAB's accreditation function has been incorporated into the work of the Healthcare Quality and Safety Directorate.

As an independent organisation, the Authority is committed to an open and transparent relationship with its stakeholders. Its independence within the health system is key for it to be successful in undertaking its functions.

In carrying out its work, the Authority works closely with diverse groups of people including those using health and social services, their carers, health and social care professionals, the HSE, private and voluntary providers, Department of Health and Children (DoHC) and other key stakeholders nationally and internationally.

The Authority has a statutory requirement to produce an Annual Report in keeping with the Health Act 2007, and the Office of the Chief Inspector within the Authority also has a specific requirement to do so. These are both contained within this report.

This Annual Report outlines the work of the Authority from 1 January to 31 December 2008, in line with the Authority's Business Plan for 2008.

It should be noted that this was the first full year of operation for the Authority and therefore a considerable focus was, and will continue to be, on completing the implementation of the processes and functions required to meet the strategic objectives of the Authority, as outlined in the Corporate Plan 2008 – 2010. That has included:

- completion of a significant recruitment programme to ensure that, with the commencement of its functions, the Authority has the right people with the right skills at the right time
- progressing the establishment of the governance arrangements, operating framework and systems and processes to be effective, efficient and supportive of its staff and compliant with public sector guidelines

- maintaining the ongoing work, planning and commencing a number of new functions to ensure that it is robust in discharging its responsibilities, whilst responding to a number of key public safety issues that occurred during 2008.

1.2 Mission statement and core values

In carrying out its work, it is fundamental that the Authority is clear on what its mission is and what the core values are that will drive behaviours and "the way the Authority does business".

The mission of the Authority is to:

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

This mission acts as a compass for all of the Authority's activities.

The Authority's core values express what it believes is fundamental to how it does business, its behaviours and how the organisation hopes to be perceived by external stakeholders. These values will drive the culture of the organisation.

Core Values

Putting people first – we will put the needs and the voices of service users, and those providing 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.

1.3 Strategic objectives

In line with the requirements of the Health Act 2007, the Authority developed and adopted a three-year Corporate Plan during 2008, to cover the period 2008 to 2010. This plan, which was approved by the Minister for Health and Children, contains the key objectives of the Authority over this time period and strategies to achieve them, as well as indicating how the Authority intends to use its available resources. This Annual Report contains a progress report for 2008 on the implementation of the objectives outlined in the Corporate Plan (see page 16).

As further directed in the Health Act 2007, a Business Plan for 2008 was also developed and adopted. This plan outlined what activities each Directorate would undertake to meet its target objectives for the year, in keeping with the overall objectives outlined in the Corporate Plan. Success in the attainment of these objectives will be the criterion on which the effectiveness of the Authority will be evaluated.

The strategic objectives outlined in the Corporate Plan are as follows:

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.

1.4 The Board of the Authority

The Board of the Authority was established on 15 May 2007. It is comprised of a Chairperson and 11 additional non-executive directors. The directors cover a diverse range of experiences that include representation from health and social care professionals, lay members and industry. The members of the Board are as follows:

Mr Pat McGrath (Chairperson), Chief Executive, Project Management Group

Mr Bryan Barry Assistant General Secretary, Irish Farmers' Association

Dr Michael Barry Medical Director of the National Pharmacoeconomic Centre and Consultant Physician, St James's Hospital, Dublin

Mr Dan Byrne Chairman, Lincor Solutions Ltd

Dr Ian Callanan Clinical Audit Support, St Vincent's Healthcare Group, Dublin

Dr Angela Kerins CEO, Rehab Group and Chairperson of the National Disability Authority

Professor Geraldine McCarthy
Head of Nursing, University College, Cork

Dr Brian Meade
General practitioner, and Director of the National GPIT Training Programme

Ms Sheila O'Connor
Coordinator, Patient Focus

Mr David O'Hora
Director, Southern Marketing, Advertising and Communications Agency

Dr Dermot Power
Consultant in Elderly Care, Mater Misericordiae Hospital and St Mary's Hospital, Dublin

Ms Dolores Quinn
Marketing and Communications Manager, Abbott Laboratories

1.5 Organisational structure and Executive Management Team

The Authority has organised itself to reflect its main functions. Consequently, there are six Directorates and a Chief Executive's Office that are led and managed by an Executive Management Team. The organisational structure can be seen in Appendix 1. The members of the Executive Management Team are as follows:

Dr Tracey Cooper
Chief Executive Officer

Dr Marion Witton
Chief Inspector of Social Services Inspectorate

Prof Jane Grimson
Director of Health Information

Dr Mairin Ryan
Director of Health Technology Assessment

Jon Billings
Director of Healthcare Quality and Safety

Dr Patricia Harrington
Acting Director of Health Technology Assessment

Sean Angland
Head of Corporate Services

Marty Whelan
Head of Communications and Stakeholder Engagement

Kathleen Lombard
Board Secretary

The functions of the Directorates are as follows:

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 healthcare.
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 information systems; 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.

Directorate	Function overview
Communications and Stakeholder Engagement	Ensuring that the Authority's 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 our intended purpose, through effective staff welfare, performance, management and recruitment, premises, management information systems and other key support services.

Headquartered in Cork, the Authority currently has offices in Cork and Dublin. During 2008 the Authority consolidated the three pre-existing offices in Dublin into one purpose-built office, the Dublin Regional Office, in Smithfield.

1.6 Summary of key achievements 1 January to 31 December 2008

Significant progress was made during 2008 on achieving the objectives set out in the *Corporate Plan 2008 – 2010* and the *Business Plan 2008*. It must be noted, however, that some objectives were not completed during the year. There were a number of reasons for this. These included the change in the economic environment which resulted in a suspension of recruitment and associated budgetary approval for previously approved positions. Consequently, a number of key positions were not filled during 2008 and therefore some objectives were unable to be met. This was most relevant for the Health Technology Assessment Directorate and also the Social Services Inspectorate – the impact of which resulted in the commencement of the inspection and registration of residential care centres for older people not being commenced during 2008 as planned.

The key achievements for 2008 are listed below:

- the preparation and publication of draft *National Quality Standards for Residential Care Settings for Older People in Ireland*
- the preparation of draft *National Quality Standards:Residential Services for People with Disabilities,* and the undertaking of an inclusive public consultation process
- the preparation and publication of draft *National Standards for the Prevention and Control of Healthcare Associated Infections* and the undertaking of an inclusive public consultation process
- the publication of a health technology assessment (HTA) on *The Role of Human Papillomavirus Vaccines in Reducing the Risk of Cervical Cancer in Ireland*
- the undertaking of three investigations and the publication of two reports:
  - *Report of the Investigation into the circumstances surrounding the provision of care to Rebecca O'Malley, in relation to her symptomatic breast disease, the Pathology Services at Cork University Hospital and Symptomatic Breast Disease Services at the Mid Western Regional Hospital, Limerick.*
  - *Report of the investigation into the provision of services to Ms A by the Health Service Executive at University Hospital Galway in relation to her symptomatic breast disease, and the provision of Pathology and Symptomatic Breast Disease Services by the Executive at the Hospital*
  - Commencement of investigation into the quality and safety of patient care at the Mid-Western Regional Hospital Ennis
- undertaking collaborative projects with other health agencies:
  - Evaluation of incident reporting scheme STARSweb in conjunction with Clinical Indemnity Scheme (CIS) and the Health Service Executive (HSE)

  - "Safe Surgery Saves Lives" campaign in conjunction with the Royal College of Surgeons in Ireland (RCSI) and World Health Organisation (WHO)

- undertaking and publishing the report of the *National Hygiene Services Quality Review 2008* of 50 hospitals
- presenting to the Oireachtas Joint Committee on Health and Children three times during the year on the work of the Authority
- co-hosting an international conference, in association with the Council of Europe, on the need to enhance social care services, the first of its kind in Europe
- conducting a research poll into public support for the sharing of health information and publishing the findings
- implementation of the recruitment and operational infrastructure of the Authority, including the publication of three corporate reports: *Business Plan 2008*, *Corporate Report 2008 – 2010* and the first *Annual Report 2007.*

2 Activities by Directorate

2.1 Healthcare Quality and Safety Directorate

2.1.1 Background

The Healthcare Quality and Safety Directorate is responsible for driving improvements in quality and safety of healthcare on behalf of patients. Under the Health Act 2007, the Authority is responsible for developing standards, monitoring compliance with standards, and carrying out investigations where there are reasonable grounds to do so.

2.1.2 Summary of activities during 2008

During 2008, the Directorate has carried out significant work in the:

- development of draft *National Standards for the Prevention and Control of Healthcare Associated Infections*
- completion of a quality review programme against the *National Quality Assurance Standards for Symptomatic Breast Disease*
- monitoring compliance of 50 acute HSE and voluntary hospitals against the *National Hygiene Services Quality Review 2008: Standards and Criteria*
- completion of two investigations into the care received by patients
- commencement of an investigation into the quality and safety arrangements at the Mid-Western Regional Hospital Ennis
- promoting improvements in quality and safety.

2.1.3 Standards development

National Standards for the Prevention and Control of Healthcare Associated Infections

Healthcare Associated Infections (HCAIs) are presenting a significant challenge to Irish health and social care services. These infections can lead to more serious illness, prolonged hospital stays and can cause long-term disability. They also result in a high personal impact for patients and their families and can also lead to an additional financial burden on health and social care systems and most seriously, contribute to unnecessary patient deaths. Therefore, reducing and preventing HCAIs is a key priority area for the Authority. To tackle this problem the Authority has developed draft *National Standards for the Prevention and Control of Healthcare Associated Infections.*

The development of the National Standards involved a number of steps and processes to ensure they are person centred, evidence based, clear, valid, measurable and fit for purpose. These processes include:

- a comprehensive review of the available Irish and international literature
- meeting relevant stakeholders
- focus groups with service users
- regional workshops with service providers in Dublin, Monaghan, Sligo and Cork, attended by over 150 people in total
- two external independent advisers reviewed the draft standards and provided detailed feedback.

In addition to the above, the Authority undertook a six-week public consultation process which ran from 3 June until 18 July 2008. This process included the following:

- the consultation process was advertised in the national newspapers and on the Authority's website www.hiqa.ie. Draft standards were sent to over 400 relevant stakeholders
- submissions were received from a wide range of stakeholders including members of the public, advocacy groups, and both private and public service providers from community, primary care and the acute hospital sector. The total number of submissions received was 107.
- the information received was then reviewed in detail and used to inform the development of the National Standards.

The standards were approved by the Board of the Authority on 26 November, under section 10 of the Health Act 2007, and subsequently submitted to the Minister for Health and Children for approval on November 27.

2.1.4 Monitoring compliance with standards

Symptomatic Breast Disease Services

In autumn 2007, the Authority announced its intention to carry out a quality review of symptomatic breast disease services using the *National Quality Assurance Standards for Symptomatic Breast Disease* as the basis.

Phase-one of this quality review programme involved centres, which were providing symptomatic breast disease services in Ireland, undertaking a self-assessment exercise that enabled each centre to systematically assess the extent to which its symptomatic breast disease services were meeting the requirements as set out in the standards.

The second phase of the programme involved a validation assessment process where members of the Authority visited the eight designated specialist centres to corroborate the self-assessment scores awarded by the centres.

This part of the process provided the Authority with the opportunity to meet and engage with key personnel involved in the provision of symptomatic breast disease services. It was an important step towards building relationships and creating a level of understanding around the standards and the processes required to enable effective monitoring of performance against them.

The National Cancer Control Programme plan specifies that all centres will be fully operational and compliant with the *National Quality Assurance Standards for Symptomatic Breast Disease* by the end of 2009. The Authority will undertake further quality assurance reviews of each designated centre during 2009 to assess whether each centre is compliant with the standards and, therefore, as effective as it should be in its provision of high quality, safe care for patients with symptomatic breast disease prior to becoming a specialist centre.

National Hygiene Services Quality Review

The Health Information and Quality Authority is committed to improving patient safety through driving continuous quality improvement initiatives throughout the health service. The reduction of Healthcare Associated Infections is an important element in this improvement process and in order to contribute to this the Authority conducted its second national review into the quality of hygiene services during 2008. This involved monitoring compliance of all 50 acute HSE and voluntary hospitals against the *National Hygiene Services Quality Review 2008: Standards and Criteria*. The assessments were conducted under section 8(1)(c) of the Health Act 2007 by a team of trained assessors who were approved and authorised under section 70 of the Act.

The standards include corporate management standards and service delivery standards encompassing a total of 56 criteria, each of which were rated by assessors on a scale from A to E.

The assessment process was conducted in three stages:

1. Off-site review of documentation submitted by the hospital along with other relevant information available
2. An on-site assessment including reviews of corporate management and service delivery standards
3. Reporting and quality review process.

In order to drive continuous improvements the assessors required evidence in support of all assertions made by hospitals. This higher standard of proof emphasises the need for accountability in the management and delivery of hygiene services.

The results of this year's review demonstrated that overall compliance with the standards and criteria had improved with a doubling of the number of A ratings when compared with 2007. The main improvement was seen in corporate management standards with the improvement in service delivery standards being less marked. Nevertheless, compliance in this area was encouraging and overall there was a strong trend of improvement in performance.

Analysis of overall criteria scores indicates that greater attention by service providers is needed on:

- collecting and reporting data and information for hygiene services
- evidence-based best practice and new interventions in hygiene services
- assessing and improving performance
- governing and managing hygiene services
- enhancing staff performance.

During the course of the assessments serious risks were identified in six hospitals and these were followed up immediately with individual hospitals by the Authority.

Reflecting the Authority's ongoing commitment to the views of patients, a patient perception survey was also conducted during the course of the assessments. The majority who took part agreed that standards of cleanliness were high overall within their hospital. Toilets and washing facilities were identified as areas that would benefit from increased frequency of cleaning. The survey also identified that about 20% of patients did not feel empowered to ask healthcare professionals to wash their hands.

Overall this review demonstrated that many hospitals have made significant improvements on their performance in 2007. In total 13 hospitals demonstrated an improvement in their overall rating while eight dropped in their overall score. The national report and the individual reports on each hospital are available from the Authority's website, www.hiqa.ie.

2.1.5 Investigations

On 2 April the Authority published the *Report of the Investigation into the circumstances surrounding the provision of care to Rebecca O'Malley, in relation to her symptomatic breast disease, the Pathology Services at Cork University Hospital and Symptomatic Breast Disease Services at the Mid Western Regional Hospital, Limerick*.

Dr Michael Durkin, Medical Director, South West Strategic Health Authority (UK) and head of the Investigation Team pictured at launch of the *Report of the Investigation into the circumstances surrounding the provision of care to Rebecca O'Malley, in relation to her symptomatic breast disease, the Pathology Services at Cork University Hospital and Symptomatic Breast Disease Services at the Mid Western Regional Hospital, Limerick*.

On 15 July the *Report of the investigation into the provision of services to Ms A by the Health Service Executive at University Hospital Galway in relation to her symptomatic breast disease, and the provision of Pathology and Symptomatic Breast Disease Services by the Executive at the Hospital*, was published.

Dr Michael Jeffers, member of the Investigation Team, Dr Tracey Cooper, Chief Executive of the Health Information and Quality Authority, and Jon Billings, Director of Healthcare Quality and Safety, Health Information and Quality Authority, pictured at the launch of the *Report of the investigation into the provision of services to Ms A by the Health Service Executive at University Hospital Galway in relation to her symptomatic breast disease, and the provision of Pathology and Symptomatic Breast Disease Services by the Executive at the Hospital*.

Following both investigations, the Authority has conducted follow-up visits to the hospitals concerned in order to assess progress with the implementation of the recommendations contained within the report.

In October 2008, the Authority published the Terms of Reference in relation to an investigation of the quality and safety arrangements at the Mid-Western Regional Hospital Ennis, pursuant to Section 9(2) of the Health Act 2007. This investigation is expected to report in the spring of 2009.

2.1.6 Promoting improvements in quality and safety

Patient safety and learning

World Health Organisation (WHO)/Health Information and Quality Authority Collaborative Project

The Authority, at the invitation of the World Health Organisation's World Alliance for Patient Safety, is leading a major project on patient safety, "When things go wrong – Driving learning while supporting patients, families and clinicians".

The project aims to develop information materials along with a set of tools and resources, which will identify best practice for communicating with and supporting patients, their families and clinicians in the aftermath of an adverse event. The ultimate aim is to facilitate more responsive, positive outcomes for both patients/carers and clinicians.

The qualitative research phase of the project took place between February and May 2008. In conjunction with eight project partners, which included hospitals and a patient representative group, a total of 23 one-on-one in-depth interviews and 12 focus groups were conducted with patients and/or their families, clinicians and healthcare providers.

The quantitative research phase of the project took place between May and December 2008 and was facilitated by seven project partners. It consisted of seven surveys, a mixture of postal and online, which explored attitudes of different relevant groups on patient safety issues.

The findings from the research will be used to inform the development of international consensus best practice, along with a set of tools and resources for supporting patients, families and clinicians in the aftermath of an adverse event.

Safe Surgery Saves Lives

Pictured at the launch of the "Safe Surgery Saves Lives" World Health Organisation initiative were Professor Frank Keane, President of RCSI, Dr Tracey Cooper, Chief Executive of the Health Information and Quality Authority, Minister of Health and Children, Mary Harney TD, and Pauline Philips, Executive Secretary, World Alliance for Patient Safety.

A core element of the work of the World Alliance for Patient Safety is the formulation of Global Patient Safety Challenges. The second Global Patient Safety Challenge focused on safe surgery.

The *Safe Surgery Saves Lives* initiative provides strategies and tools for reducing the rising incidence of deaths and complications from surgery worldwide. During 2007 and 2008, more than 100 independent global experts in surgery, anaesthetics, nursing, and other related disciplines came together to review the evidence and develop a simple strategy for safer surgery.

As partners in the World Health Organisation's World Alliance for Patient Safety project, *"When things go wrong – Driving learning while supporting patients, families and clinicians"*, the Authority coordinated the launch of the *Safe Surgery Saves Lives* initiative in Ireland and endorsements of the "WHO Surgical Safety Checklist".

The *Safe Surgery Saves Lives* initiative was launched by the Minister for Health and Children, Mary Harney TD, on 17 June 2008. A total of 55 organisations in Ireland endorsed the *Safe Surgery Saves Lives* initiative and the concept of the "WHO Surgical Safety Checklist". These included hospitals, professional associations and societies of surgery, anaesthesiology and nursing, and other interested stakeholder groups.

European Union Network on Patient Safety

The Authority is Ireland's coordinating agency in the European Union Network for Patient Safety (EUNetPaS). EUNetPaS is a project funded and supported by the European Commission within the 2007 Public Health Programme. Its purpose is to establish an umbrella network of all 27 European Union (EU) Member States and EU stakeholders to encourage and enhance their collaboration in the field of patient safety (culture, reporting and learning systems, medication safety and education).

Ireland is primarily involved in two work packages – education and training in patient safety and medication safety.

In 2008, the Authority participated in the information gathering phase of this project by contributing to the situation analysis through identifying best practice in patient safety education and training programmes in jurisdictions outside of Europe to inform the work of WP2.

Quality and safety framework

Over the last number of decades the quality and safety of our health and social care services has increasingly become one of the main priorities of policy makers, clinicians, patients and users of services, politicians and providers. There are numerous well-known and widely accepted factors behind this increased awareness and attention to quality and safety, including concerns regarding patient safety, variations in the quality of service delivery across different services, rising costs, higher expectations of citizens, inequalities and examples of poor quality service delivery.

Throughout the year the Authority continued with its research into the development of its approach to driving quality and safety of healthcare. The Authority has continued to foster links with regulatory agencies in other jurisdictions. This includes participating in the "Five Nations" healthcare regulatory group that incorporates Ireland, England, Scotland, Wales and Northern Ireland.

Building a Culture of Patient Safety: the Report of the Commission on Patient Safety and Quality Assurance contains several key recommendations for the Authority. One of the recommendations made by the Commission is that the Authority will be assigned a licensing function for public and private healthcare.

The Authority has drafted a quality and safety framework which will form the new performance framework for all health services in Ireland. It sets out the shift to a new system that will drive improvements across all services.

In line with its statutory remit to develop standards, the Authority will develop a set of generic standards outlining what service users can expect from health and social care services. The framework document will also set out the proposed monitoring and enforcement system to ensure that standards are achieved and the quality of service delivery improves over time.

Medication safety forum

In keeping with its role as national contact point for part of EUNetPaS, and the recommendations of the Commission on Patient Safety and Quality Assurance regarding the establishment of better communication structures between organisations involved in the area of medication safety, the Authority facilitated a national high level multi-agency/ stakeholder exploratory consultation on medication safety in October 2008.

Representatives from appropriate national stakeholder groups and agencies in the area of medication safety attended and contributed to the consultation. The forum was a workshop format with attendees presenting on relevant topics in the area of medication safety and subsequent group discussion of these issues.

Accreditation programme

Prior to the establishment of the Authority, the former Irish Health Services Accreditation Board had 42 acute hospitals participating in an accreditation programme. The Authority undertook to continue with any ongoing accreditations to the middle of 2008 and these were completed. This was so that the work done by hospitals in preparing for accreditation continued to build and most importantly to maintain momentum in quality improvement activity within the health service.

The experience and learning from the hospital accreditation programme has proven invaluable as the basis for building the Authority's new approach to assessing healthcare providers against standards.

2.2 Report of the Office of the Chief Inspector of Social Services/ Social Services Inspectorate

2.2.1 Background

The Health Act 2007 places the Social Services Inspectorate (SSI) within the Health Information and Quality Authority on a statutory basis as the Office of the Chief Inspector of Social Services with specific statutory functions. Throughout 2008, the SSI continued to inspect residential care services for children and other services for children in care while preparing for the commencement of inspection and registration of residential services for older people and people with disabilities. The sections of the Health Act 2007 that confer these functions on the SSI will be enacted on a phased basis.

2.2.2 Children's Inspection Team

The Children's Inspection Team had an allocation of 5.0 whole time equivalent (WTE) inspector posts in 2008. The staff complement for the Children's Inspection Team was reduced in 2008 due to work commitments in other areas of the SSI.

2.2.3 Activity

There were 75 fieldwork visits to 62 children's residential centres in 2008. Written reports on these inspections and updates on the status of implementations by the HSE are published on the Authority's website, www.hiqa.ie. Detention schools were inspected by the Children's Inspection team for the first time in 2008. Preparation for the inspection of detention schools required inspectors to become familiar with new standards. The findings from the inspection of detention schools will be published on the website in early 2009. The type of centres and the inspections performed are shown in the table below.

Table 1: Type of centre and type of inspection performed in the 62 centres

Centre	Type of inspection	
	Full inspection	Follow-up inspection
Children's residential centre	29	22
High support unit	6	-
Special care unit	3	-
Detention schools	2	-
Total	40	22

In addition to the inspection of the above centres there was an inspection of a HSE foster care service responsible for foster care in HSE Dublin South West local health area. This inspection involved significant fieldwork interviewing children, foster carers, social workers, birth parents and HSE management. The inspection findings are available on the website, www.hiqa.ie. Key findings from inspection reports are highlighted below:

Key findings:

- The number of children aged 12 and under in care has decreased from 93 in 2006 to 64 in 2008.
- Primary care services for children in care are generally very good.
- Attendance at education for children in care is generally good.
- A high proportion of recommendations made following the inspection of services for children in residential care related to the Health Service Executive management and planning of services.

Other activities of the Children's Inspection Team included guest lectures and participation in working groups in the areas of: child protection, children's rights, standards for services to people with disabilities and therapeutic interventions.

2.2.4 Preparation for the commencement of functions – registration and inspection of residential centres for older people

In 2008, the strategic and operational work of the Social Services Inspectorate Directorate centred on preparing for the registration and inspection of residential services for older people and residential services for people with a disability while continuing with the inspection of children's residential care centres, foster care services and detention schools.

2.2.5 Staffing and recruitment

In preparation for the commencement of registration and inspection of residential centres, preparatory work has been carried out for the recruitment of inspectors and support staff and those inspectors who meet the requirement for transferring from the HSE Inspectorate.

Inspection staff will be in place for the commencement of the inspection function. In order to facilitate new staff entering the organisation and those transferring from the HSE, systems, policies and procedures have been put in place including: staff orientation, induction, probation, supervision and support and home-working arrangements. In addition, a tender for training has been awarded to a company to provide training for inspectors and regulatory support staff.

2.2.6 Methodology for the inspection and registration of residential centres

The SSI Directorate has developed a range of methodological tools to carry out its regulatory functions in line with legislative requirements.

2.2.7 Operations

An Operations Working Group was established to determine structures and processes within and across the SSI, inspectorate.

A national management structure has been devised for the operational management of the SSI, and processes for the registration and inspection of designated centres are being developed.

2.2.8 Information technology and information systems

Information systems are in process of development for the collection and collation of information to support the registration and inspection processes. A Regulatory Support System (RSS) and a working prototype are in process of development to support the working processes for registration and inspection. In addition, a risk assessment tool was developed to assist in the scheduling of registration and inspection functions.

An annual return to collect and collate data from nursing home providers has been circulated. This data will be analysed and information will be available in 2009.

2.2.9 Standards

Throughout 2008 work continued on *National Quality Standards for Residential Care Settings for Older People in Ireland,* and *National Quality Standards: Residential Services for People with Disabilities*.

2.2.10 National Quality Standards for Residential Care Settings for Older People in Ireland

The draft *National Quality Standards for Residential Care Settings for Older People in Ireland* were approved by the Board of the Authority and were officially published and launched in March 2008. Managers and owners providing services in the public, private and voluntary sectors reported on the way care is provided against the standards and reports of improvements have been made.

Dr Tracey Cooper, Chief Executive with Dr Marion Witton, Chief Inspector of Social Services, at the launch of the draft *National Quality Standards for Residential Care Settings for Older People in Ireland*, in March 2008.

The Department of Health and Children has undertaken a Regulatory Impact Assessment in relation to the implications of these standards and work has begun on the drafting of regulations for the registration and inspection of residential care centres for older people.

2.2.11 National Quality Standards: Residential Services for People with Disabilities

In November 2007, the Authority established a Standards Advisory Group to develop standards for residential centres for people with disabilities. The Advisory Group comprised service users and representatives from the Department of Health and Children, the HSE, voluntary groups and the Health Information and Quality Authority. The Standards Advisory Group met bi-monthly and draft standards were produced for public consultation. The draft standards document was distributed to a wide range of people for written feedback. In addition to this a number of facilitated discussions took place on a national basis to give a wide range of people an opportunity to review and give feedback on the draft standards.

Together with written feedback, the outcomes of the facilitated discussions were compiled to form a composite report, which informed the final standards document.

2.2.12 European Conference on Enhancing the Quality of Social Care Services

In December 2008 the Health Information and Quality Authority jointly hosted a European conference titled "Enhancing the Quality of Social Care Services" with the Council of Europe.

The conference was well attended with representatives from 27 countries attending and provided a forum for the sharing of information and good practice. The conference was supported by a wide range of national and international speakers. Feedback received in relation to the conference was very positive.

Pictured from left: Alexander Vladychenko, Director General of Social Cohesion, Council of Europe; John Moloney TD, Minister for Equality, Disability and Mental Health in the Department of Health and Children; Dr Tracey Cooper, Chief Executive, Health Information and Quality Authority; Dr Marion Witton, Chief Inspector of Social Services, Health Information and Quality Authority; and Pat McGrath, Chairperson, Health Information and Quality Authority.

2.2.13 Other activities

Throughout the year, staff of the SSI Directorate were involved in activities that promoted and supported the work of the Directorate including: giving guest lectures and presentations to various groups, participating in working groups, engaging with service providers in the public, private and voluntary sectors, and networking with peers in other jurisdictions through the Celtic Network.

2.3 Health Information

2.3.1 Background

Timely, accurate and comprehensive information on the availability, accessibility, effectiveness and efficiency of our health services is fundamental to a reliable and safe healthcare system. Having good information and using it well are key to good decision making ultimately leading to improved services. While there are many strengths within the system, and current pockets of excellence, the overall picture is fragmented with lack of standards and critical gaps.

The Health Information Directorate is responsible for analysing the existing quality and coverage of health information, identifying gaps and making recommendations to fill those gaps. Putting in place standard definitions for information to ensure meaningful comparability and avoid duplication of effort is an important part of the Directorate's work. Equally important are standards to support the interoperability of health information systems in order to facilitate efficient sharing of health information across the sector.

Central to a robust health information system is a framework for information governance which establishes how information is to be shared securely and safeguarding confidentiality. A key element of this framework will be the proposal for the introduction of a unique patient identifier (national health identifier) which is critical to patient safety and has important implications for the ease with which information can be shared between healthcare providers.

2.3.2 Baseline of priorities

The main focus in 2008 has been the establishment of the Health Information team. Ten well qualified individuals with diverse experience in areas related to health information have been recruited. The Directorate is now in a position to start delivering on the major objectives of the Corporate Plan.

2.3.3 Activities during 2008

National Health Information Strategy

In April 2008, the Department of Health and Children established the Health Information Inter-Agency Group (HIIAG) with representation from the Department, the HSE, the Authority and the National Cancer Registry. The Health Information Directorate has thus been working with the HIIAG to review and update the National Health Information Strategy clarifying roles and responsibilities. In broad terms, the Department is responsible for policy and legislation, the Authority for standards and monitoring, and the HSE for implementation.

International approaches to health information

The Health Information Directorate has continued the consultation process with equivalent organisations in a number of countries particularly in the area of health information standards. The plan is to identify best practice and learn from experience elsewhere.

Health Information Bill

The Health Information Bill, which is currently being developed by the Department of Health and Children, is a critical piece of legislation which will establish the legal framework to enable the Health Information and Quality Authority to fulfil its statutory obligations in relation to health information. The Health Information Directorate has been actively contributing to the framing of the Bill.

Unique health identifier

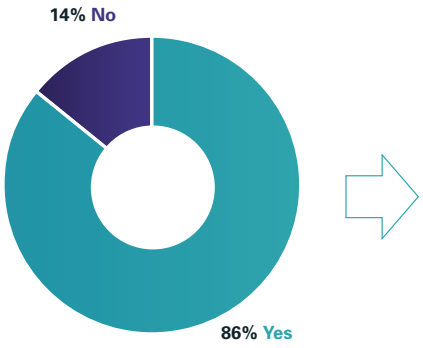
One of the major deficiencies in the national health information infrastructure is the absence of a unique health identifier for individuals. The Health Information Directorate has been working with the HSE on developing a proposal for the introduction of a unique health identifier, the legal framework for which will be established as part of the Health Information Bill.

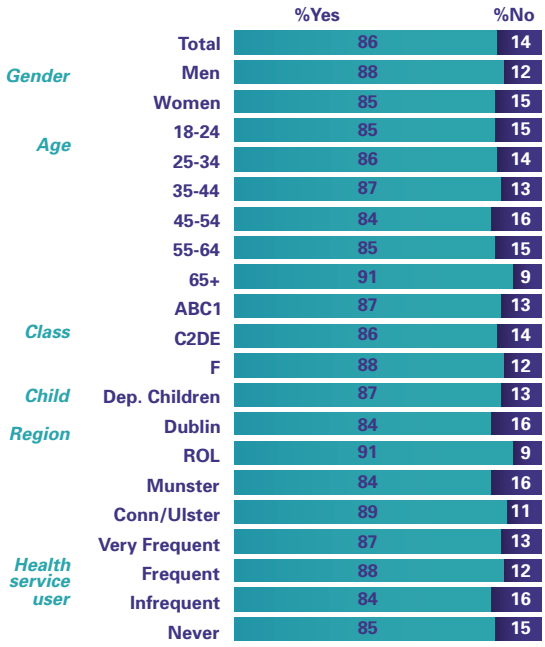
Public attitudes to sharing health information

During 2008 the Health Information and Communications Directorates of the Authority commissioned a public opinion poll conducted by RED C to ascertain public attitudes to sharing personal health information. In summary, the results showed that there is overwhelming support for such sharing even where the goal is to monitor and improve quality of care for the population as a whole rather than for the individual.

Amongst the questions asked in the RED C poll were: do you think all your medical information, from different sources, should be linked up to improve patient care and safety? Here is what people thought:

(Base: All Adults – 1002)





Most people think that medical information from different sources should be linked up. This is especially the case for very frequent and frequent users of health services, and for those in older age groups

These graphs are an extract from the published results of the public opinion poll on the sharing of health information. The poll focused on people's views on the use of their personal health information to improve patient safety and care, and revealed that most people in Ireland (86%) believed that their health information should be linked up across the health system.

Information standards

The Authority has established a national steering group comprising representatives from the Authority, HSE, Department of Health and Children and National Standards Authority of Ireland to progress the development of national standards for health information covering all aspects from data definitions, key performance indicators, minimum data sets, terminology and coding, messaging standards and in due course the electronic health record. The priorities established in 2008 include general practitioner (GP) messaging and picture archiving and communication systems (PACS). The approach is to adopt international standards wherever possible. In addition the Authority is collaborating with a number of agencies to establish minimum data sets for various agencies including patients with stroke and cancer.

National Health Data Dictionary

The Authority plans to establish and maintain a web-accessible National Health Data Dictionary which will contain standardised definitions of all key indicators and minimum data sets. Work on scoping the Dictionary was completed during 2008.

Emergency departments

The Health Information and Healthcare Quality and Safety Directorates undertook an analysis of the published data on waiting times in emergency departments and identified a number of deficiencies in the current system. The Authority has started working with the relevant stakeholders to establish a meaningful set of indicators for emergency departments in Ireland.

2.4 Health Technology Assessment Directorate

2.4.1 Background

The Health Information and Quality Authority is the statutory organisation in Ireland with a remit to carry out national health technology assessments (HTAs) and to develop standards for the preparation of these HTAs across our health system.

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

For the first time in Ireland, the function of health technology assessment is established on a statutory basis and within an overall regulatory structure. Many of the aspects of HTA are new to Ireland and are being developed in line with national and international practice. The HTA Directorate of the Authority is working with stakeholders to support the development of a quality framework for HTA, develop capability and promote high quality assessments of technology, independently undertake HTAs that have a national implication, and meet the gaps in HTA across the system.

2.4.2 What is health technology assessment?

HTA entails the systematic and objective evaluation of the clinical and cost-effectiveness of new technologies, taking into account social, organisational and ethical issues among other factors. The term "technology" includes drugs, medical equipment, diagnostic techniques, surgical procedures and public health programmes such as cancer screening programmes. This information is for use by the public, service providers and other key stakeholders such as the Department of Health and Children and the Government.

The main issues investigated as part of any HTA are:

- Does the technology work?
- For whom does it work?
- What is the benefit to the patient?

- At what cost?
- How does it compare to the alternatives?

2.4.3 Activities during 2008

Developing health technology assessment processes

A priority for the Directorate in 2008 was to continue its development of processes and systems to support the work of the Directorate and to help govern the management of its projects. To this end, a quality assurance framework was agreed and implemented within the Directorate in 2008 to direct and control its activities. A range of procedures have been developed including procedures for convening and running advisory groups, as well as procedures for the identification and prioritisation of HTA topics.

The Authority has a statutory remit to develop standards and guidelines for the preparation of HTAs across the health system. To assist in this process, a Scientific Advisory Group was established by the Directorate in 2008. This group is made up of methodological experts representing key stakeholders in the Irish healthcare system that are involved in the conduct or use of HTA. The group also includes international experts in HTA, patient and public representatives. The role of the group is to provide expert, technical and scientific advice to the Authority in the development of its methodologies for HTA in Ireland.

The development of national guidelines for the conduct of economic assessments was identified as the first priority for this group. The group met a number of times during 2008 and a set of draft guidelines were developed. It is anticipated that these economic guidelines will be finalised by mid 2009.

Health Technology Assessment Directorate structure

Following some progress, the proposed staffing structure for the Directorate is still to be finalised. It is hoped that agreement on this structure can be obtained during 2009 so that recruitment of these key roles can commence. This is recognised by the Authority as being a priority concern, as completion of key objectives in 2009 is dependent on having a substantive multidisciplinary team in place equipped with the necessary expertise.

Health technology assessment capacity building

The discipline of HTA is relatively underdeveloped in Ireland, therefore it is important that expertise in this field is developed. In recognition of this, the Authority is co-funding a three-year PhD fellowship programme at the National Centre for Pharmacoeconomics with the aim of building skill sets for HTA conduct and interpretation. The Directorate has also worked with external stakeholders in the planning of training and education for individuals in the HTA area. This includes a potential mentoring role for PhD students recruited to a fellowship programme in health economics developed by the Health Research Board and the National Cancer Institute in the United States.

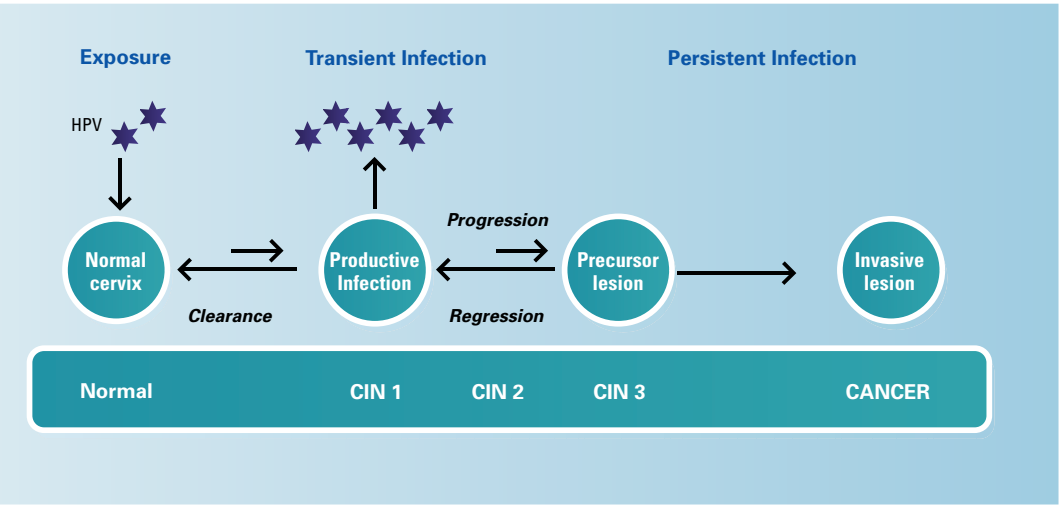
Stakeholder engagement

An extensive programme of meetings with policymakers, service providers, clinicians, patient groups, academics and the pharmaceutical and technology industries took place during 2008 with the aim of informing priorities and developing a framework for the HTA function. A priority for the Directorate is to promote the use of HTA to inform local-level decision making within the health services. To this end, the Directorate has worked with members of the Health Service Executive (HSE) to develop and pilot a mini-HTA tool to be used by health service providers.

Health Technology Assessment of the Role of Human Papillomavirus (HPV) Vaccines in Reducing the Risk of Cervical Cancer in Ireland

The Health Act 2007 states that one of the functions of the Health Information and Quality Authority is "to evaluate the clinical and cost effectiveness of health technologies including drugs and provide advice arising out of the evaluation to the Minister and the Executive". In July 2007, the Authority agreed to undertake a health technology assessment on the role of vaccination against human papillomavirus (HPV) in reducing the risk of cervical cancer in Ireland in response to a request by the National Cancer Screening Service.

Cervical cancer is the eighth most frequently diagnosed cancer in women in Ireland. In 2004, 200 women were diagnosed with cervical cancer in Ireland, with more than 90 women dying from the disease. On average, these women are 56 years old at the time of death, and 44 years at the time of diagnosis. Infection with the HPV infection is the main cause of cervical cancer, without which cervical cancer does not arise. Vaccination against HPV therefore represents a new opportunity to reduce the incidence of and mortality associated with cervical cancer.



The natural history of cervical cancer, an extract from *The Role of Human Papillomavirus Vaccines in Reducing the Risk of Cervical Cancer in Ireland: A Health Technology Assessment*. CIN (cervical intraepithelial neoplasia) is a condition of the cervix, in which abnormal cells are present on the surface of the cervix. Over time, these cells may become cancerous. CIN is classified as 1, 2 or 3, depending on its severity.

The purpose of this assessment was to establish the cost-effectiveness of a combined national HPV vaccination and cervical cancer screening programme compared to a cervical cancer screening programme alone in the prevention of cervical dysplasia (the condition that can lead to cervical cancer) and cervical cancer due to HPV types 16 and 18 in Ireland.

The completed report was submitted to the Minister for Health and Children, the National Cancer Screening Service Board and the National Immunisation Advisory Board on 25th February 2008, and was subsequently published on 4 June 2008. The advice provided to the Minister arising out of this study was that vaccination of 12-year-old girls against HPV strains 16 and 18 in the context of a national screening programme for cervical cancer would be cost effective compared to screening alone. A once-off catch-up programme for girls aged 13 to 15 years old in the first year could also be considered to be potentially cost effective when compared to other technologies that have been recommended and approved for reimbursement in the Irish healthcare system.

A health technology assessment of a population-based colorectal cancer screening programme in Ireland

Colorectal cancer is the second most commonly diagnosed cancer in Ireland in both men and women. In 2005, over 2,100 new cases of colorectal cancer were diagnosed and over 950 deaths reported, accounting for more than 12 percent of all cancer deaths. Screening for colorectal cancer reduces both the relative risk and the mortality of colorectal cancer by allowing the identification and removal of precursor lesions and by the detection of malignancies at an earlier, more treatable stage.

In November 2007, the Authority invited proposals for a HTA to examine the cost effectiveness, ethical and resource implications of a population-based colorectal cancer screening programme in Ireland. This HTA, which is being undertaken by the Authority in response to a request from the National Cancer Screening Service, will inform advice to the Minister for Health and Children on the likely impact of such a programme on healthcare resources and on morbidity and mortality from colorectal cancer in Ireland.

Following a competitive tender process initiated in November 2007, the Authority appointed a multidisciplinary team in February 2008, led by the National Cancer Registry, to conduct the HTA on its behalf. This was managed by the HTA Directorate within the Authority. The team included

groups from the National Centre for Pharmacoeconomics in Dublin, the School of Health and Related Research (ScHARR) at the University of Sheffield, and Dublin City University. These groups had extensive experience in economic modelling, health technology assessment and health services research.

To lead and oversee the process, and to advise the Authority, a multidisciplinary Expert Advisory Group was convened in accordance with defined terms of reference. This group includes both public and patient representatives. Dr Deirdre Madden from the Department of Law, University College Cork, agreed to provide the ethical commentary for the report.

This project represents an extensive and highly complex piece of work. Substantial progress was made during 2008, and it is anticipated that a report will be finalised by the Authority in March 2009, following completion of the assessment.

International networks

European network for Health Technology Assessment (EUnetHTA)

The Authority is an Associate Partner in the EUnetHTA Project which links 63 HTA partners from 32 countries. The overall aim of EUnetHTA is to establish an effective and sustainable European network for health technology assessment with the objectives of reducing overlap and duplication of efforts, increasing HTA output and strengthening the link between HTA and healthcare policy making in European and member states.

During 2008, as well as participating in the assessment of other programmes of work, the Authority actively participated and contributed to EUnetHTA project.

Health Technology Assessment International (HTAi)

Health Technology Assessment International is the international professional society that focuses specifically on HTA and embraces all those who do and use it, whether in academic institutions, healthcare facilities, industry, business, the voluntary sector, or government. The Authority submitted an initial bid to host the annual HTAi conference in

Dublin in 2010, and this bid was accepted by the organisation in 2008. This highly prestigious event within the HTA community is expected to attract some 1,600 delegates to Dublin in 2010 and represents a major tourism opportunity for the city. The conference will enable the Authority to foster key relationships with its international counterparts and will facilitate in the development and exchange of HTA knowledge.

The International Information Network on New and Emerging Health Technologies (EuroScan)

The International Information Network on New and Emerging Health Technologies (EuroScan) is a collaborative network of member agencies for the exchange of information on important new and emerging drugs, devices, procedures, programmes, and settings in healthcare. These technologies are identified on the basis that they are expected to have a significant impact on healthcare planning and resources within a three-year timeframe.

The aim of this group EuroScan is to establish a permanent network among agencies and organisations involved in early awareness and alert activities to:

- evaluate and exchange information on new and emerging health technologies
- develop the sources of information used
- share applied methods for early assessment
- disseminate information on early identification and assessment activities.

The Authority applied, and was accepted, for membership of this network in 2008. Development of robust systems which identify new and emerging technologies will enable the Directorate to respond to these in a timely manner prior to their diffusion within the health system. Additionally, it enables the Authority to exchange early warning information with key stakeholders to facilitate timely and efficient identification of technologies that may become a focus for assessment.

2.5 Communications and Stakeholder Engagement

2.5.1 Background

The Communications and Stakeholder Engagement Directorate is responsible for ensuring that all communications within the Authority, both internal and external, are consistent, effective and public-friendly. It is responsible for establishing a clear awareness of the Authority and its role amongst the general public and proactively managing the communication with all of the Authority's stakeholders.

The Directorate is responsive to all the communications needs of each of the other Directorates within the Authority and provides a comprehensive communications service to support the drive to create sustainable improvements in the quality and safety of health and social services in Ireland.

In 2008 the Authority published its first communications strategy which outlines the key areas of responsibility of the Directorate.

During 2008, the Directorate established eight core functions to meet the communications needs expressed in the Communications Strategy, which is also in line with the *Corporate Plan 2008 – 2010*. These functions include: press and media relations; public and parliamentary affairs; direct stakeholder engagement; corporate reputation management; internal communications; publishing and publications management; event management; and management of the Authority's website and Intranet.

2.5.2 Activities summary

Establishing and maintaining a positive independent voice for the Authority through the media is one of the key components utilised by the Authority to engage directly with stakeholders. The Authority's press relations are managed by the Communications and Stakeholder Engagement Directorate, in close collaboration with other Directorates, to generate balanced and fair media coverage which targets key messages on the role, remit and functions of the Authority.

The Authority is proactive with the media through the issuing of press releases and the publication of reports, which state the position of the Authority and reiterate the role and remit of the Directorates.

Throughout 2008, the Communications and Stakeholder Engagement Directorate held regular press briefings, updating media on the work of the Authority. Activities also included meetings with journalists, press conferences, interviews, the issuing of 24 press releases and the publication of the following reports:

- **11 March 2008:** The draft *National Quality Standards for Residential Care Settings for Older People in Ireland*
- **02 April 2008:** *Report of the Investigation into the circumstances surrounding the provision of care to Rebecca O'Malley, in relation to her symptomatic breast disease, the Pathology Services at Cork University Hospital and Symptomatic Breast Disease Services at the Mid Western Regional Hospital, Limerick.*
- **03 June 2008:** Draft Infection Prevention and Control Standards – A Consultation Document
- **03 June 2008:** *Guide to the Draft Infection Prevention and Control Standards: A Consultation Document*
- **04 June 2008:** *The role of Human Papillomavirus Vaccines in Reducing the Risk of Cervical Cancer in Ireland: A Health Technology Assessment*
- **25 June 2008:** *Annual Report 2007*
- **10 July 2008:** *STARSweb: Evaluation Project*
- **15 July 2008:** *Report of the investigation into the provision of services to Ms A by the Health Service Executive at University Hospital Galway in relation to her symptomatic breast disease, and the provision of Pathology and Symptomatic Breast Disease Services by the Executive at the Hospital*
- **August 2008:** *Code of Governance Manual*
  Corporate Plan 2008 to 2010
  Business Plan 2008

- **16 September 2008:** *Draft National Quality Standards: Residential Services for People with Disabilities*
- **22 December 2008:** *National Hygiene Services Quality Review 2008*
- **22 December 2008:** 50 individual hospital reports on National Hygiene Services Quality Review 2008

All these publications and the press releases issued are available on the Authority's website, www.hiqa.ie.

The Authority responded to all parliamentary questions received in a timely and efficient manner. A protocol was implemented across all Directorates to ensure this process is continued and a process for the efficient and effective engagement in consultation with key stakeholders was introduced. The Authority presented to the Oireachtas Joint Committee on Health and Children three times during the year, on the draft standards for residential services for older people, draft standards for residential services for people with disabilities and also on services in primary care.

In association with the Heath Information Directorate, the Authority conducted an opinion poll on the public's support for the sharing of health information and also made a submission on the proposed Health Information Bill.

Significant progress was made in establishing best practice processes for internal communications, making best use of internal communications channels, which include an online staff newsletter, a dynamic Intranet and the development of a pathway for the effective exchange of relevant information.

The Directorate, in conjunction with the Social Services Directorate, also managed the hosting of an international conference on enhancing social services, in Farmleigh House on 9 December.

2.6 Corporate Services

2.6.1 Background

The Authority aspires to be a fit-for-purpose, effective and well governed organisation. It recognises that this requires infrastructure, systems and processes that support and enable its staff to deliver the objectives of the Authority. The Corporate Services Directorate has focused on putting in place the core elements of this platform.

2.6.2 Human resources

During 2008 a Human Resources function was established by the Authority. The major focus for the department was on recruitment and selection. This included setting up procedures compliant with codes of practices set by the Commission for Public Service Appointments, working with the Public Appointments Services, training of staff as well as carrying out many competitions.

The induction of new staff and the integration and support of staff that transferred from the previous organisations were other key activities of the department.

2.6.3 Financial management

Financial processing and reporting which had been contracted out to an external firm during the start up period of the Authority, was brought in-house. Provision of an efficient payroll service was tendered and the contract awarded to a specialist bureau. Work continued on developing the budgetary system for the Authority's management to enable management with an amended scheme of delegation as key appointments were made within the organisation.

2.6.4 Corporate governance

The Authority is committed to meeting best practice in the area of corporate governance standards, practices and procedures, in the interests of transparency and accountability. During the year it adopted a *Code of Governance Manual* which was informed by the *Code of Practice for the Governance of State Bodies*.

A table of actions to ensure its implementation was developed and those actions were monitored to achieve adherence to the code. Following a tendering process, the Authority appointed a firm to act as its internal auditors. Initial audit work included a review of the governance as well as the commencement of the development of a risk management framework for the Authority. Further audits are to be undertaken in the area of financial controls and procurement.

An Audit and Corporate Governance Committee has been established whose primary function is to advise the Board of the Authority on the robustness and effectiveness of the arrangements and status of the corporate governance, financial management, risk management and internal audit. In addition, a number of other committees have been established which provide assistance to the Board in relation to the performance of its functions, including a:

- Audit and Corporate Governance Committee
- Health and Social Care Governance Committee
- Research Committee
- Remuneration and Nominations Committee.

2.6.5 Corporate Plan

The Authority engaged in a major consultation process with stakeholders during the year in developing its draft *Corporate Plan 2008 to 2010*. The plan was developed following the consultation process and analysis of the health and social care environment in which the Authority operates. This was submitted to the Minister for Health and Children in November 2007. Following this, a detailed *Business Plan 2008* was developed and adopted which outlined the core business objectives to be achieved during the year. Both documents are available on the Authority's website, www.hiqa.ie.

On establishment, the Authority acquired the offices of the integrating organisations in Dublin and also acquired offices on a short-term basis in Dublin. Working with the Office for Public Works, the Authority procured, fitted out and successfully moved into a single building in Dublin in

December 2008. The headquarters of the Authority are in Cork. During 2008 the Authority procured suitable permanent accommodation in Cork and substantial work was carried out to enable a move into this early in 2009.

2.6.6 Information systems

The efficient use of information is critical to the success of the Authority. During 2008, the Authority put in place a number of the key elements of its information and communications infrastructure. An information governance model was developed to ensure that the governance of information systems aligns with the objectives of the Authority. The information and communications technology infrastructure was enhanced and upgraded to support the growth of the Authority and a virtual private network and video conferencing equipment were commissioned to enable the most efficient and cost-effective method of communication for the Authority.

2.6.7 Health and safety

This is an issue which is taken most seriously within the Authority. The Authority has adopted a Health and Safety Statement. A Health and Safety Committee has been established and meets regularly. The Committee oversees the implementation of health and safety policy within the Authority.

2.6.8 Freedom of Information

The Health Information and Quality Authority is subject to the Freedom of Information Acts 1997 and 2003. These Acts provide a legal right to individuals to obtain access to information held by public bodies, to the greatest extent possible consistent with the public interest and the right to privacy. However, the Act provides strong protections for individuals or bodies who supply information to the Authority that is personal, confidential or commercially sensitive.

Further information on the implementation of Freedom of Information at the Authority is available from the Freedom of Information Officer, Health Information and Quality Authority, George's Court, George's Lane, Smithfield, Dublin 7 and is also available on the Authority's website, www.hiqa.ie.

2.7 Research

2.7.1 Background

The Authority has a very wide remit and it is important that this work is informed by relevant research. In 2006, the former interim Health Information and Quality Authority undertook an open competitive process from which a number of research projects were identified for funding. The Authority has committed to resourcing these projects which will inform the work of the Authority as it develops. These projects relate to key functions of the Authority and reflect its diverse remit, including research in such areas as cancer screening, general practice, the disability sector and health information. They include:

- A user-configurable national electronic health record: technological assessment of the EHRcom standard for Ireland
- Developing the optimal strategy and tools for creating and implementing a colorectal cancer screening programme: a programme to assess and develop capacity and capability in a national treatment centre
- Developing quality indicators for use in general practice in Ireland
- Morbidity and epidemiology in general practice in Ireland
- Critiquing the involvement of service users in monitoring/inspecting of services for people with a disability.

3 Financial Information

3.1 Financial Statements

The summarised financial information set out in this report does not constitute the Authority's accounts for the period ended 31 December 2008 as required by Section 35 (4) of the Health Act 2007. The information here is derived from draft accounts. At the time of publishing this Annual Report, these accounts have not been audited by the Comptroller and Auditor General.

Summarised Income and Expenditure Account
Year ended 31 December 2008

	€'000
Income	
Department of Health and Children	14,800
Other income	188
Total income	**14,988**
Expenditure	
Investigations and professional fees	2,256
Staff costs	6,497
Travel and subsistence	475
Research and dissemination	918
Recruitment	637
Support and establishment	2,491
Total Expenditure	**13,274**
Excess of income over expenditure	1,714
Opening reserves	(1,149)
Closing reserves	**565**

Summarised Capital Account
Year ended 31 December 2008

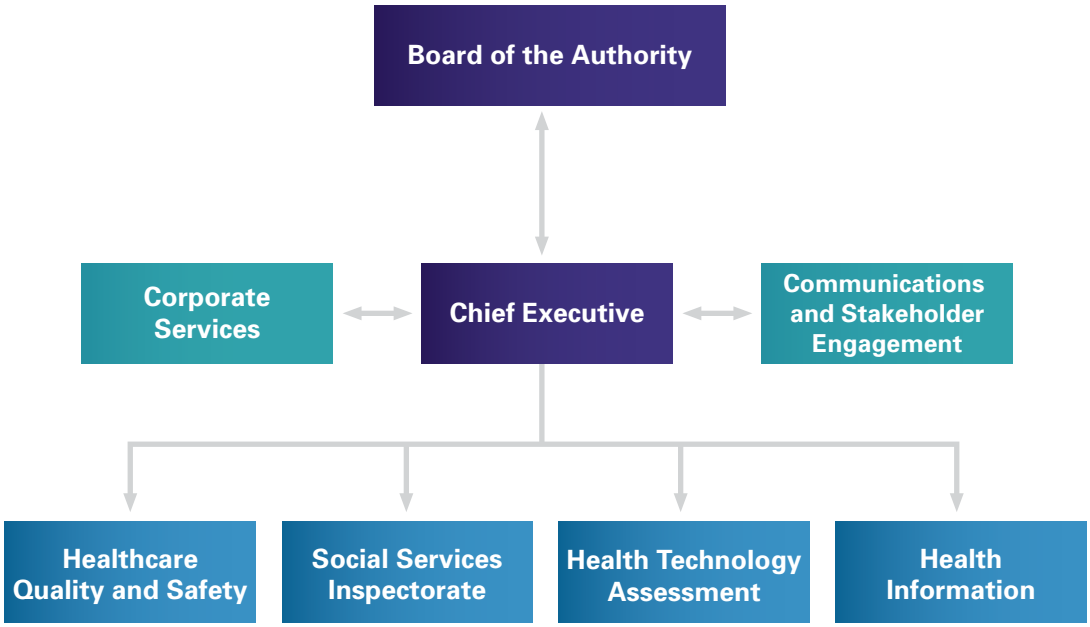
	€'000
Income	
Department of Health and Children	2,316
Expenditure	
Capital expenditure	(2,476)
Excess of expenditure over income	160
Opening reserves	132
Closing reserves	(28)

For further information, the full accounts for the period ended 31 December 2008 and the Comptroller and Auditor General's certificate for the accounts should be consulted once available. When these are ready copies of these accounts can be obtained from the Authority's Head Office in Cork.

4 Appendices

Appendix 1

Organisation Structure



Health Information and Quality Authority
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