

East Midlands Clinical Audit Support Network (CASnet)

Minutes of the meeting held 7th July 2015 at Cripps PGC, Northampton General Hospital.

Present

Carl Walker	-	(Chair) University Hospitals of Leicester
Roger Simpson	-	Derbyshire Community Health Services
Rubina Reza		Derbyshire Healthcare NHS Foundation Trust
Janie Chan	-	Leicestershire Healthcare Partnership
Tom Noble		St Andrews Healthcare
Amy Summers		Northampton General Hospital
Hannah Bardney		Northampton General Hospital
Stephen Ashmore		Clinical Audit Support Centre
Richard Higgins		Health Education East Midlands
Russell Mason		Sherwood Forest Hospitals NHS FoundationTrust
Michaela Sautoro		Kettering General Hospital
Paul Gilliatt	-	Northampton General Hospital.
Mavis Hawley	-	In attendance - minutes

Apologies

Apologies		
Mandy Smith		HQIP
Anne Marie Murket		Rainbows Hospice
Helen Turner		Nottingham University Hospitals NHS Trust
Ranjit Badhan	ı	Derby Royal Hospitals
Kim Mian		Nottingham University Hospitals NHS Trust
Donna Staples		Sherwood Forest Hospitals NHS FoundationTrust
Tracy Ruthven		Clinical Audit Support Centre (CASC)
Helen Cameron		Chesterfeld Royal Hospital
Marina Otley		Nottingham City Care Partnership NHS Trust
Kim Mian	1	Nottingham University Hospitals NHS Trust
Julie Smith		Nottinghamshire Healthcare NHS Trust (Forensics)
Carlton Symonds		Leicestershire Healthcare Partnership

		Action
1.	Welcome	
	Carl Walker opened the meeting and welcomed attendees.	
	and the state of t	
2.	Minutes of the CASnet Meeting held 30 th April 2015 – actions and matters arising	
	The CASnet website is now live and will continue to be updated by Tim Lessells. The membership list will be updated and will then be available on the website. It is intended that we will have two membership lists. One will be the actual membership list which will be each organisation's representative only. The second list will be for any additional audit professionals that would like to receive information directly. A form will be sent out to the current mailing list for completion.	MH/CW
	We have recently received a request from a colleague in Milton Keynes to join CASnet.	
	Roger asked whether we should return to using Round Robins to update colleagues on what each organisation was doing but Carl felt that the new meeting format made these unnecessary. Networking outside the meeting is encouraged and network emails are frequently used. The event in November will be an opportunity to share successes and failures.	
	Paul Gilliatt is setting up a NICE Sub Group.	
	Thanks were extended to Marina for taking the minutes at the last meeting.	
3	Action Planning for Clinical Audit – Group sharing session	
	Carl facilitated the session.	
	Key points	
	 Good action plans lead to improvement. This is the most difficult part of the clinical audit process. Most action plans are variations of "raise awareness and re-audit in 6 months". Root cause analysis is not being widely used to improve the quality of action plans. Project sponsors do not take their responsibilities seriously and rarely help with the action plan. 	
	CW to circulate slides	CW

		Action
4	HUGGs – an alternative to action planning Colleagues to consider using HUGGS as an alternative to action plans in clinical audit to help improvement.	SA
	Stephen Ashmore's presentation to be circulated along with the HUGGS examples.	
5	Update from Clinical Audit Support Centre (CASC)	
	Stephen reported on the 5 th annual review of clinical audit vacancies. There are limitations to the study because only jobs advertised on NHS Jobs and with clinical audit/effectiveness in the title are included. It is also not known if the posts advertised are new or existing posts. However because the same methodology is used each year the findings are of significant value. The highest number of vacancies was reported in 2014/15. The highest total value of vacancies was reported in 2014/15. The lowest number of temporary posts was reported in 2014/15. There was a fall in Band 7/8 vacancies in 2014/15 compared to previous years. There were no Clinical Commissioning Group (CCG) audit vacancies advertised in 2014/15, CCG's don't appear to be employing clinical audit staff The Care Quality Commission is putting GP practices in special measures and one of the reasons given is that they are not participating in clinical audit. The Junior Doctor Quality Improvement Competition will close	
	on the 3 rd September. Please encourage any junior doctors in you organisation to enter. If sufficient entries from the region it was agreed to hold the CASNet competition again.	AII
6	Update from the National Quality Improvement and Clinical Audit Network (NQICAN) meeting – Carl Walker	
	Thirteen out of the 14 networks were represented at the last meeting.	
	There is now a lot of co-operation between NQICAN and National Advisory Group on Clinical Audit and Enquiries (NAGCAE). Kat Young sits on NAGCAE as the Clinical Audit Professional.	
	Clinical Audit is a quality improvement process and not just quality assurance.	
_	If anyone has any examples of using electronic patient records	All

		Action
	these are still needed by Carl for sharing with the other networks.	
	The Care Quality Commission is using national clinical audit as part of the inspection process. There is no national audit for primary care.	
	The Stroke Audit information is now available to clinicians and the general public.	
	There is a delay in the publication of the HQIP guidance on Information Governance. This will include the process for informing patients how their data is used for clinical audit.	
	Kate Godfrey had now left HQIP and Mandy is currently managing on her own in terms of local audit support. They are unable to appoint any replacements until the contract has been renewed.	
7.	Update - NICE	
	Clinical audit support team has now been withdrawn by NICE and they will no longer produce audit tool alongside their guidance. The NICE resources are being directed towards monitoring Quality Standards.	
	Deborah Callaghan has replaced Sally as our contact at NICE. Mavis to invite Deborah to our next meeting / shared learning event to speak about the role of clinical audit & NICE.	МН
8.	Feedback from Health Education East Midlands Quality	
0.	Improvement Forum.	
	Richard Higgins attended on behalf of James McLean and Jill Guild.	
	Health Education East Midlands (HEEM) are responsible for commissioning the training of doctors and other healthcare professionals. They ensure that doctors get the right training in line with General Medical Council (GMC) requirements.	
	HEEM provide funding from their training budget to the hospitals.	
	Clinical audit is a big part of what they do. Jill Guild is Head of Quality and. James McLean is a Director.	
	Carl attended a HEEM Quality Improvement meeting at Boots in Nottingham. He will send out the abstracts of the QI posters from the meeting.	CW

		Action
	Advance Practitioner Nurses are now being used to supplement GPs. It would be useful to get HEEM's perspective on how we support Junior Doctors. It was noted that nurses also have a negative view of clinical audit probably because they are consistently being audited. It was agreed that education should be one of the themes for a future meeting.	МН
9	Update from HQIP Mandy's update was circulated with the agenda.	
	There will be no HQIP Conference this year but there will be free places available at the EXPO Conference which will be clinician focused although audit professionals are welcome to apply. Information is available on the HQIP website. Mandy will attend the November meeting.	
40	Chair 9 Danutu Chair	
10	Chair & Deputy Chair Carl Walker will continue as Chairman. Marina Otley and Paul Gilliatt were voted in as Joint Deputy Chairs. Mavis Hawley will continue as Administrator. PG will deputise for CW at NQICAN if required. CW stated that MO & PG will form an exec to make decisions on behalf of the network in terms of planning meetings and events as and when required.	CW / MO / PG
11	Planning of Shared Learning Event in November We will claim for the whole £2,500 we are allowed to cover venue and catering. The venue will need to have break out rooms.	МН
	There will be a poster competition but it will be restricted to one poster per organisation. There will be a call for abstracts as soon as we have a definite date and venue.	МН
	The event will be open to clinicians and audit professionals. The number of delegates will be restricted to 100. Marina and Paul will vet the applications if the event is over subscribed.	MO/PG
	Mavis will e-mail to everyone to find a suitable date in November and begin to organise the event.	МН
	The venue will be in the Leicester area.	
12	East Midlands Radiology Consortium and Clinical Audit. The main issue is clinicians having access to data from other hospitals for clinical audit. Clinical Audit Managers to discuss	

		Action
	within their own organisations and report back to Carl.	All
14	Any other business - Next Year's Meetings	
	CW / MH will identify next year's meetings and circulate dates to members.	CW / MH
	11 th November 2015 – Nottinghamshire – Public Patient Involvement – Kim Rezel (HQIP)	

