



Business Services  
Organisation

Providing Support to Health and Social Care



# Annual Quality Report

2015-16

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# FOREWORD FROM BSO CHIEF EXECUTIVE

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I am delighted to present the third Annual Quality Report of the HSC Business Services Organisation (BSO).

BSO was set up in April 2009 to provide a range of business and specialist professional services to other health and social care bodies. Subsequent legislation also permits BSO to provide some services outside our Health and Social Care remit.



Whilst I only joined the BSO in April 2016, I have long recognised it to be an organisation that has played an increasingly significant role within Health and Social Care. Under the energetic leadership of my predecessor, Mr David Bingham, BSO has always worked closely with its customers. BSO continues to grow, both in range of services provided and numbers of staff. This has implications for integrating these staff into the organisation and ensuring a cohesive identity and culture. Additional E-systems are being introduced and/or developed and significant changes to existing services are underway. It will be important to ensure that these changes lead to improved quality and experience for customers. The financial context within HSC also means that BSO needs to increase productivity and reduce costs through continuously looking at new ways of working.

During my first few months at BSO, I cannot help but be impressed with the high levels of professionalism and enthusiasm evident across the organisation. The many achievements demonstrate the calibre and commitment of staff despite the challenges posed by uncertainty, change and ongoing resource constraints.

During the past year, there has been renewed focus on our common goal and vision for a world class Health and Social Care service in Northern Ireland which puts the patient at the centre. The BSO is uniquely positioned to introduce new and innovative services which will support improved health outcomes, care and treatment for the citizens of Northern Ireland

A handwritten signature in blue ink, appearing to read 'Liam McIvor'.

**Liam McIvor**

**Chief Executive**

**November 2016**

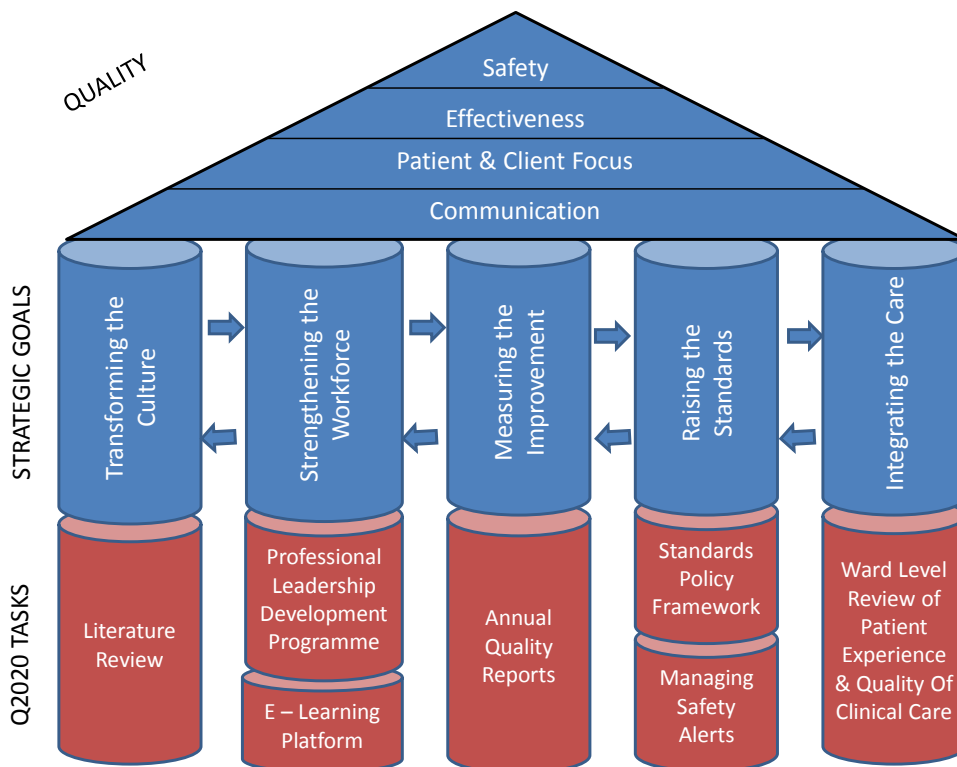
## 2.0 Introduction

In 2011 the Department of Health, Social Services and Public Safety (DHSSPS) launched “Quality 2020, ‘A 10-year Strategy to Protect and Improve Quality in Health and Social Care in Northern Ireland’”.

The 2020 Quality Strategy for HSC draws its strategic relevance from the “Transforming Your Care” (TYC) Review which views quality as a driver for change; the financial climate – doing more with less; public demand – political and media scrutiny; change factors such as demography, environment, scene and social.

The goals of the 2020 Quality Strategy are outlined as follows:

- Transforming the Culture – a dynamic HSC culture focused on continuous quality improvement that values learning and inspires trust;
- Strengthening the Workforce – a workforce that is confident, skilled and quality-inspired;
- Raising the standards – a more robust set of service standards effectively applied;
- Measuring the improvement – an effective set of quality measures and improvement techniques;
- Integrating the care – more effective integration of services and interfaces.



The lead agency for Quality 2020 is the Department of Health (DoH). The Chief Medical Officer is the Programme Sponsor and the DoH Director of Safety, Quality and Standards is the Senior Responsible Officer (SRO) for the programme. The BSO is represented by Director of Finance and Head of Clinical Education Centre on the Quality 2020 Implementation Team. The Customer Care and Performance Directorate has responsibility for co-ordinating the organisational approach to quality excellence within the BSO.

The development of Annual Quality Reports is one of the designated tasks under the Strategic Goal of Measuring the Improvement in the Quality 2020 Model above. This is the third BSO Annual Quality Report. It documents some of the BSO's achievements with regard to quality excellence and continuous improvement during the year 2015-16 following the concept of the five Quality 2020 strategic goals previously outlined.

The BSO's mission is *"to deliver value for money and high quality business services to Health and Social Care, so contributing to the health and well-being of the population of Northern Ireland."*

The Business Services Organisation (BSO) was set up in April 2009 to provide a range of business support and specialist professional services to other health and social care bodies. These services include procurement, technology support, human resources, legal services, family practitioner services, counter fraud and internal audit. Recently enacted legislation also permits the BSO to provide services beyond our Health and Social Care remit.

Our Strategic Objectives and Values for 2015-18 help us to fulfill our Mission in an increasingly challenging environment.

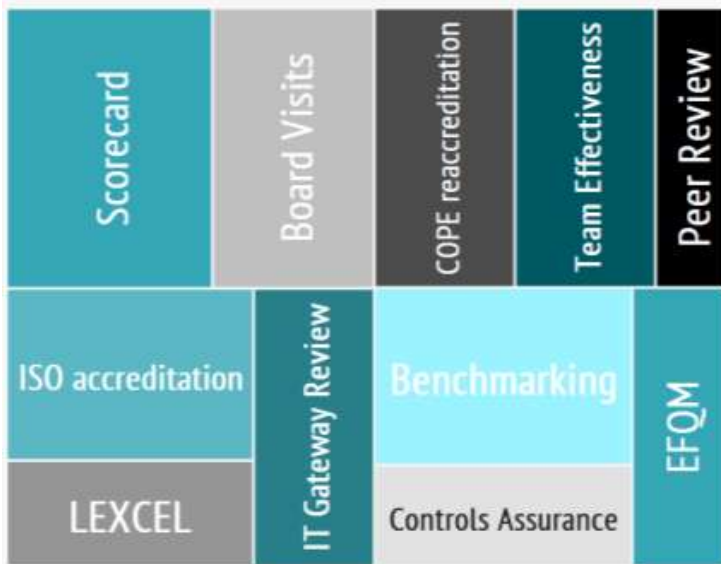
*As an organisation we value:*

- *Respect of Staff and Customers;*
- *Accountability in how we use our Resources;*
- *Transparency, Openness and Trust;*
- *Partnership and Collaboration with our Stakeholders and Customers;*
- *Professionalism and Expertise.*

Our Strategic Objectives or Outcomes are the focus of everything we do:

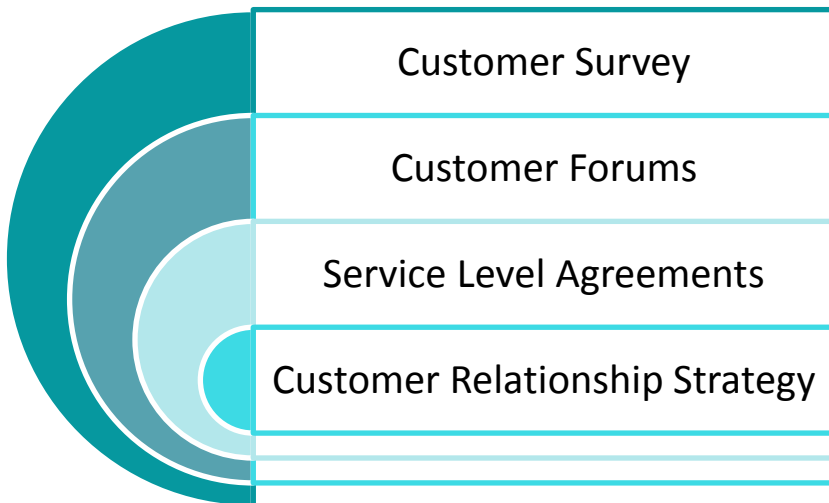
- *To Deliver Value for Money Services to our Customers*
- *To Grow our Services and Customer Base*
- *To Pursue and Deliver Excellence through Continuous Improvement*
- *To Enhance the Contribution and Development of Our People.*

# 3.0 Summary - Quality Excellence in BSO



Our processes are assessed internally and externally to ensure their optimisation

We have a range of initiatives to support our staff in the provision of a high quality service



We have built quality into the management of our customer relationships – which are vital to the success of the BSO

## 4.0 Transforming the Culture

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The Quality 2020 aim: ***We will make achieving high quality the top priority at all levels in health and social care. We will promote and encourage partnerships between staff, patients, clients and carers to support decision making.***

It is widely agreed that the culture of an organisation is an indication of the quality of its output, in this case care. In order for the quality of care and services to be of the highest level, the culture of the organisation must be open, honest, transparent and, above all, client-focused.

### 4.1 Our Board

The Executive and Non-Executive Directors of the BSO Board provide leadership for the organisation. Guided by the Minister and priorities set by the DHSSPS, they set the strategic direction for the BSO and are responsible for ensuring that the organisation achieves its objectives. The Chief Executive is accountable to the Board for the performance of the organisation.

The BSO Board maintains a focus on quality by discussing performance information, including key quality indicators, on a regular basis. This information is presented through:

- the monthly Corporate Balanced Scorecard,
- the quarterly report on Performance against Annual Business Plan,
- the quarterly Human Resources and Corporate Services Report,
- the monthly Finance Report,
- the annual Service Offering to customers;
- updates on Benchmarking against other organisations,
- compliance with Audit Reports and Controls Assurance Standards,
- updates on Quality Awards and Accreditations and
- the outcomes of the annual Customer Satisfaction Survey with associated improvement action plans.

In addition, the BSO Board reviews its Corporate Risk and Assurance Register on a quarterly basis. The Board does this with a view to assessing prospectively risks to quality of services and ensuring that appropriate controls and assurances are in place. Non-executive members of the BSO Board also undertake a series of visits to various service areas within the organisation as a means of assuring quality.

## 4.2 Quality Culture within BSO

When an organisation has a quality culture all employees have embedded quality improvement into the way they conduct their daily business. Although part of the HSC, BSO has to demonstrate that it can compete with other providers of similar services from both a cost and quality perspective. Standing still is not an option for BSO, particularly in the current economic environment which has placed unprecedented pressure on us and our customers to deliver efficiency savings. This drives us to continually seek new and innovative ways of developing and growing our services and increasing our productivity.

The Feedback Report from the Investors in People Reaccreditation Process dated November 2015 states:

*“Senior leaders and managers articulated a robust culture of self-review that uses a range of techniques and methodologies. My conversations confirmed that the climate of constant change makes it more essential than ever to perform and improve; therefore strategic planning reflects the key areas where culture shift is still needed. The staff survey provides an insight into the things that people feel are managed well and where they see potential for improvement. ...*

*... There has been a sustained emphasis on continuous improvement over a number of years... Part of the future focus needs to be on how feedback that is gained from surveys and other methods influences action planning....The busy working environment often means that staff do not reflect or take account of the improvement actions undertaken...”*

## 3.3 Employee Engagement

During 2016-16, the BSO Organisation Workforce Development Group, which is made up of representatives from all services within BSO, continued to work closely with the Senior Management Team to embed a culture of professionalism and expertise. This was further enhanced with the establishment of two sub-groups to support its work and policy direction. The Employee Engagement Sub-Group was established as a result of the organisational staff engagement session which took place in November 2014. An engagement action plan is currently being taken forward with a number of engagement initiatives suggested by staff, including ideas about appraisals, learning and development, office environment and communication. The regional Staff Survey has highlighted the benefits of this work with an engagement score above the average in Health and Social Care and NHS England. The results of the Staff Survey will be the basis of further detailed work.



We have a range of initiatives to support our staff in the provision of a high quality service.

*BSO Staff Quality model*



## 5.0 Strengthening the Workforce

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*The Quality 2020 aim: **We will provide the right education, training and support to deliver high quality service. We will develop leadership skills at all levels and empower staff to take decisions and make changes.***

The importance of leadership in empowering staff to challenge and change bad practice and attitudes has been stressed both at Ministerial level and by Chief Professional officers. The Minister stated that “*Strong leadership is the key to effecting change and although the future brings major challenges, including effective transformation of services, it also brings opportunities, and Quality 2020 should ensure that we are more ready to deal effectively with the challenges and opportunities that lie ahead and so protect and improve quality.*”

Strong leadership will strengthen the workforce and training can play a major role in this. Quality training will produce quality staff who will produce a quality service.

### 5.1 Health and Wellbeing

A Health and Wellbeing Sub-Group was established in 2015 to support and implement the BSO Health and Wellbeing Strategy. Since then 42 training sessions have been organised, with 35 focused on mental health. The remaining seven sessions were focused on gender specific issues, more specifically gender related cancer and back care. The Mindfulness based stress reduction sessions were attended by 230 people and 120 people attended the half day training sessions on Personal Resilience and Mindful Manager. The Gender Specific Awareness sessions had 82 attendees.

In addition, the Health and Wellbeing team organised Health Fairs in various geographical locations, including Omagh, Armagh, Ballymena, Londonderry and Belfast. Five Diabetes UK Awareness Days were held during the year where employees could book a 15 minute slot for a risk assessment with a Diabetes UK volunteer. The results of this initiative have yet to be evaluated, however the available slots were 80% filled.

### 5.2 BSO Annual Recognition Awards

On Thursday, 24 September 2015, BSO saw the fourth celebration of the Annual Recognition Awards event. The event was held in the Ulster Hall, Belfast and included the celebration of academic achievement and recognition of staff members

with 40 years' service. Attendees also enjoyed a two course lunch as part of the event.

Nominations were requested in the categories of:

- Improving Customer Service Award
- Innovation Award
- Team Award.

A total of 16 nominations were received for the Awards and nine were chosen to present to a panel of judges. The panel members were Sean Brown, Head of Development and Corporate Services, Patient and Client Council, Sara Long, Assistant Director, Performance Management, HSCB and Adele Graham, Senior Health Intelligence Manager, PHA. The winners of the awards were announced by the BSO Chairman, Mr Alexander Coleman. Mr Coleman also announced winners in the categories of Outstanding Leadership and the 2015 Chairman's Award for Excellence.

### 5.2.1 Winners of the Awards

#### Improving Customer Service Award

This award was presented to the BSO Client Accounting Team for the excellent customer Service shown to another HSC Organisation at short notice and at a key time in the financial calendar.



*BSO Client Accounting team collecting their award from the Chairman.*



*Members of the PaLS Logistics team collect their award.*

#### Innovation Award

This award was presented to the PaLS Logistics Team in recognition of the development of a KPI Tracker which resulted in a dynamic and adaptable vehicle fleet operation

## Team Award

PALs Equipping Team won the Team Award in recognition of the work carried out to complete a series of completely new regional strategic frameworks accessible by all HSC Trusts.



*Representatives from the PaLS Equipping Team.*

## Chairman's Award for Excellence

This year, the BSO Chairman's Award for Excellence recognised Maxine Paterson, Head of Payments (Accounts Payable) for the successful implementation and improvement of the payments service on behalf of the HSC. Maxine has driven improvements in service quality, improved performance across all HSCNI organisations and has increased efficiencies with the use of technology and innovation.



*Maxine Paterson*

## Outstanding Leadership Award

Mark Harvey was presented with an award in recognition of outstanding leadership for his work in leading the Counter Fraud and Probity Team.



*Mark Harvey and Maxine Paterson.*

### 5.3 Communication

Members of BSO staff are made aware of quality improvement initiatives being undertaken by a variety of means. These include the monthly staff magazine, “*Business Matters*”, regular staff meetings, team briefings, professional supervision meetings and the HSC Knowledge Exchange. An organisational review of communications has been scheduled for the forthcoming year.

The *HSC Knowledge Exchange* is an initiative of the HSC Leadership Centre which was established in February 2014 with the creation of a website and network for people delivering health and social care in Northern Ireland. The website so far has had more than 34,000 visits from 19,000 unique users. It is a place where new policy, news and thinking from the UK and global health and social care community can be accessed. It is updated at least 2 to 3 times per week. In addition, all key HSC organisations have submitted case studies of NI specific good practice and improvement work.



The network currently has 1000+ followers and 500+ forum members with a range of events and network activities being planned for the coming year. Research is underway to identify “Leaders in Field” who can contribute to leading thinking around the issues we face in Northern Ireland. The Knowledge Exchange is being used both as a system wide events calendar and as a repository of speaker presentations and recordings for access by a wider audience. Membership is diverse and includes GPs, social workers, nurses, students, managers and researchers. As one GP has commented, “*a great resource, now if I only have five minutes between patients I can keep up to date with what’s happening.*”

## 5.4 Listening to Staff

As described in paragraph 3.3, an Employee Engagement sub-group of the BSO Organisational and Workforce Development Group has been established. This has been as a result of the staff engagement session which took place in November 2014. An engagement action plan, referred to in para. 3.3, is currently being taken forward with a number of initiatives suggested by staff. These include ideas about appraisals, learning and development, office environment and communication (see page 13). The regional Staff Survey has highlighted the benefits of this work with an engagement score above the average in Health and Social Care and NHS England. The results of the Staff Survey will be the basis of further detailed work.



During 2015-16, the HSC Leadership Centre developed a new suite of short course management development programmes to be offered to middle and senior managers in BSO and other regional HSC organisations. The programme, entitled “*Moving Forward*”, was developed using information from staff surveys, appraisals, staff engagement events and organisation workforce development groups. Its primary aim was to develop well-rounded and competent individuals to role-model the values of their organisation in terms of customer experience, excellence, quality and good governance. Programmes were underpinned by the Quality 2020 attributes framework, “*making it possible for everyone, every day to do a better job with greater satisfaction, learning from and with their colleagues, in order to improve services.*”

Based on the learning needs identified, the suite of programmes was developed under three key themes – **Relationship Development; Enablers to Deliver** and **Operational Management Skills**. The initiative was rolled out across the BSO and its customer organisations during 2015-16. This has given individuals the opportunity to avail of training on a modular basis and has been attended by over 320 members of staff.

## 6.0 Measuring the Improvement

*The Quality 2020 aim: **We will improve outcome measurement and report on progress for safety effectiveness and the patient/client experience. We will promote the use of accredited improvement techniques and ensure that there is sufficient capacity and capability with the HSC to use them effectively.***

It is acknowledged that whilst the processes of gathering information and examining data are important, it is vital that lessons from the information are learned. Information from complaints, for example, is an invaluable source of learning and it is critical that learning is shared and put into practice quickly and effectively.

For the service user, no matter which specific aspect of health and social care they are using, the outcome is the most important thing. It is therefore important that the most effective methods of service delivery are used and improvement techniques are applied.

### 6.1 Collection and Analysis of Data

As described in paragraph 2.1, the BSO Board maintains a focus on quality by discussing performance information, including key quality indicators, on a regular basis. This information is presented through:

- the monthly Corporate Balanced Scorecard,
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In addition, the BSO Board reviews its Corporate Risk and Assurance Register on a quarterly basis. The Board does this with a view to assessing prospectively risks to quality of services and ensuring that appropriate controls and assurances are in place. Non-executive members of the BSO Board also undertake a series of visits to various service areas within the organisation as a means of assuring quality.

Further operational examples from BSO Directorates include:

- Comprehensive quantitative and qualitative evaluation systems from course participants in the HSC Leadership and Clinical Education Centres and inform changes to products. Impact evaluation processes are included in HSC Leadership Centre proposals for consultancy initiatives.
- HSC Clinical Education Centre (CEC) has an annual Quality Assurance report into a sample of its programmes carried out by NIPEC.
- IT Services use service toolsets, customer feedback and project monitoring tools such as Project Vision.
- Equality team uses qualitative data collection through roundtable discussions or one-to-one engagement with customers and quantitative data collection through surveys
- HSC Pensions Service provides quarterly governance reports to DHSSPS
- PaLS has its own performance dashboard and analyses data from all available systems, audits and performance against Key Performance Indicators (KPIs). Outputs are addressed by operational groups throughout PaLS
- Directorate of Legal Services (DLS) provides monthly reports to each client setting out the time recording against each case/referral in each area of law.

## 6.2 Continuous Professional Development and Training

As part of our commitment to investing in our people, the BSO undertakes significant training and development activity for staff to support quality excellence. This includes the attainment of professional qualifications.

In addition to the majority of BSO IT technical staff having a relevant computing degree, many also have ITIL, PRINCE 2 and other technical specialist accreditations. Our ITS staff are actively encouraged as part of their training and development plans to undertake ITIL training. ITIL is the most widely accepted approach to best practice service management and there is a BSO target of 100% ITIL qualified teams by April 2017. ISO Awareness and Auditor training has also been provided to ITS staff as appropriate.

Around 22% of staff members in PaLS are professionally qualified with a Diploma in Procurement and Supply from the Chartered Institute of Purchasing and Supply. Specialist training in ISO has been provided to the designated PaLS officer with quality responsibilities and this is refreshed at regular intervals. This officer in turn provides training in relation to ISO auditing. Specialist training in EFQM assessment was provided to senior PaLS officers to support gaining the Mark of Excellence and update training is provided as required.

Members of Internal Audit staff are actively encouraged to gain accreditation through an accountancy body or as a certified internal auditor.



Similarly, members of our Finance staff are encouraged to gain accreditation through an accountancy body.

Our Counter Fraud investigators are encouraged to work towards a qualification as an accredited counter fraud specialist and technicians through the Counter Fraud Professional Accreditation Board.

All solicitors within the Directorate of Legal Services have access to Continuous Professional Development (CPD) and conferences on legal topics. Additionally, Solicitors provide training on a variety of legal topics to clients; e.g. to clinicians, social workers, managers etc.

All nursing and midwifery staff within the HSC Clinical Education Centre (the Centre) are registered with the Nursing and Midwifery Council (NMC) and come from all fields of practice and a range of specialisms. In addition, the Centre's nursing and midwifery teaching staff are required to hold or are supported to obtain a NMC approved PGCE teaching qualification sourced through a local university, ensuring that the delivery of education is provided by educational, as well as clinical experts. As registrants and teachers, they are supported and enabled to maintain and enhance their knowledge and skills through Continuous Professional Development (CPD), clinical updating, professional supervision, attendance at conferences and professional forums. In planning, preparing and delivering programmes, these members of staff critically review evidence and innovations in practice.

The vast majority of Allied Health Professional (AHP) education and training programmes are delivered by experienced and highly skilled external tutors, sourced regionally, nationally and internationally. The Assistant Head and AHP Training Co-Ordinator as HCPC registrants are supported to access a variety of opportunities in CPD and to engage with and contribute to the wider professional agenda.

The HSC Clinical Education Centre has also developed strong inter-agency working with our partners in HSC Trusts. This ensures that the educational programmes and products delivered by Centre's Nursing and Midwifery and AHP Units not only meet the needs of local workforces, but also provides opportunities for teaching staff to participate in appropriate, high quality and relevant clinical updating on a yearly basis. This helps to ensure that clinical competence is a core component of professional development and appraisal processes.

Training for BSO staff is primarily identified through the staff appraisal process which leads to an Annual Training Plan reflected the broad corporate training needs. Additional training programmes will be developed in the coming year such as a Root Cause Analysis programme to enable full and proper understanding of complaints and significant events. All members of BSO staff are encouraged to participate in relevant training programmes provided either in-house or by the HSC Leadership Centre. In turn, members of HSC Leadership Centre staff have been trained in

LEAN/Six Sigma, Foundation in Improvement Science in Healthcare and in the Institute for Health Improvement (IHI) model for improvement.

As part of Quality 2020, the Department of Health, in conjunction with Trust representatives, commissioned the HSC Leadership Centre to develop and host a regional eLearning programme to provide staff with a greater understanding of Level 1 of the Attributes Framework: Supporting Leadership for Quality Improvement and Safety. The programme was launched in July 2016 and is available to all HSC staff on the HSC Learning Centre (<http://www.hsclearning.com>).

## 7.0 Raising the Standards

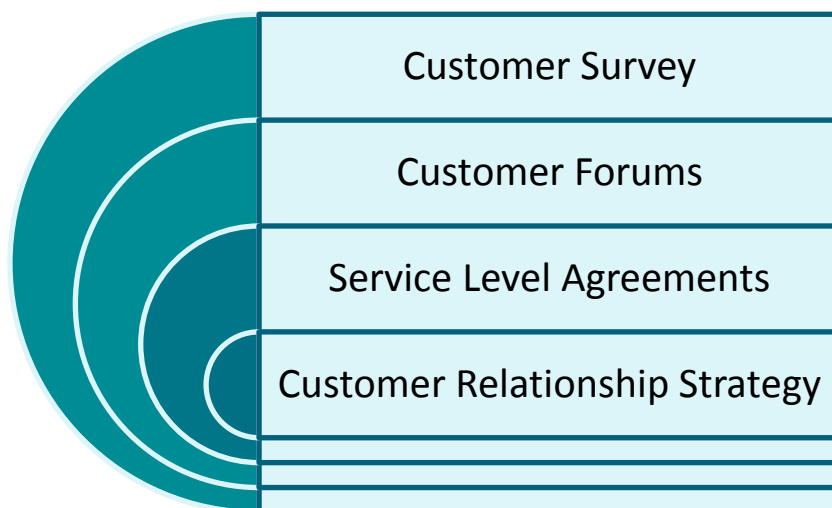
*The Quality 2020 aim: **We will establish a framework of clear evidence-based standards and best practice guidance. We will establish dynamic partnerships between service users, commissioners and providers to develop, monitor and review.***

The Quality 2020 Strategy has emphasised the importance of the voice of the service user. Their contribution to policy and procedures is essential to build a service user based healthcare system.

### 7.1 Involving Service Users in Quality Improvement

The BSO is a customer-driven organisation and earns its income from the provision of services which are paid for by other HSC bodies. These include the five HSC Trusts, the HSC Board, the Public Health Agency and other regional agencies within the HSC community, as well as the DoH. Services are provided to each customer within the quality standards and pricing set out within their contract or Service Level Agreement (SLA) with the BSO.

Although part of the HSC, the BSO has to demonstrate that it can compete with other providers of similar services from both a cost and quality perspective. Standing still is not an option for BSO, particularly in the current economic environment which has placed unprecedented pressure on us and on our customers to deliver efficiency savings. This drives us to continually seek to find new and innovative ways of developing and growing our services and increasing our productivity.



We have built quality into the management of our customer relationships – which are vital to the success of the BSO

*BSO customer quality model*

The BSO is not required by statute to establish governance arrangements to involve and consult with service users as our customers are, in the main, other HSC organisations. However, we recognise that effective involvement is a key component in the delivery of a high quality service. The BSO Customer Relationship Strategy seeks to place our customers at the heart of everything we do and will be reviewed and updated during 2016-17.

As part of the Customer Relationship Strategy, we have established Customer Forums in each of our areas of service and carry out an annual Customer Satisfaction Survey. A corporate Customer Satisfaction Survey has been carried out each year since the establishment of BSO and continues to drive what we do and how we do it. Our seventh annual survey took place in 2015-16 with the overall response and satisfaction rates increasing from the previous year and the overall level of negative responses decreasing. Baseline surveys were carried out for the first time this year in the areas of Shared Services.

During 2015-16, the BSO Equality and Human Rights Service has been able to expand the work placement scheme for people with a disability. In total, eight individuals began their 26-week placement with us. The scheme is run jointly with the other regional HSC organisations. Overall, 25 opportunities were created in 2015-16 and fifteen individuals currently participate in the scheme. In conjunction with our partners, the regional HSC organisations, BSO Equality and Human Rights developed a common Good Relations Statement during the year. The statement was launched in the context of a visit to the premises of the Belfast Islamic Centre and an introductory lecture on Islam on 3 March 2016.

The aim of the HSC Regional Interpreting Service based within BSO is to improve access to Health and Social Care for patients who do not speak English proficiently, through the provision of trained interpreters. An Interpreting Service User Panel has been established to enable patient and client representation to improve user experience. Membership of the Panel includes representation from the Patient and Client Council, NI Council for Ethnic Minorities, Bryson Intercultural, Stronger Together network and the Chinese and Polish Welfare Associations.

Following extensive development and User Acceptance Testing, the third, and final, system within the Family Practitioner Payments System project went live at the end of May 2015. This new system for General Medical Services made its first payment to GP practices by the end of June 2015.

The remit of the Counter Fraud and Probitry Service (CPFS) has been extended to matters of financial abuse and now participates in the NI Adult Safeguarding Partnership. CPFS staff members have been working closely with HSC Board and Trust representatives to increase awareness of financial abuse. This has involved participation in workshops, delivering presentations and the development of literature setting out possible warning signs of financial abuse and the action to be taken.

## 8.0 Integrating the Care

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*The Quality 2020 aim: **We will develop integrated pathways of care for individuals. We will make better use of multi-disciplinary team working and shared opportunities for learning and development in the HSC and with external providers.***

In order to provide the best possible service, it is essential that training provided is of the highest standard. To help ensure this, the HSC must look to providers of excellence in terms of training and practices. This must be done cost effectively and with outcomes for the service user in mind.

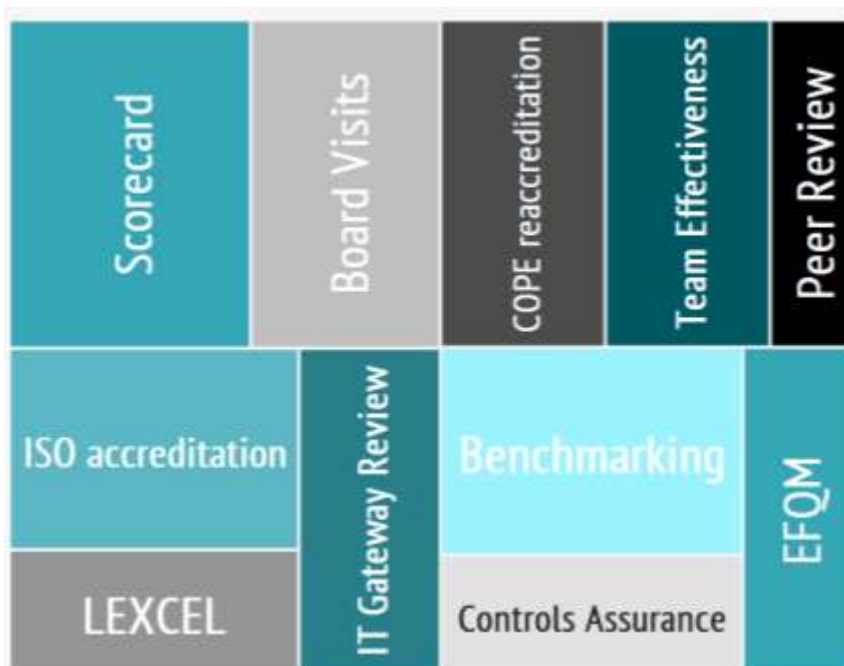
Reaching outside of the HSC to avail of expertise and experience is an excellent way to measure performance and to use other outlooks on training and management to achieve the best results for the service user.

### 8.1 External Assessment of BSO Business Processes

The BSO seeks to use modern business processes and information technology to lower operational costs and improve quality. The aim is to allow other HSC bodies to concentrate their efforts on their core objectives to improve the health and well-being of the population by relieving them of the day to day responsibility to manage support functions.

Our processes are continually assessed both internally and externally to ensure their optimisation and some of the accreditations and initiatives undertaken by BSO are summarised overleaf.

The corporate approach of the organisation to Benchmarking is outlined at paragraph 8.2.



*BSO Process Quality model*

The following provides a flavour of some of the quality initiatives and accreditations held or undertaken by BSO during 2015-16. It is not by any means intended to be an exhaustive list.

### 8.1.1 Centre of Procurement Expertise

In Northern Ireland public procurement is governed by the Northern Ireland Public Procurement Policy. This policy established the concept of Centres of Procurement Expertise (CoPE) and directed central government departments and their arms-length bodies that procurement should be conducted through a recognised Centre of Procurement Expertise. BSO Procurement and Logistics Service is the accredited CoPE for goods and services for health. The process of accreditation involves demonstrating to a team of independent assessors that the organisation consistently applies good governance and best practice in conducting its business. BSO PaLS was reaccredited for a further three years from 23-25 October 2013.

### 8.1.2 ORECNI quality accreditation

The Office for Research Ethics Committees Northern Ireland (ORECNI) at BSO is a Research Ethics Service which helps to protect the rights, dignity and welfare of research participants within the HSC/NHS, and to protect the rights of researchers to

perform ethical research and legitimate investigation. The service provides ethical review of research studies via research ethics committees (RECs) of trained volunteers who consider research ethics proposals involving human subjects their tissue or data, and which took place within the HSC and the wider NHS. The staff in ORECNI manage the RECs and ethics submissions from researchers to the RECs.

The BSO Board was advised in August 2015 that all Committees have been given fully quality accreditation by the Health Research Ethics Service, London. During 2015-16, the ORECNI became the UK leader in terms of meeting nationally set Key Performance Indicators of fast and efficient ethical review.

### 8.1.3 ITS ISO 20000- 1:2011 accreditation

Quality and performance are key considerations for the BSO IT Service. ITS has been an 'ISO 9001:2008 TickIT' quality accredited service since its creation in 2009, undergoing biennial independent external audits. In 2014-15 ITS was successful in achieving the ISO 20000- 1:2011 standard. The ISO 20000 standard is an externally accredited industry standard which is based on the Information Technology Infrastructure Library (ITIL) best practice guidelines for the provision of IT Services.

These standards and guidelines give BSO a template to support our aim of providing the highest quality IT service to our HSC customers. We are continually working to increase the scope of adoption of ISO 20000 across service areas and teams are subject to bi-annual surveillance audits by an approved external auditor. The following service areas are currently in scope:



- E-mail
- Theatre Management Systems (TMS)
- Human Resources, Payroll, Travel and Subsistence (HRPTS)
- Finance, Procurement and Logistics (HRPTS)
- Electronic Care Record (ECR)
- Integration.

Work is underway to bring the NI Fire and Rescue Service (NIFRS), Desktop Service, Laboratory Systems, Communication and General Medical Services into scope during 2016-17.

ITS continues to lead on the development and delivery of the NI Electronic Care Record (NIECR). In 2015-16 the eHealth Programme team was the recipient of two awards, the Northern HSC Trust Chairman's award for innovation and the inaugural HSCNI eHealth award for innovation. Both awards recognised the introduction of

electronic consultant triage for outpatient referrals to secondary care within NIECR. This project involved collaboration between the ITS General Medical Services, Integration and NIECR teams to produce a scalable innovation with the capability to underpin outpatient reform initiatives.

During the year ITS Systems Operations undertook a further roll-out of Patient Facing Services to enable the public to book GP appointments and order repeat prescriptions online

#### 8.1.4 Lexcel

During the year our Directorate of Legal Services continued to be accredited to the ISO and LEXCEL Quality awards following external assessment in October 2015. This continued accreditation was a significant achievement with the Audit Report.



*“The Practice continues to demonstrate a high level of compliance ... supported by the fact that no non-compliances were raised during the assessment.”*

*Audit report*

#### 8.1.5 Internal Audit

Our Internal Audit Service is accredited to the ISO 9001: 2008 quality standard. It is also an approved Association of Chartered Certified Accountants (ACCA) Gold Status Employer Training and Professional Development Service. The ACCA accreditation recognises the Unit’s high standards of staff training and development. BSO Internal Audit Unit has both the ‘trainee development’ stream for trainees taking the ACCA qualification and the ‘professional development’ stream. The ‘trainee development’ stream recognises the Unit’s existing in-house training and simplifies trainees’ membership application process.

The ‘professional development’ stream recognises the Unit as an employer who provides learning opportunities for ACCA members to support their continuing professional development (CPD). This registration has been assigned for six years from 2012, after which it will be reassessed by ACCA.





### 8.1.6 Investors in People

The Business Services Organisation was successfully re-accredited against the Investors in People international quality standard in November 2015. This framework delivers organisational improvement through people. It centres on the development of people to achieve continuous improvement for BSO and the people we serve. By investing in our staff, we are investing in the improvement of health and social care.

During the course of the assessment, the external assessor met with approximately 80 staff and managers from across the organisation. The report highlighted a number of positives in the achievement of the standard and a number of areas for improvement. These areas will build into the BSO Annual Business Plan 2016-17 and the review of HR Strategy.

Hugh McPoland, Director of Human Resources and Corporate Services commented in the December 2015 edition of the monthly BSO staff magazine, 'Business Matters':

*"I am delighted to confirm that the BSO has met the requirements of the IIP Standard. May I, on behalf of myself and the Chief Executive, thank everyone for their assistance and support during this process? It is clear that the contributions of our staff provided the assessor with a good understanding of the practices and culture in BSO. She has provided feedback which reflects the commitment of all our people to this organisation.*

*I would also wish to record my particular appreciation to Paula Smyth, Kevin Clarke and their colleagues for their drive and commitment to the standards and the re-accreditation process."*



*"I am delighted to confirm that the BSO has been re-accredited as an IIP organisation. This is a great reflection of this organisation and provides a platform to further develop our HR processes."*

**Hugh McPoland, Director of  
Human Resources &  
Corporate Services**

### 8.1.6 HSC Clinical Education Centre

The achievements of a number of CEC staff were recognised throughout the year:

- Maurice Devine, Assistant Head received an MBE for his services to Nursing, in the field of learning disabilities in particular.
- Sharon Maginn won the Valerie Morrison Award for Excellence in Nurse Education
- Several CEC members of staff have attended or presented at regional, national or international events including:
  - Dr Esther Reid, Midwife Education Consultant was accepted to attend a five day research workshop on “Social Technology Solutions to *Postnatal Care*” in Florianapolis, Brazil. The workshop ran from 7 to 11 March 2016;
  - Majella Doran, Senior Education Manager together with Anne Finn (recently retired Nurse Education Consultant) presented at the Commonwealth Nurses and Midwives Conference on 12 and 13 March 2016;
  - Dr Glynis Henry, Head of CEC presented at an Ulster University event for pre-registration nursing students in complex situations.

### 8.1.7 HSC Leadership Centre

The HSC Leadership Centre team was delighted to win the Healthcare People Management Association (HPMA) ‘NI Team of the Year’ during 2015-16. At the same ceremony, one of the Leadership Centre consultants picked up the HPMA Professional Award 2015-16. Another consultant was awarded the Development Means Success ‘HR Professional of the Year 2016’ which spans all sectors in Northern Ireland.

### 8.1.8. Small Business Research Initiative

This BSO team achieved international recognition during 2015-16 through being awarded €3.65m of European Union funding through the Horizon 2020 programme. BSO, on behalf of HSCNI, is the lead organisation of 14 consortium members across eight EC member states. This funding is being directed towards Pre-Commercial Procurement activities which ultimately will aim to improve the quality of life of post stroke patients (Mobile Assistance for Groups in the Community, commonly known as the MAGIC project).

## 8.2 BSO Benchmarking

A corporate approach to monitoring and review quality of performance and value for money in BSO services includes a rolling programme of benchmarking. This includes participation by a number of BSO services in a benchmarking “club” conducted by the Chartered Institute of Public Finance and Accountancy (CIPFA). Results are compared with other participating organisations, which are typically based in Great Britain and predominantly local government.

Each service area in BSO is responsible for completing the relevant questionnaire issued by CIPFA. Customer Care and Performance has a central role in the administration and verification of the questionnaires and analysis of reports which are produced by CIPFA. Following completion of a benchmarking exercise, results are collated and summarised to report to the BSO Senior Management Team and Board along with defined follow on actions.

In general, the Benchmarking Exercises indicate that services provided by the BSO represent good value for money and it is important that customers continue to be made aware of this. For example, our HSC Pensions Service is the second most efficient Public Sector Pensions Provider in comparison with 46 other UK providers. All Service Level Agreement targets and Key Performance Indicators have been achieved against a backdrop of statutory changes, a 3.05% growth in Scheme membership and taking on new services such as GP Locum claims and the NI Fire and Rescue Service.

Arrangements are also underway to continue to expand the number of BSO services participating in the corporate Benchmarking exercises.

## 9.0 Conclusion

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This Third Annual Quality Report of the BSO has been produced in accordance with the guidance issued by the Department of Health. Broadly speaking, this is that the format of the report should follow the five strategic Goals of the Quality 2020 Strategy. These Strategic Goals are as follows:

- Transforming the Culture
- Strengthening the Workforce
- Measuring the Improvement
- Raising the Standards
- Integrating the Care.

In seeking to fulfil these goals, it is clear that financial constraints will be a part of our life for the foreseeable future and will continue to impact on HSC resources. BSO, as the key support organisation within HSC, will continue to monitor their effects on the quality of our services and seek to meet them with creativity and innovation.