Development of a new Acute Hospital Inspection Programme

Project Brief
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1 Project Title

Development of a new Acute Hospital Inspection Programme

2 Introduction and Background

RQIA is a non-departmental public body responsible for monitoring and inspecting the quality, safety and availability of health and social care services across Northern Ireland. It also has the responsibility of encouraging improvements in those services. The functions of RQIA are derived from The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003.

RQIA operates within a value system that supports the belief that learning is at the heart of improvement. To ensure a clear focus on improvement, organisations need to have effective systems which can identify performance standards and support the learning necessary for improvement. The review will operate within the principles which underpin the 'Quality Standards for Health and Social Care' (DHSSPS).

RQIA’s main functions are:

- to inspect the quality of services provided by Health and Social Care Services (HSC) bodies in Northern Ireland through reviews of clinical and social care governance arrangements within these bodies;
- to regulate (register and inspect) a wide range of services delivered by HSC bodies and by the independent sector. The regulation of services is based on new minimum care standards to ensure that service users know what quality of services they can expect to receive, and service providers have a benchmark against which to measure their quality; and
- with the transfer of duties of the Mental Health Commission to RQIA under the Health and Social Care (Reform) Act (NI) 2009, RQIA undertakes a range of responsibilities for people with a mental illness and those with a learning disability. These include: preventing ill treatment; remedying any deficiency in care or treatment; terminating improper detention in a hospital or guardianship; and preventing or redressing loss or damage to a patient’s property.

This project brief has been prepared by RQIA to provide an outline of the rationale for the development, piloting and delivery of the RQIA Hospital Inspection Programme. It has been proposed that the programme is titled **Unannounced Spot Check Inspections.**
3 Context

The Minister for Health, Social Services and Public Safety has tasked RQIA to carry out a series of inspections in acute hospitals across Northern Ireland. This rolling programme of unannounced spot check inspections, will examine the quality of services in acute hospitals in Northern Ireland from 2015-16 onwards.

This project has been commissioned from the RQIA by the DHSSPS. In a letter dated 14th April 2014, the Chief Medical Officer formally asked RQIA to put in place appropriate arrangements to deliver a rolling programme of unannounced spot check inspection inspections of the quality of services in acute hospitals in Northern Ireland.

In a statement to the Northern Ireland Assembly on the 1st July 2014 the Minister stated that ‘inspections will focus on a number of quality indicators about triage, admission, assessment, care, monitoring and discharge of patients. They will focus on a selection of quality indicators that will not be pre-notified to the trusts for each inspection, and no advance warning will be provided to trusts as to which sites or services within a hospital will be visited as part of an unannounced inspection. It is intended that the RQIA inspection reports will be published on a hospital-by-hospital basis as they are completed’.

4 Objectives

This project is to develop, design and pilot an agreed hospital inspection process and associated procedures which will conclude with the delivery of a fully tested process to deliver the programme of unannounced spot check inspection. This programme of unannounced spot check inspection is to commence in 2015/16, the exact date is to be confirmed.

The proposed key deliverables for the project to establish the new programme of unannounced spot check inspection are to:

- Develop, pilot and implement a hospital inspection process, and associated procedures, in accordance with legislation, standards and relevant guidance
- Identify and agree access to relevant sources of information which could inform the content and delivery of the programme of inspections
- Develop a comprehensive training package to ensure that RQIA inspection staff, peer reviewers and lay assessors are suitably trained to carry out the inspections
- Develop a database to coordinate the programme of inspections
- Establish a forward work plan for the programme of inspections over the period 2015-18
- Ensure that relevant stakeholders, including the public, are kept informed about the development of the programme
The design and the content of the programme will be underpinned by a sound evidence base. It is proposed that the programme will comprise of:

- An agreed list of core components which will be inspected in each inspection
- An agreed list of additional themes from which a number will be selected for specific inspections. The selection will be influenced by consideration of available information which may indicate that an inspection in a specific area is required
- The number of inspections and the number clinical areas inspected will be based on available resources

The frequency of inspections has been determined taking into account the entire RQIA IPHT inspection programme. A list of hospitals and their categories to be included in the inspection process is attached at Appendix B.

5 Exclusions

Exclusions from this project are still to be determined however possible areas which may not fall under the inspection programme are listed below:

- Mental Health & Learning disability facilities which are already subject to RQIA inspection.
- Community Services
- Primary Care Services
- Maternity Services

The rolling unannounced spot check inspection programme will be in line with the review programme of 2015-18 and these exclusions may be revisited in the future.

6 Main Project Stages

This project is to be managed using the PRINCE project management approach. All planning, decisions and actions will be appropriately recorded and managed within acceptable timescales. Any emerging risks, exceptions or issues arising will be recorded throughout the life of the project.

A product flow diagram has been agreed (Appendix A). Generally the work can be grouped into the following stages:

- Initiation Phase
- Broad Scoping/Research Phase
- Recruitment Phase
- Product Design & Quality Assurance Phase
- Piloting Phase
- Training Phase
- Implementation Phase
7 Stakeholder Involvement

The following stakeholders have been identified in relation to this review:

NI Assembly
DHSSPS
RQIA Board
RQIA Executive Management Team (EMT)
RQIA Project Board
RQIA Project Organisational Team (POT)
RQIA Staff
HSC Board
Public Health Agency
Business Services Organisation
HSC Trusts
NI Safety Forum
Patient Client Council
Human Rights Commission

8 Project Structure

This project is to be managed using the PRINCE project management approach and will include:

- Securing membership of the Project board and Project Organisational Team
- Broad scanning of information available across the HSC
- Broad scanning of possible methodologies for the Inspection Programme
- Assessing current capacity to develop and deliver the Inspection Programme
- Design of the process including all operational tools, operational procedures, supporting documentation and database
- Initiate a recruitment process for peer reviewers/inspectors
- Quality Assurance and pilot schemes
- Design and delivery of a training package
- Handover of final Hospital Inspection Programme for implementation
- Project completion

The development, design and piloting of the unannounced spot check inspection programme will be managed as a project with individual component work streams managed by work stream leads.

A Project Board will be established to oversee the delivery of the project and that all relevant stakeholders are appropriately engaged. The membership of the Project Board will include:
The Project Board will meet at least once every two months. A quorum of at least 6 members will be required for each meeting to proceed. At least 2 of these should be external to RQIA.

A Project Organisational Team (POT) will be established to undertake the core work in relation to the project.

The Project Organisational Team (POT) will meet at least once every two weeks and will consult with the Project Board at key milestones throughout the life of the project.

Individual work streams will be established with individually identified leads. A schedule for reporting to the Project Manager on progress will be agreed.

A Quality Assurance Process will be determined and utilised as required throughout the life of the project.

9 Project Timescales

The project will commence in August 2014 following agreement of the Project Brief and will complete by October 2015, at which point the unannounced spot check inspection programme will complete with implementation.
Appendix B: Unannounced Spot Check Inspection - 3 year rolling programme

**Larger Acute Hospitals**

<table>
<thead>
<tr>
<th>Hospital</th>
<th>Trust</th>
<th>Inspection Schedule*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Royal Victoria Hospital</td>
<td>BHSCT</td>
<td>Minimum of 2 inspections over 3 years.</td>
</tr>
<tr>
<td>Belfast City Hospital</td>
<td>BHSCT</td>
<td>4 areas on each inspection.</td>
</tr>
<tr>
<td>Antrim Area Hospital</td>
<td>NHSCT</td>
<td></td>
</tr>
<tr>
<td>Ulster Hospital</td>
<td>SEHSCT</td>
<td></td>
</tr>
<tr>
<td>Craigavon Hospital</td>
<td>SHSCT</td>
<td></td>
</tr>
<tr>
<td>Altnagelvin Hospital</td>
<td>WHSCT</td>
<td></td>
</tr>
</tbody>
</table>

**Smaller Acute Hospitals**

<table>
<thead>
<tr>
<th>Hospital</th>
<th>Trust</th>
<th>Inspection Schedule*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Musgrave Park Hospital</td>
<td>BHSCT</td>
<td>Minimum of 1 inspection over 3 years.</td>
</tr>
<tr>
<td>Daisy Hill Hospital</td>
<td>SHSCT</td>
<td>2 or 3 areas on each inspection.</td>
</tr>
<tr>
<td>Causeway Hospital</td>
<td>NHSCT</td>
<td></td>
</tr>
<tr>
<td>Mater Hospital</td>
<td>BHSCT</td>
<td></td>
</tr>
<tr>
<td>South West Acute Hospital</td>
<td>WHSCT</td>
<td></td>
</tr>
<tr>
<td>Downe Hospital</td>
<td>SEHSCT</td>
<td></td>
</tr>
<tr>
<td>Lagan Valley Hospital</td>
<td>SEHSCT</td>
<td></td>
</tr>
<tr>
<td>Royal Belfast Hospital for Sick Children</td>
<td>BHSCT</td>
<td></td>
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</tbody>
</table>

**Other Hospitals**

<table>
<thead>
<tr>
<th>Hospital</th>
<th>Trust</th>
<th>Inspection Schedule*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mid Ulster Hospital</td>
<td>NHSCT</td>
<td>RQIA may inspect these hospitals if information indicates an inspection is required. These will continue to be subject to the regular inspections under the hygiene programme.</td>
</tr>
<tr>
<td>Whiteabbey Hospital</td>
<td>NHSCT</td>
<td></td>
</tr>
<tr>
<td>South Tyrone Hospital</td>
<td>SHSCT</td>
<td></td>
</tr>
<tr>
<td>Tyrone County Hospital</td>
<td>WHSCT</td>
<td></td>
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</tbody>
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* The inspection schedule above may vary dependent on availability and resources