

# Health Information and Quality Authority

An tÚdarás Um Fhaisnéis agus Cáilíocht Sláinte

# Opening statement to the Committee of Public Accounts

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Chief Executive Officer of HIQA

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Chairperson, members, on behalf of the HIQA, I wish to thank you for the opportunity to address the Public Accounts Committee this morning. I am accompanied by my colleagues Mary Dunnion, Director of Regulation and Chief Inspector of Social Services; and Sean Angland, Acting Chief Operating Officer.

This is the first time that HIQA has been invited to speak at the Committee of Public Accounts, and we welcome the opportunity to discuss HIQA's 2016 financial statements. We value the role of this committee in guaranteeing that there is accountability in how public bodies manage their finances and in ensuring that taxpayers receive value for money.

#### About the Health Information and Quality Authority

HIQA is the independent body established 10 years ago to improve health and social care services for the people of Ireland. Our role is to develop standards, inspect and review health and social care services and support informed decisions on how services are delivered. Our mandate extends across a range of public, private and voluntary service sectors.

The Health Act 2007, which established HIQA, outlines our statutory functions and provides the basis for our work. Our remit has grown substantially over the past decade; however, our core activities remain the same, that is, to monitor and regulate health and social care services, develop standards, carry out health technology assessments (HTAs) and advise on the collection and sharing of information across our healthcare services.

All of these functions are focused on making services safer and better. We provide assurance to the public as to the quality of services and endeavour to ensure that the findings of our work are reflected in decision-making at local and national level. HIQA's primary aim is to safeguard vulnerable people: putting the needs and the voices of the people who use services to the fore is the essence of everything we do.

#### **Financial resources**

HIQA plans and manages its resources prudently to make certain that they are used efficiently and effectively as we carry out our statutory functions and deliver our corporate objectives. We are conscious of providing value for money and ensure that we are compliant with all relevant standards, regulations and legislation concerning our use of resources.

HIQA derives its revenue from a mixture of public and private sources. In 2016, HIQA was granted an allocation of €11,550,000 from the Department of Health and

received €6,844,000 in annual fees and registration fees from centres that we registered. We also earned €467,000 in other income such as pension contributions and grants. In 2016, we came in under budget and returned €519,000 to the Department of Health, primarily due to delays in the sanctioning of vacant and new posts.

Over two thirds of HIQA's expenditure goes on staff costs, which amounted to  $\in$ 14,078,274 last year. Our headcount in December 2016 was 192 permanent staff and now stands at 209. Subject to sanction from the Department of Health, we plan that this figure will grow to 227 based on current funding. In addition, a number of staff are employed through agencies and on fixed-term contracts. The majority of permanent staff — 144 people — work in our regulation directorate.

A constant theme in the work of HIQA is the critical importance of good governance and management as well as the efficient use of resources when running services.

In our Code of Governance and Code of Business Conduct, we have set out the key roles and responsibilities within HIQA and the procedures and protocols that are core to good governance. As well as policies and procedures for governing the business of the Board, we also set out guidelines for ensuring that the Authority conducts its business ethically. The Code describes the obligations on staff, Board Members and individuals contracted by the Authority in the performance of their duties and includes requirements for making declarations of interest as set out in Ethics in Public Office Acts.

In recent years we have significantly strengthened internal controls and governance arrangements through an annual statement of assurance to the Board. We have also reviewed our compliance with the new Code of Practice for the Governance of State Bodies as part of our internal audit programme. Compliance with the code, HIQA's internal audit programme, the management of risk and, financial and corporate performance is overseen by the Board's Audit and Risk Committee. HIQA is currently being assessed for compliance with National Standards Authority of Ireland's SWIFT 3000 Code of Practice for Corporate Governance Assessment. The process is near completion, and we expect to be awarded Certification shortly.

In HIQA, we recognise the importance of external and independent oversight, and we are open to and welcome such oversight. The Comptroller and Auditor General in his audit of our financial statements in 2016 provided a clean audit report. The C&AG referenced two items: accounting for the costs of superannuation payments and the exit of a lease. In relation to accounting for superannuation payment, as directed by the Minister for Health, we account for pension costs as they arise rather than accruing for them. In relation to the exit of a lease, this relates to a

lease which was transferred to HIQA from the Irish Health Services Accreditation Board, a predecessor organisation, upon HIQA's establishment. We are happy to answer any questions you may have on these matters.

Since the recruitment moratorium was imposed in 2009, like many other bodies, HIQA has had to seek specific approval for the filling of every post that it wants to fill. The situation where every vacancy that arises and every new post sought requires external sanction creates significant operational challenges for an independent body such as HIQA. While there has been an improvement in this process, delays in filling posts impact on our operational capacity, particularly in the area of the regulation of services. It also has the potential to create additional operational costs where temporary staff are required to complete core work.

We are very conscious of the importance of strategic resource planning and have recently submitted to the department a Strategic Workforce Plan that details how current risks within the regulated environment and future functions should be addressed.

#### HIQA's programme of work

HIQA's organisational structure reflects our core functions and activities of Regulation, Health Technology Assessment and Health Information and Standards, together with a range of support services that enable us to achieve our corporate objectives.

# Regulation

HIQA's regulation directorate is the largest in the Authority and is responsible for promoting improvement in specified health and social care services in Ireland by regulating the quality and safety of the services.

HIQA has statutory responsibility for registering and inspecting designated social care services. So far this year, we have carried out almost 650 inspections of designated centres for people with disabilities and over 450 inspections of designated centres for older people. Of the inspections for centres for older people, 90 were themed inspections focused on the care given to people with dementia. The number of designated centres is continually increasing and diversifying, which in turn affects our workload.

HIQA has statutory responsibility for monitoring and inspecting children's social services, including children's statutory residential centres, special care units, child protection services and Oberstown Children Detention Campus. We also have

statutory responsibility for monitoring foster care services against the National Standards for Foster Care. So far this year we have conducted a total of 38 inspections of children's services.

We are also responsible for monitoring the safety and quality of health services and investigating, as necessary, serious concerns about the health and welfare of people who use these services. As a result of the limitations in numbers of our healthcare team to date, our healthcare programmes have been thematic, focused on inspecting nutrition and hydration care in hospitals, reviewing how public acute hospitals are tackling antimicrobial stewardship and medicines management and monitoring acute hospitals' compliance with the *National Standards for the Prevention and Control of Healthcare Associated Infections*.

The total number of inspections carried out by HIQA across the disability, older people's, children's and healthcare sectors has increased from 920 in 2013 to 1,477 in 2016. This represents an increase of over 60% in the number inspections carried out in just three years.

Since our establishment we have also conducted eight statutory investigations, and we have recently commenced a new investigation into Tusla's management of allegations of child sexual abuse against adults of concern, as requested by the Minister for Children and Youth Affairs.

#### Health information and standards

We are responsible for developing a consistent and standardised approach to health information, based on standards and international best practice. Health and social care services are information-dependent, generating huge volumes of data every day. It is important that such information is managed in the most effective way possible in order to ensure high-quality, safe health and social care.

We also work with stakeholders to develop national standards for healthcare and for people living in residential services, such as nursing homes or centres for people with disabilities. We develop these standards by looking at international best practice, talking to service users, staff and managers about their experiences and what they would like to improve in the services. We also develop guidance to support providers to understand the various national standards, and to assist with implementing them. Some of our current and recently completed work in this area includes:

- Draft National Standards for children's residential centres
- Draft National Standards for the prevention and control of healthcareassociated infections in primary and community health and social care services
- National Standards for the prevention and control of healthcare-associated infections in acute healthcare
- National safeguarding standards for adults who may be vulnerable
- New guidance on messaging standards to support the development of eHealth
- A public consultation on the development of eHealth interoperability standards
- National Standards for the conduct of reviews of patient safety incidents in acute services, which are the first set of standards developed jointly with the Mental Health Commission.

# **National Patient Experience Survey**

The National Patient Experience Survey is a joint initiative led by HIQA with the HSE and the Department of Health, and it is the largest single survey of the healthcare system ever conducted in Ireland. The first survey was conducted in May 2017, and it will now run annually.

Almost 14,000 hospital patients responded to the 61 question survey, which translates to a response rate of 51%. The HSE will use the results of the survey to help improve the quality of care provided to hospital patients. In response to the results, each participating hospital will develop and publish a quality improvement plan by early 2018. The Department of Health will also study the findings to develop national policy and future legislation, while HIQA will apply the results of the survey to guide its ongoing inspection work.

We plan to publish a national report this December with reports on the six participating hospital groups. Reports on the 39 individual hospitals will follow early in the New Year.

# HTA

HIQA is responsible for providing advice that enables the best outcome for people who use our health service and the best use of resources by evaluating the clinical effectiveness and cost-effectiveness of drugs, equipment, diagnostic techniques and health promotion and protection activities. Health Technology Assessment (HTA) is a systematic, transparent, research-based activity that synthesises the best available evidence to ensure that investment decisions are supported and informed by robust and unbiased evidence. HTAs are undertaken at the request of the Minister and his Department or at the request of the HSE to inform major health policy or health service decisions.

We are currently undertaking a HTA on extending the national immunisation schedule to include providing the HPV vaccine to boys. An earlier HIQA HTA was important in informing the decision to provide the HPV vaccine to girls in 2010. The current research will provide the Minister, stakeholders and the wider public with an up to date evaluation of the best available evidence on clinical effectiveness, safety, cost-effectiveness, budget impact as well as organisational, social and ethical issues associated with a national HPV vaccination programme for both boys and girls.

Another example of an HTA published earlier this year was an assessment of smoking cessation interventions. Currently one in two smokers attempt to quit without support. Our assessment demonstrated the benefit of availing of support to quit and identified a range of medicines and other interventions such as e-cigarettes and behavioural therapies such as counselling which are all clinically effective and cost-effective. This HTA will be implemented in the context of a National Clinical Guideline on smoking cessation.

National Clinical Guidelines aim to provide guidance and standards for improving the quality, safety and cost-effectiveness of healthcare in Ireland. They aim to promote healthcare that is current, effective and consistent, ensuring best outcomes for patients and people using services. To achieve this, they must be based on the best available scientific evidence of clinical benefits, cost-effectiveness, and they must consider the budget impact of their implementation.

The Health Research Board (HRB) is funding the Collaboration in Ireland for Clinical Effectiveness Reviews (CICER), which is currently hosted by HIQA. Following a competitive process, HIQA has been awarded research funding of €2.25 million spanning the five-year period from 2017 to 2022 to produce the evidence to support the development of national clinical guidelines.

#### **Expansion of remit**

We believe that HIQA is a highly efficient and productive organisation that carries out a broad and ever-growing range of activities. We are working with the Government to ensure that our resources and processes meet the range of new areas of responsibility to be included under HIQA's growing remit. Areas where it is planned to expand HIQA's role in the foreseeable future include:

- regulation of patient exposure to medical ionising radiation
- the formal regulation of children's residential centres, including voluntary and private services
- the expansion of the National Patient Experience Survey to include areas such as maternity services

Furthermore, we will continue to participate and contribute to the preparatory work in developing a licensing model for public and private healthcare facilities, expanded functions under the Health Information and Patient Safety Bill and expansion into new areas of social care regulation such as homecare services.

# Conclusion

Today I have provided a brief overview of HIQA's current and future work. As an organisation I believe that over the last 10 years we have contributed positively and constructively to public confidence in Ireland's systems of health and social care regulation, standard setting and evidence-based strategic advice. At all times we have endeavoured to be an exemplar organisation in our internal governance systems and have endeavoured through our performance to provide:

- value for money
- efficiency and
- accountability.

I wish to thank the committee for inviting us here this morning. We would be happy to answer any questions you may have.

ENDS

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