

Photocall — National Patient Experience Survey visit to Tallaght Hospital



Our CEO Phelim Quinn pictured with staff in Tallaght Hospital, Dublin, during a visit to promote the National Patient Experience Survey — which we have had a phenomenal response to. See further details in this issue.

Message from the CEO



High-quality health and social care depends on routinely having good access to high-quality and timely information on which to base decisions. Our health information and health technology assessment teams are helping to lay strong foundations for building a culture of informed decision-making in our health and social services.

Hearing the voice of patients and other people who use services is of course crucial to decision-makers. The first ever National Patient Experience Survey was conducted in May of this year, with the deadline for people to return the survey closing on 26 July 2017. We have had an overwhelming response from patients, with the survey rate now standing at 50%.

I would like to convey a huge thank you to all who gave their time to try to help us to improve services for others. We will be reporting on the outcomes of the survey later in the year. Our Health Technology Assessment (HTA) team has meanwhile started work on its HTA looking at extending the Human Papillomavirus (HPV) immunisation programme to boys.

We also report on the work of our Collaboration in Ireland for Clinical Effectiveness Reviews (HRB-CICER) team within our HTA directorate. Also in this issue of *HIQA News*, we also catch up with the work of our teams in healthcare, children's services, standards and health information, nursing homes and residential services for people with disabilities.

We do not take for granted the help and support we receive from people using and providing these services. In preparation for new statutory regulation of children's residential centres across Ireland by HIQA, our Standards team have been working with many of our stakeholders on developing new National Standards for these children's centres.

Since the last issue of *HIQA News*, we have continued to work with our partners on the National Safeguarding Committee in raising public aware of adult safeguarding issues. We continue to press for adult safeguarding legislation and as such will be making a submission to the Law Reform Commission to influence the inclusion of work on such legislation into its new work programme.

Until next time, best wishes.

Phelim Quinn

The National Patient Experience Survey Programme



Rachel Flynn from HIQA (third from right) visited Mallow General Hospital where she met with staff to promote the National Patient Experience Survey

We wish to sincerely thank all those patients and their families who took the time to tell us about their experience while in hospital through the 2017 National Patient Experience (NPE) Survey.

The 2017 NPE Survey is now closed. In total 27,140 eligible patients had been invited to participate, and of those, we currently have a response rate of 50% — a significant response rate for such surveys.

The NPE Survey team will now analyse the responses, and a national results' report will be published towards the end of the year, in addition to six hospital group reports and 39 individual hospital reports.

All reports will be published on our website and on www.patientexperience.ie.

We will use the responses to inform our programme of regulation. The HSE will use the responses to improve the quality of patient care, while each hospital will develop a quality improvement plan based on the responses.

These quality improvement plans will be published early next year on www.patientexperience.ie. Finally, the Department of Health will use the findings to inform national policy and legislation.

Please follow us [facebook](#) and [Twitter](#) to keep up to date with the NPE Survey's progress.

Works starts on HTA of extending HPV vaccination to boys



Our Health Technology Assessment (HTA) team has begun its HTA on extending the Human Papillomavirus (HPV) immunisation programme to include HPV vaccination of boys.

Currently, Ireland has a nationally funded, school-based, girls-only HPV vaccination programme. The aim of our HTA is to investigate the clinical- and cost-effectiveness of expanding this programme to include boys.

The budget impact and resource implications of such a development will be assessed, along with the wider implications of any proposed change to the vaccination programme — including its ethical and social implications.

[Watch our questions and answers on HPV vaccination of boys.](#)

Update from our HRB-CICER team

The Collaboration in Ireland for Clinical Effectiveness Reviews (HRB-CICER) team within our Health Technology Assessment (HTA) directorate is supporting the Childbirth Guideline Group.

It is developing guidelines for classifying risk during pregnancy and is developing part of the clinical evidence base to support a clinical guideline on undernutrition in acute hospitals.

The CICER team continues to provide health economic assistance to the guideline development group for Type 1 diabetes in adults.

Meanwhile, the National Clinical Guideline on Hepatitis C Screening — which received assistance from our HTA team — was launched on [World Hepatitis Day on 28 July](#).

National standards for children's residential centres



We are currently developing draft national standards for children's residential centres as new regulations will extend our remit to include the registration and inspection of all children's residential centres.

At present, we monitor a number of children's services, including statutory children's residential centres, while the Child and Family Agency (Tusla) registers and inspects private and voluntary children's residential centres.

However, the Department of Children and Youth Affairs is drafting new regulations that will extend HIQA's current role to include the registration and inspection of all children's residential centres.

The draft standards will be aligned to the new regulations and will provide a framework for best practice in providing safe, high-quality services for children in these settings. We have convened an Advisory Group to help develop the standards.

We have also consulted children who have experience in children's residential care in Ireland, their parents, and front-line staff working with children in residential care. A public consultation on draft standards will take place later this year.

Inspection update from our Older Persons' team



Every nursing home has to re-register with HIQA every three years, and this significantly affects how we use our resources. For example, more than 170 out of 363 inspections in 2017 to date related to re-registration applications.

We have carried out more than 20 inspections this year to date in order to help us decide on applications to register four new centres and decide on applications from 20 centres to change or remove their registration conditions.

A further 74 themed inspections looking at dementia care have been conducted this year to date. These themed inspections give us the opportunity to focus on quality

improvement initiatives aimed at improving the living environment for this vulnerable group of people.

Other inspection activity focused on monitoring compliance with regulations and National Standards. We continue to see a high level of regulatory compliance during our nursing home inspections and to receive help and cooperation from residents, families and staff.

Focus on safeguarding in nursing homes

Nursing homes must ensure that all their staff and volunteers have undergone Garda Síochána (police) vetting and that staff have received training in protecting vulnerable people from abuse.

The enactment of the National Vetting Bureau (Children and Vulnerable Persons) Act 2012 in April 2016 has provided additional legislation which strengthened the provisions around vetting.

Susan Cliffe, our Deputy Chief Inspector of Social Services, commented: “Since 29 April 2016, it has been an offence to employ somebody to care for vulnerable people, or to start such a job after the Vetting Act was enacted, without a vetting disclosure from the National Vetting Bureau of An Garda Síochána.”

In addition, nursing homes must also ensure that staff receive training in protecting vulnerable people from abuse, and they must also take precautionary measures to ensure that residents’ finances are protected and managed appropriately where necessary.

Respite care for people with disabilities



Finbarr Colfer, our Deputy Chief Inspector of Social Services

It is important that residential centres for people with disabilities appropriately manage respite services so that they don't negatively impact on residents who live in a centre most of the time.

HIQA is very mindful of the challenges for respite services in meeting the needs of people with disabilities and the difficulties families have in accessing respite care.

There are a range of different models of respite services for people with disabilities, but one that has posed particular difficulties is where respite is offered to people whenever the usual full-time residents in a house are not there.

Achieving an appropriate balance between the rights, dignity and privacy of residents usually living in the house and meeting the respite needs of other people with disabilities is very difficult.

Inspectors have met full-time residents who clearly state that they do not wish others to use their bedrooms whenever they are not there. Other full-time residents have described situations in which their personal items have been damaged during respite visits, family photographs have been torn up and other visiting residents have used their personal property.

Finbarr Colfer, our Deputy Chief Inspector of Social Services, says for that HIQA, the issue is how services ensure that the dignity and privacy of the residents who normally live there is maintained. He added that while this model of respite developed to meet a historical need, residents should always be asked their views about sharing their rooms and personal space whenever they are away.

Whenever residents do give consent, providers should put in place arrangements to protect the privacy and the property of those residents, and ensure that there are good hygiene control arrangements in place.

Finbarr commented: "If these issues are not being managed correctly, we require providers either to put measures in place to manage them correctly or to consider whether it is an appropriate way of using the person's room.... In many cases, the actions taken by providers are effective but sometimes providers choose to cease

the arrangement because they are not satisfied themselves that they can address the issues that are arising from that respite service.”

Prevention and control of healthcare-associated infections in hospitals



Sean Egan, HIQA's Head of Healthcare Regulation

Our unannounced hospital hygiene inspections are continuing during 2017.

Sean Egan, our Head of Healthcare Regulation says: “Our Healthcare team has revised how it monitors compliance against National Standards for the prevention and control and healthcare-associated infections and has published [updated guidance for our inspections in this area](#).

“Unannounced inspections under this revised monitoring programme began in May 2017.”

In the area of decontamination of reusable invasive medical devices, an external advisory group has been convened to assist us with the design of monitoring in this area against the [National Standards for the prevention and control of healthcare-associated infections in acute healthcare services](#).

The team are due to commence inspections in this area in early 2018.

Medication safety in public acute hospitals



Our medication safety monitoring programme aims to examine and positively influence the use of evidence-based practice in this area in public acute hospitals.

Under our programme, which started in November 2016, we monitor medication safety against the *National Standards for Safer Better Healthcare*.

Our [Guide to the Health Information and Quality Authority's Medication Safety Monitoring Programme in Public Acute Hospitals](#) outlines the requirements for hospitals under phase one of the inspection programme.

Ten inspection reports on medication safety in public acute hospitals were published during May, June and July 2017. These reports relate to inspections in:

- [Galway University Hospitals](#)
- [Our Lady's Children's Hospital, Crumlin](#)
- [Tallaght Hospital, Dublin](#)
- [University Hospital Limerick](#)
- [National Maternity Hospital, Dublin](#)
- [Regional Hospital Mullingar](#)
- [St Vincent's University Hospital](#)
- [Midland Regional Hospital at Tullamore](#)
- [Rotunda Hospital, Dublin](#)
- [St Michael's Hospital, Dun Laoghaire, Dublin](#).

In general, HIQA found varying medication safety practices in all 10 hospitals.

For example, inspectors found that medication safety was prioritised at organisational level and supported by senior management and staff in the majority of

the hospitals inspected. This had a positive effect on the systems, processes and practices that were in place to support medication safety.

However, we also found opportunities for learning and improvement in each of the 10 hospitals inspected. For instance, HIQA found that a multidisciplinary approach was needed to counter possible under-reporting of medication-related incidents and near misses to maximise overall learning in several of the hospitals inspected.

Update on HIQA's inspections of foster care services

During 2017, our Children's Team has already completed 10 thematic inspections of Child and Family Agency (Tusla) foster care services.

These have examined the recruitment, assessment, approval, supervision and review arrangements in place for foster carers.

In addition, there has been one risk-based inspection of a private foster care service completed to date in 2017.

Published foster care inspection reports are available on our website, www.hiqa.ie.

Inspection of children's residential centres

To date in 2017, we have completed inspections of 18 children's residential centres and two special care units.

A full inspection by HIQA of the Oberstown Children Detention Campus has also been completed. Published reports are available at www.hiqa.ie

Meanwhile, we are also continuing to work with the Department of Children and Youth Affairs on transferring the registration and inspection function to HIQA for children's residential centres operated by the statutory, private and voluntary sector.

When registration commences, it will cover all children's residential centres.

General Practice Messaging Standard (GPMS)



Our Technical Standards team are revising the General Practice Messaging Standard (GPMS), which was last updated in 2014.

The document has been significantly restructured, and recent developments in this area include the development of an antenatal summary record.

This facilitates the sharing of antenatal visit information between hospitals and primary care.

We will be incorporating the requirements for this into the General Practice Messaging Standard, which will be published later in the year.

Guidance on terminologies and classifications for Ireland



We have recently updated our guidance on terminologies and classification.

The update reflects changes to international terminology standards and a significant change at national level: the purchase of a national Systematized Nomenclature of Medicine — Clinical Terms (SNOMED CT) licence for Ireland.

The [revised version](#) includes specific guidance on the approach to be adopted to support the correct implementation of the licence in Ireland, in line with national standards and international best practice.

Photocall — National Patient Experience Survey visit to Wexford General Hospital



Rachel Flynn from HIQA (second on left) was in Wexford General Hospital where she met with staff to promote the National Patient Experience Survey

New national standards for the prevention and control of healthcare-associated infections in community services

We have started work on developing draft national standards for the prevention and control of healthcare-associated infections in primary and community health and social care services.

The draft standards aim to provide a framework for primary and community health and social care providers to prevent or minimise the occurrence of healthcare-associated infections.

This in turn will maximise the safety and quality of care delivered to people using these services in Ireland. In the coming months, we will convene an advisory group to help us develop the standards, and the first meeting of the group will be held in October.

Review programme for Information Management standards

Our Health Information Quality team aims to improve the quality of national health information with the roll out of a review programme to assess compliance with [Information management standards for national health and social care data collections](#).

A self-assessment tool has now been completed by national data collections within the Health Service Executive (HSE). This has enabled them to assess how they currently meet the standards and to identify areas for improvement in their information management practices.

The next stage of this programme has now started and involves an information and documentation review and on-site visits to assess compliance with the standards. The focus of this review is to identify good practice and areas for improvement, in order to improve the quality of national health information in Ireland.

Update to national health information data collection catalogue

The third version of the *Catalogue of National Health and Social Care Data Collections* has been prepared and will be published in the coming weeks.

The new catalogue includes 120 data collections reflecting a number of new additions, while a number of other data collections have been identified as being in development.

Save the date — 2nd seminar on better data, better decisions

In collaboration with the Department of Health and Office of the Chief Information Officer in the Health Service Executive (HSE), we are holding a second in our series of health information seminars, which will take place on Wednesday 4 October 2017 in Dublin Castle.

Similar to our first seminar in March 2017, the event in the series entitled 'National Health Information — Better data, better decisions' will provide another opportunity for those working in national health and social care data collections in Ireland to meet, engage with, and learn from one another.

Rachel Flynn, our Director of Health Information and Standards, said: "Data quality is an important theme of the day and we will have presentations about data quality initiatives both internationally and from national data collections in Ireland.

"An exciting and diverse range of speakers will take part in the seminar. The keynote address will be delivered by Maureen Kelly from the Canadian Institute for Health Information (CIHI) who will present the CIHI Data Quality Framework."

Another key theme will be the promotion of a culture of transparency in relation to the use of health information.

Natalie Banner from the Wellcome Trust (UK) will speak about its new initiative 'Understanding Patient Data', which aims to support discussions with the public, patients and healthcare professionals about the uses of health and social care data.

There will also be updates from the Department of Health, the Office of the Chief Information Officer in the HSE and HIQA on their ongoing programmes of work in relation to health information.

Photocall — National Patient Experience Survey visit to Tullamore



Tracy O'Carroll from HIQA (second on right) visited the Midland Hospital at Tullamore where she met with hospital staff to promote the National Patient Experience Survey

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