



Actions Arising from National Quality Improvement (inc Clinical Audit) Network (N-QI-CAN) meeting held on 11th June 2019 in Room 137B, Skipton House, NHS England, Elephant and Castle, London SE1 6LH

Present:

Carl Walker (NQICAN Chair)
Heather Pratt (CLCAN)
Diane Lynch (MEAN)
Deb Kershaw (GMCAN)

Donna Staples (East Mids)
Sarah Byrne (MCAN)
Sarah Chessell (SWANS)
Laila Gregory (L-QI-CAN)

Tracy Millar (MEAN)
Tracey Deadman (SCCAN)
Alka Anoop (EoECAN)
Denise Thompson (SCAN)

Co-opted members

Kim Rezel (HQIP)

Lisa Cowie (NHS England / Improvement)

Apologies

Julie Hancocks – Communications officer
Sue Venables – General Secretary
Linda Chadburn
Mark Hannigan (RCPCH)

Susan Latchem, HQIP
Janette Mills (C&LN)
Lara Amusan (RCP)
Vicky Patel (YEARN)

Rachel Tebay, RCP
Richard Arnold (NHSE)
Catherine Dunn (NWMHCAN)
Neena Garnavos (RCP)

Supporting papers & presentations for the meeting are available to view on the NQICAN Networking & Sharing Forum (NNSF) - [link](#)

RAG Status Key:	5 Complete	4 On Track	3 Some Delay or no update received.	2 Significant Delay – unlikely to be completed as planned	1 Not yet commenced
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N-QI-CAN Action Notes – 11th June 2019 meeting (Actions RAG updated as at 30/8/19)

Ref	ITEM / ACTION	BY WHOM	BY WHEN	RAG
1.1	Welcome and minutes of the last meeting. CW welcomed everyone to the meeting and it was noted that there were no declarations of interest were made. Action points from the meeting 20 th March agreed to be an accurate record. By way of an update to members, CW confirmed that Julie Hancocks has stood down as communications officer for NQICAN and has now taken up the position of NQICAN accountant. CW to send flowers and card to thank Julie for her support.	CW	Jul-19	5
1.2	CW also confirmed that Sue Venables, General Secretary is currently off and receiving treatment. Discussed and agreed that Layla Gregory (LG) would provide admin cover from a network member at the September meeting if SV is not back at work. Agreed that CW would send SV flowers and a get well soon card.	LG / CW	Jul-19	5
1.3	Refreshments and lunch. LC agreed to ensure that basic refreshments and lunch would be made available for future meetings. Agreed by all that meal vouchers is a better way due to variable numbers / reduce waste.	LC/RA	Sept-19	4
2	Update on Unresolved actions from previous meeting			
2.1	CW/SV to advertise for volunteers to help with Forum administration and development.	CW/SV	Sep-19	3
2.2	CW to seek guidance in regards to Getting it Right First Time (GIRFT) role alongside the National Clinical Audit agenda. CW to invite Dawn Chamberlain from GIRFT to attend September meeting.	CW	Sep-19	4
2.3	NQICAN chair post currently funded via HQIP as part of the National Clinical Audit and Patient Outcomes Programme (NCAPOP). Would be more independent if funded from NHS England / NHS Improvement. CW to discuss with RA.	CW/RA	Sep-19	4
2.4	Agreed that published costs of National Clinical Audit's do not include the hidden costs to trusts to collect all the data. NQICAN to set up a T&F group to cost this out next year and review YEARN paper on NCAs. EMCASNet and MEAN to help with this.	CW	Jul-19	1
2.5	Case ascertainment for quality accounts – currently no progress on this issue but NHSE/HQIP are aware. NCEPOD send out a helpful statement to trusts. RA – to look to asking NCA providers to produce a similar statement. Unlikely to be any changes this year.	RA	Sept-19	3
2.6	Request that NHSE/HQIP list individual audits in the Quality Account list rather than 'programme' HQIP will discuss with	RA/KR	Jun-19	3

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	NHSE.			
2.7	CW to consider whether NQICAN can set up a template for the National Clinical Audit section of the 19/20 Quality Account.	CW	Dec-19	1
2.8	QSIR to include clinical audit in future course updates – SC/CW to review content once drafted.	L Hibbs, SC / CW	Sep-19	3
2.9	SC to provide QSIR training for NQICAN members at a future meeting – deferred – agreed local training is best option due to logistics / time.	SC	Sep-19	5
2.10	CW / SV to draft guidance for members and our networks in terms of collaborating with and/or cascading information from private companies. In the meantime CW advised it was best to use the forum to share information and not use email unless clearly beneficial to network members.	CW/SV	Sep-19	4
3	NHS England Update– Lisa Crowie (Paper B)			
3.1	LC provided a verbal update to the group and confirmed that she would circulate paper on Thursday following National Quality Board Partners Sub-group to include updates on patient safety framework, formation of NHSX, merger of NHS England and NHS Improvement, role of data coordination board and Sustainability and Transformation Partnerships (STPs). Members to contact Lisa if any queries.	LC	Jun-19	5
3.2	Following a review around the publication process of National audit reports – it has been agreed that the reports will be published by NHS England on the second Thursday of the month under the ‘Super stats Thursday’ banner. CW requested that any delays in reporting should be transparently reported on the NHSE, HQIP and NCA provider’s websites and the reasons of the delay.	LC / RA / KR	Sept-19	3
4	HQIP Update (Paper C)			
4.1	Kim Rezel (KR) provided an update to the group, outlining points from the update paper (C) with key points including: <ul style="list-style-type: none"> Clinical Audit Awareness Group. Agreed that CW to hold telecom with HQIP and setup a task and finish group of volunteers for clinical audit awareness week. KR to threat set up a thread on the forum for ideas. 	CW / KR	Jun-19	5
4.2	<ul style="list-style-type: none"> National Audit Reports. KR confirmed that a new NHS trust web page has been setup with short cuts to national clinical audit reports. KR requested that members test the page and provide feedback to HQIP. 	All	Sept-19	4
4.3	<ul style="list-style-type: none"> National Ophthalmology Database Audit Programme. KR confirmed this audit has now been decommissioned from the NCAPOP programme and that Trusts now have to pay to take part in the audit. 	CW	Sept-19	5

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4.4	<ul style="list-style-type: none"> Communication with Trusts. It was felt that communication with trusts is poor, with letters regarding national audit not being sent to clinical audit departments and leads in Trust. Following discussion, agreed that NQICAN would set up a list of all trusts and contact details to improve communication and receipt of letters. 	CW	Sept-19	1	
4.5	<ul style="list-style-type: none"> National Clinical Audit Benchmarking Reports. Agreed KR to confirm the timeline for rollout of the national clinical audit benchmarking reports for the rest of the NCAPOP programme. 	KR	Sept-19	5	
4.6	<ul style="list-style-type: none"> In general it was agreed that in future – items for discussion need to be raised in advance if a response was expected at the meeting from HQIP. KR would invite a member of the HQIP National Audit team to join the group. 	All / KR	Sept-19	5	
5	Other National Clinical Audit related items:				
5.1	National Audit Participation Anxiety Disorder (NAPAD). CW outlined paper D which was approved and CW thanked East Midlands for providing feedback from their meeting and a plan for improvement. CW to arrange telecom with Lorna (HQIP) and Roger/Marina to see how we can work on this together going forward.	CW	July-19	5	
5.2	CASC Annual Survey – Final Report (see link to report and NNSF discussion). CW asked all members to read the CASC annual survey. CW confirmed that CASC have written to NHS England and HQIP requesting a response to the report. Noted that it would be good to see the response so that there is clarity on the action that is being taken forward following disappointing feedback on national clinical audit.	All	Sept-19	3	
6	Results of N-QI-CAN Survey – Paper E				
6.1	<p>CW outlined the following key points.</p> <ul style="list-style-type: none"> The initial results of the NQICAN survey were presented at the meeting, elements discussed and agreed actions to take forward. CW to finalise the report and this will be shared on the forum. Agreed that network chairs would review the data and discuss full report and regional feedback at next network meeting and take forward actions where required. CW thanked the task finish group for their help in delivering this project effectively within the required time frame. 	CW	Sept-19	3	
6.2	<ul style="list-style-type: none"> Initial discussions of the survey results showed there are a number of barriers to undertake clinical audit locally at present. All members agreed to give further consideration around how as a group we can support and influence overcoming these barriers. 	All	Sept-19	3	
7	Chairs Update Presentation – papers F - J				
7.1	Clinical Audit Summit feedback and blog (paper G). Following discussion, agreed that the Summit was a success.	CW	Sept-19	3	

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	Agreed that N-QI-CAN should plan to do our own annual conference in May next year to showcase clinical audit as there has been a gap since the HQIP conferences ended. Agreed in future that support would not be provided to private non-NHS events unless agreed by the group.			
7.2	NNSF metrics (paper I) Agreed the forum metrics were encouraging. Noted new feature of members only sub-forum setup for YEARN and SWANs. CW asked if anyone else would like this feature could they please contact him. CW asked for volunteers to set up a guide for the forum and a user group panel to help with the development.	All	Sept-19	3
7.3	Forum members. Discussed and agreed that all network chairs would check their list of members to ensure they are correct on the forum and sub forums as necessary.	All	Sept-19	3
7.4	Sharing successes. Noted that the next sharing successes deadline is 2nd of July. Everyone was encouraged to submit applications which could then be used during CAAW and for the conference.	All	Nov-19	4
7.5	NNSF Newsletter review (paper J). Noted that the newsletter has received positive feedback. CW asked everyone to let him know of any points that need to be added each quarter. The new post of month was supported as a good idea to encourage people to post.	All	Sept-19	5
7.6	Finance plan for 2019/20. Following discussion, agreed that monies for 2019/20 will be shared equally across the networks again this year. CW to send out finance application form. Monies will equate to around £1,000 per network when rollover included. 18/19 accounts will be published in annual report once finalised.	CW	Sept-19	3
7.7	Infographics roll out. CW confirmed that the Infographics pilot was successful and thanked DK and Marina Otley for helping with this call. Agreed CW to send out further details to all regarding they can use the network account and use the software which is web-based.	CW	Jul-19	3
7.8	Network Annual reports. Agreed that all networks are to submit annual report before the end of June. CW agreed to send out the annual report template. CW thanked Denise and Alka who have already submitted their reports. Carl to draught national report based on regional annual reports, annual survey, objectives and accounts.	All	Jul-19	2
7.9	Update on Case capture proof of concept project. CW confirmed that Sharon Rawlinson will attend the next meeting to give update on from NICE on case capture proof-of-concept project. CW confirmed the project will continue until the end of 2019 and should anyone want to take part please contact CW. CW also confirmed that details are on the peer review section of the forum.	CW / All	Sept-19	4

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8.0	N-QI-CAN strategy / forward plan			
8.1	Post of Chairman election. CW confirmed that a discussion of the post of chairman election will be held once the future of the networks has been agreed with NHS England. CW to provide an update at the September meeting.	CW	Sept-19	3
8.2	NQICAN strategy. Following extensive discussion, agreed new strategy needed for all networks with a new shared purpose, aims and priorities going forward. Agreed priority projects will be shared across regional chairs / networks with the aim of providing protected time to help chair deliver workload as current model not sustainable. This will include writing guidance and providing training along with delivering our objectives. Plan will also include involving other network members more routinely in our work programme.	CW	Sept-19	3
8.3	Agreed that all members would review chairs and officers responsibilities and also Laila to start regional chairs roles and responsibilities so that this can be included in the business plan for going forward currently large deficit between hours funded and hours to deliver.	LG / All	Sept-19	4
9.0	Any other business			
9.1	Denise Thompson SECEN. Denise informed members of the group that she will be stepping down as chair of SECEN following the July meeting and putting a call out for a new chair. Sarah lead praise for Denise's support to herself and all members.	DT	Sept-19	4
9.2	Learning and Training Resources. Further to previous unsuccessful attempts to collate this – it was agreed that members provide further information for the learning and training resources either national online or local case studies to share to Tracey Millar who will need map this to the template previous agreed.	All / TM	Sept-19	4
10	Date and Time of next meeting			
	Thurs 12th Sept 10:30 – 15:30 Room 102A 1st Floor, Skipton House, NHS England, Elephant and Castle, London Wed 4th Dec 10:30 – 15:30 TBC			