



**HQIP**

Healthcare Quality  
Improvement Partnership

# Standards for Clinical Audit Learning and Development

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**Quintessent Ltd**

# Contents

		<b>Page</b>
Foreword		3
Introduction		4
Standards		5
Standard 1	Content	7
Standard 2	Management of teaching and Resources	10
Standard 3	Selection, access and quality	16
Standard 4	Assessment of learner progress	18
Standard 5	Evaluation of the overall programme	21
Standard 6	Evidence of impact	25
Glossary of terms and references		26

## Foreword

These draft standards have been commissioned by the Healthcare Quality Improvement Partnership (HQIP) as part of its remit for the re-invigoration of

clinical audit in health care.

They have been developed in partnership with Quintessent Ltd - a consultancy company with experience of standards, quality and audit in health - and an expert advisory group made up of clinical audit specialists and practitioners from the field.

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A number of other people involved were consulted and their contribution has been invaluable in the development process.

# Introduction

Ensuring and assuring the quality of learning and development in clinical audit is a key objective of the HQIP. One of the methods that help to improve quality is through the use of standards. These provide a benchmark against which a clinical audit learning and development programme can be self evaluated and a method to identify gaps and best practice.

This document sets out six standards, designed to quality assure clinical audit learning and development programmes, including their delivery and outcomes.

The use of the standards is voluntary. There is no requirement for their use but they provide assurance to:

- Training providers – that their clinical audit programmes will meet the needs of sponsoring employers and organisations
- Potential learners – as a way of checking that prospective programmes meet their learning needs in clinical audit
- Commissioners – that the clinical audit programmes they commission meet a recognised level
- Organisations and managers – as a way of checking that the clinical audit training they use meets the needs of their staff and organisation
- Academic Institutions – as a means to assess the quality of proposed programmes and courses
- Accreditation bodies – who may wish to incorporate these standards into their existing quality assurance arrangements.

The standards have been designed to be applicable to clinical audit training and development programmes for an advanced level. However, they can be applied to any clinical audit programme, for example - clinical audit training for Foundation Doctors, with the understanding that full compliance across all the standards and criteria may not be achieved or possible in different contexts.

The use of selected standards and /or criteria within the standards are also applicable to shorter programmes and training interventions, such as the clinical audit training requirement in undergraduate training<sup>1</sup>.

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<sup>1</sup> 'assessors' might be internal or external. Sometimes termed 'surveyors'

# Standards

The six standards cover the following:

1. Content
2. Management of teaching and resources
3. Selection, access and quality
4. Assessment of Learner Progress
5. Evaluation of the overall programme
6. Evidence of impact

The purpose of the standards is to be used by providers of clinical audit learning and development programmes who wish to self assess their programmes.

## Criteria

Each standard is underpinned by a set of criteria. Criteria are cross-referenced as appropriate. The criteria have been set out in a format that can be used as a template for assessment and are:

<i>Measurable</i>	both by staff implementing the criteria and by those measuring compliance against them
<i>Achievable</i>	some providers will find it more difficult to achieve the criteria than others but there is no point including criteria that are not achievable
<i>Flexible</i>	so that they can be used by all types of providers and at all levels as appropriate
<i>Acceptable</i>	representing a consensus of currently accepted roles and responsibilities
<i>Adaptable</i>	non prescriptive – stating what should be in place and not how something should be put in place – so they can be implemented in accordance with local needs
<i>Nationally applicable</i>	offering a common framework against which all providers within the UK can be assessed

## **Guidance**

Guidance is marked italics beneath some of the criteria. The aims of guidance are to:

- help providers, trainers and other staff interpret the criteria
- provide guidelines for meeting the criteria
- provide an indication of the areas that 'assessors<sup>2</sup>' could assess during an 'inspection,' where such a situation is in place.

## **Standards review**

The standards will be subject to regular review in accordance with changes to clinical audit practice and healthcare. Any such reviews will be based on consultation.

## **Using the standards**

The standards have been developed primarily as a means of self-assessment by training and development providers. However, as indicated above, other institutions, organisations and individuals may use the standards as a means of quality assurance.

## **Glossary of terms**

Appendix 1 provides a glossary of the terms used in this document. The term 'provider' is used to describe both public and private providers of education, training, learning and development.

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<sup>2</sup> assessors' might be internal or external to the provider /organisation. Sometimes termed 'surveyors'

### Standard 1: Content

**The training organisation has a clearly defined and set down curriculum and programme design, which is flexible, reviewed and updated**

Criteria		Yes/No	Comments /Action
1.1	<p>The programme follows a written curriculum.</p> <p><b>Guidance</b></p> <p><i>A clear curriculum plan will set out how the 'outcomes for learners' will be met across the programme as a whole.</i></p> <p><i>Providers will consider at which level they target the course, depending on the previous training and qualifications of the learners. This could be based on a training needs analysis and/or NHS Knowledge and Skills Framework (NHS KSF) (Oct 2004)</i></p> <p><i>The curriculum will be structured to provide a balance of learning opportunities enabling the learners to link theory and practice</i></p> <p>Cross reference to Standard 4.4</p>		
1.2	<p>The curriculum reflects relevant best practice as described in the current literature.</p>		

Criteria		Yes/No	Comments /Action
	<p><b>Guidance</b></p> <p><i>For example, New Principles of Best Practice in Clinical Audit<sup>3</sup>, HQIP. 2011.</i></p>		
1.3	Both potential and current learners have comprehensive information about the curriculum, what is expected of them and how they will be assessed.		
1.4	The curriculum is regularly evaluated, to ensure that it is still relevant to clinical audit practice, and providers seek feedback from:		
	1.4.1 Learners		
	1.4.2 Employers		
	<p>1.4.3 Internal and/or external quality assuring bodies</p> <p><b>Guidance</b></p> <p><i>Where training is provided in Institutions such as Universities and Colleges the content and outcomes of the training may be quality assured as part of existing formal internal or external quality assuring arrangements.</i></p> <p><i>For example: Academic Institutions who subscribe to Quality Assurance Agency for Higher Education (QAA)</i></p>		

<sup>3</sup> New Principles of Best Practice in Clinical Audit, Edited by Robin Burgess. Second Edition. Healthcare Quality Improvement Partnership. Oxford. 2011

<b>Criteria</b>		<b>Yes/No</b>	<b>Comments /Action</b>
1.5	The curriculum and course content are adapted to reflect the results and outcomes of feedback and evaluation  <a href="#"><u>Cross reference to standard 5</u></a>		

## Standard 2: Management of teaching, resources and facilities

**Providers ensure that clinical audit trainers and facilitators are of the highest quality and both qualified and competent to teach and develop excellent clinical audit practitioners. Providers ensure that their resources and facilities are fit-for-purpose.**

Criteria		Yes/No	Comments/Action
2.1	<p>Providers ensure that those responsible for the delivery and content of the course have the capacity and capability to do the job.</p> <p><b>Guidance</b></p> <p><i>For example,</i></p> <ul style="list-style-type: none"> <li>• <i>Providers ensure that there is a sufficient link between the demands of the learner group and the volume of staffing and resources (for example large enough teaching/seminar/break out rooms and/or sufficient bandwidth for online courses) and</i></li> <li>• <i>The following HR policies are in place and adhered to:</i> <ul style="list-style-type: none"> <li>○ <i>Recruitment policies</i></li> <li>○ <i>Processes for appraisal</i></li> <li>○ <i>Opportunities for personal and professional development</i></li> </ul> </li> </ul>		

Criteria		Yes/No	Comments/Action
2.2	<p>In planning and delivering their programmes, providers ensure that they only use trainers and facilitators who they assess as competent to design, plan and teach appropriate courses that develop high quality clinical audit practitioners.</p> <p><b>Guidance</b></p> <p><i>All facilitators and trainers are appropriately qualified to deliver the learning/training/development and be able to demonstrate their competence to do so.</i></p> <p><i>It is desirable that all trainers and facilitators have:</i></p> <ul style="list-style-type: none"> <li>• <i>Good understanding of the health care sector</i></li> <li>• <i>Clinical knowledge</i></li> <li>• <i>Attended a recognised train the trainers course in health (preferably in clinical audit/clinical effectiveness)</i></li> <li>• <i>Experience of training clinicians</i></li> <li>• <i>Relevant experience in clinical audit</i></li> </ul> <p><i>And (essential for the advanced programme) have successfully undertaken a recognised teaching qualification or educational course to enable them to deliver education and teaching of this type.</i></p> <p><i>For example:</i></p> <ul style="list-style-type: none"> <li>• <i>City and Guilds 7303</i></li> <li>• <i>Preparing to teach in the lifelong learning sector (PTLLS)</i></li> <li>• <i>Post Graduate Certificate of Education (PGCE) i.e. Post Compulsory Education and Training.</i></li> </ul> <ul style="list-style-type: none"> <li>• <i>Successfully run and delivered accredited training, education or</i></li> </ul>		

Criteria		Yes/No	Comments/Action
	<p><i>development programmes.</i></p> <p><i>In their assessment of competency, providers may look for evidence in references, CVs, professional qualifications, outcomes from practical application etc.</i></p>		
	<p>2.2.1 <b>And</b> trainers/facilitators, responsible for the clinical aspects of the programme, are able to demonstrate experience in undertaking and delivering clinical audit projects (through all five stages of the cycle) for the clinical aspects of the programme</p>		
2.3	<p>Trainers and facilitators ensure that they can facilitate learning through the provision of suitable learning resources (as appropriate to the level of the programme), suitable accommodation and technology for each programme:</p>		
	<p>2.3.1 Learning resources are timely and reflect the content of the programme</p> <p><b>Guidance</b></p> <p><i>Learning resources should be provided by appropriate authorities such as Royal Colleges and HQIP</i></p>		
	<p>2.3.2 Learning resources are made available in a format that all learners can access</p> <p><b>Guidance</b></p> <p><i>For example: Learning resources are differentiated to meet the needs of the</i></p>		

Criteria		Yes/No	Comments/Action
	<p>following:</p> <ul style="list-style-type: none"> <li>• People with visual difficulties</li> <li>• People with hearing difficulties</li> <li>• People with dyslexia</li> <li>•</li> </ul> <p><a href="#"><u>Cross reference to standard 3</u></a></p>		
	2.3.3 Learners have access to computers and IT software, where applicable.		

Criteria		Yes/No	Comments/Action
	<p>2.3.4 Accommodation is accessible for all learners</p> <p><b>Guidance</b>  <i>Reference needs to be made to Equality Act 2010 and provisions within relating to disability discrimination</i></p> <p><a href="#"><u>Cross reference to standard 3</u></a></p>		
2.4	<p>Providers demonstrate a range of innovatory and interactive methods for enhancing learning and acquisition of practical skills</p> <p><b>Guidance</b>  <i>It is expected that the content and delivery of programmes/courses will:</i></p> <ul style="list-style-type: none"> <li>• <i>Be linked to current roles</i></li> <li>• <i>Incorporate reflective practice</i></li> <li>• <i>Be practically based</i></li> <li>• <i>Have scientific rigour</i></li> <li>• <i>Incorporate lecture based teaching methods</i></li> <li>• <i>Incorporate scenarios and case studies</i></li> <li>• <i>Incorporate group discussions</i></li> <li>• <i>Use people involved in clinical audit</i></li> <li>• <i>Provide opportunities for learners to facilitate their own learning</i></li> <li>• <i>Provide opportunities for innovative on-going methods of learning and assessment (to embed learning) such as quizzes, practical demonstrations, shared learning forums, e-learning, use of podcasts and video</i></li> <li>• <i>Provide a mix of classroom and off-site learning</i></li> <li>• <i>Reflect the content and format of the programme.</i></li> </ul>		

Criteria		Yes/No	Comments/Action
	<a href="#"><u>Cross reference to standard 4</u></a>		
2.5	<p>All learners have two levels of support:</p> <ol style="list-style-type: none"> <li>1. Tutor or equivalent to guide them through the programme</li> <li>2. Clinical/field support to mentor them through the practical elements of the programme</li> </ol> <p><b>Guidance</b></p> <p><i>This may be a clinician with clinical audit training or a clinical audit facilitator</i></p>		

### Standard 3: Access

#### Access to programmes is fair and inclusive

Criteria		Yes/No	Comments/Action
3.1	<p>Where applicable, the provider has policies and procedures in place to ensure appropriate access to the programme. As a minimum, these cover</p> <ul style="list-style-type: none"> <li>• Clear processes for selecting and recruiting learners to the course</li> </ul> <p><b>Guidance</b></p> <p><i>Entry requirements may be set by the sponsors</i></p> <p><i>Inclusion – for example there are policies in place to ensure that no learner is discriminated against for age, gender, race or disability</i></p> <p><i>Reference should be made to latest guidance in the Equality Act 2010</i></p> <p><a href="#"><u>Cross reference to standard 2</u></a></p>		

Criteria		Yes/No	Comments/Action
3.2	<p>The programme provided ensures that the curriculum is differentiated and inclusive for all learners.</p> <p><b>Guidance</b> <i>For example - learning resources are differentiated to meet the needs of the following:</i></p> <ul style="list-style-type: none"> <li>• <i>People with visual difficulties</i></li> <li>• <i>People with hearing difficulties</i></li> <li>• <i>People with dyslexia</i></li> <li>• <i>People with mobility difficulties</i></li> </ul> <p><a href="#"><u>Cross reference to standard 2</u></a></p>		
3.3	<p>The provider has policies and procedures in place to ensure that the learners' health, safety and welfare are considered</p>		
3.4	<p>The provider has policies and procedures in place to ensure confidentiality.</p> <p><b>Guidance</b> <i>The provider complies with the Data Protection Act 2003 and Freedom of Information Act 2000</i></p>		
3.5	<p>All learners start their training with a signed learning agreement, which sets out the requirements of the programme and the responsibilities of the learner, sponsor and provider in achieving them.</p> <p><b>Guidance</b> <i>The learning agreement is signed by the learner, their sponsor/manager and (programme) provider</i></p>		

## Standard 4: Assessment of Learner Progress

### The assessment process matches the learning outcomes

Criteria		Yes/No	Comments/Action
4.1	<p>The assessment processes are matched to learning outcomes</p> <p><b>Guidance</b></p> <p><i>There is congruence between programme aims, learning outcomes and assessment processes</i></p> <p><i>Examples of learners' work can be used to assess this</i></p>		
4.2	<p>There are formative and summative processes of assessment in place</p> <p><b>Guidance</b></p> <p><i>For example:</i></p> <ul style="list-style-type: none"> <li>• <i>Formative assessment may be through group discussion or activity</i></li> <li>• <i>Summative assessment may be through an exam or essay</i></li> </ul>		
4.3	Learners will receive:		
	4.3.1 Feedback on their performance at key milestones		

Criteria		Yes/No	Comments/Action
	4.3.2 Timely and accurate guidance about assessments  <b>Guidance</b>  <i>This will cover the assessment format, length and range of content, marking schedule and contribution to overall grade</i>		
4.4	Assessments set will be fit-for-purpose  <b>Guidance</b>  <i>Assessments are based upon best practice in clinical audit <sup>4</sup> and are relevant to the learning objectives set and the programme content involved.</i>  <i>Cross reference to Standard 1.1</i>		
4.5	Providers can demonstrate consistency in any marking process adopted  <b>Guidance</b>  <i>Marking criteria will include arrangements for verification and consistency of marks or grades</i>		
	4.5.1 There are processes in place to demonstrate how this is done.		
	4.5.2 Marking criteria are clear to all		

<sup>4</sup> New Principles of Best Practice in Clinical Audit, Edited by Robin Burgess. Second Edition. Healthcare Quality Improvement Partnership. Oxford. 2011

Criteria		Yes/No	Comments/Action
4.6	<p>Examiners and assessors are appropriately selected, trained and supported and appraised</p> <p><b>Guidance</b>                      For example:</p> <p><i>Marking processes may involve a number of stages, for example, marking by tutors, moderation, external examiners and approval by Examination Board. Regardless of the process adopted, providers need to demonstrate that all those involved have been appropriately selected, trained, supported and appraised. For providers working within academic institutions this will be set out in their quality assurance policies and protocols and guidance for individual departments and programmes developed.</i></p>		

### Standard 5: Evaluation of the overall programme

**Providers will routinely monitor their effectiveness to evaluate the extent to which the intended learning outcomes are being attained.**

*Note: This standard cover the ongoing evaluation of the programme and not the individual learner progress which is covered in Standard 4 above.*

Criteria		Yes/No	Comments/Action
5.1	The programme is evaluated on an on-going basis. This will be pre, during and post programme  <u><a href="#">Cross reference with standard 1</a></u>  This evaluation model includes:		
	5.1.1 Learner progress		
	5.1.2 The extent to which learning outcomes are being achieved for sponsoring organisations and commissioners		
5.2	Learners and sponsors /managers contribute to the full evaluation process  <u><a href="#">Cross reference with Standard 1</a></u>  <u><a href="#">Cross reference with 5.3</a></u>		

Criteria		Yes/No	Comments/Action
5.3	The evaluation process includes:		
	5.3.1 Administration of a pre programme /course questionnaire to assess baseline knowledge of learners		
	5.3.2 Setting and reviewing of learner personal objectives		
	5.3.3 End of session/learning intervention evaluations		
	5.3.4 Administration of post course /programme questionnaire to assess learner progress against baseline		
	5.3.5 Feedback from sponsors /managers		
	5.3.6 Development of action plans for improvement		
5.4	<p>There are processes in place for sponsoring organisations to evaluate the impact of the learners' clinical audit practice in advanced level programmes</p> <p><b>Guidance</b></p> <p><i>Refer to best practice guidance<sup>5</sup>. This may be through:</i></p>		

<sup>5</sup>New Principles of Best Practice in Clinical Audit, Edited by Robin Burgess. Second Edition. Healthcare Quality Improvement Partnership. Oxford. 2011

Criteria		Yes/No	Comments/Action
	<ul style="list-style-type: none"> <li>• <i>The ability of learners to show clear understanding of the need to complete a full audit cycle</i></li> <li>• <i>Improvement in clinical audit competencies across an organisation</i></li> <li>• <i>Potential return on investment.</i></li> </ul>		
5.5	<p>Providers act on the outcome of internal and external evaluations as appropriate</p> <p><b>Guidance</b></p> <p><i>The evaluations and action plans are documented</i></p> <p><i>For public providers there may be a requirement for external evaluation by an external accrediting body such as the General Medical Council (GMC) and the QAA. External reviewers may be academic/training peers.</i></p> <p><i>The results of these evaluations and external evaluations may be incorporated into an overall evaluation /annual report</i></p>		
5.6	<p>The providers provide any sponsoring organisations and commissioners access to internal and external evaluations</p> <p><b>Guidance</b></p> <p><i>The results of the evaluations may be incorporated into an overall evaluation of the programme/course. An evaluation or annual report could be produced which:</i></p> <ul style="list-style-type: none"> <li>• <i>Describes how the evaluation has been done</i></li> <li>• <i>Impact of the course</i></li> </ul>		

<b>Criteria</b>		<b>Yes/No</b>	<b>Comments/Action</b>
	<i>This could be done at the end of each programme/course and/or on an annual basis</i>		

### Standard 6: Evidence of Impact

**The provider can demonstrate that the learning provided by the programme should contribute to improvements in the quality of patient care and safety**

Criteria		Yes/No	Comments/Action
6.1	<p>External and internal providers maintain close links with clinical audit departments and other sponsors to ensure that their programme is contributing to likely improvements patient care and safety</p> <p><b>Guidance</b>                      This may be done through:</p> <ul style="list-style-type: none"> <li>• Regular face to face meetings</li> <li>• Access to clinical audit department reports</li> <li>• Access to board reports</li> <li>• Published evaluations</li> <li>• Reviews of audit programmes</li> <li>• Awards (e.g. HQIP Clinical Audit Awards)</li> <li>• Compliance with Quality Improvement, Productivity and Prevention (QIPP)</li> </ul>		

## Appendix 1: Glossary of terms and references

<b>Provider</b>	<p>Public or private provider of education, training, learning and development. A public provider may, for example, be internal function within a public sector organisation such as an NHS Foundation Trust, and educational institution, an external public sector training, development and educational function, or combination of public sector organisations.</p> <p>Private providers may be partnerships, limited companies, consortium and companies and or individuals.</p> <p>Providers may be a combination of public and private sector providers.</p>
<b>Programme</b>	<p>A clinical audit training course ranging in time span depending on level of knowledge and attainment required</p>
<b>Sponsoring organisations</b>	<p>Sponsoring organisations may include employers, NHS bodies such as Foundation Trusts and Research and Development Foundations</p>
<b>Assessors</b>	<p>Assessors' might be internal or external to the organisation. Sometimes termed 'surveyors'. Assessors check compliance against the Standards.</p>
<b>Trainers</b>	<p>Individuals or groups of people qualified to deliver specific clinical audit skills and knowledge</p>
<b>Facilitators</b>	<p>Individuals or groups, not necessarily qualified in clinical audit but experienced in enabling the transfer of skills and knowledge in a group situation</p>
<b>The framework for higher education qualifications in England, Wales and Northern Ireland (FHEQ).</b>	<p>The framework for higher education qualifications in England, Wales and Northern Ireland (FHEQ) is an important reference point for providers of higher education. The FHEQ and associated guidance for implementation, has been written to assist higher education providers to maintain academic standards: to inform comparability and facilitate student and graduate mobility. .</p>

<b>The NHS Knowledge and Skills Framework (NHS KSF) (October 2004)</b>	<p>The NHS KSF is designed to:</p> <ul style="list-style-type: none"><li>• identify the knowledge and skills that individuals need to apply in their post</li><li>• help guide the development of individuals</li><li>• provide a fair and objective framework on which to base review and development for all staff</li><li>• provide the basis of pay progression in the service.</li></ul>
<b>City and Guilds 7303</b>	<p>C&amp;G 7303 is Qualifications and Curriculum Authority (QCA) accredited.</p> <p>The City and Guilds 7303 Award is suitable for those who work, or want to work, as:</p> <ul style="list-style-type: none"><li>• Teachers/Trainers/Tutors in the Lifelong Learning Sector and Adult/Community Education</li><li>• Trainers of personnel in commerce, industry, public and voluntary sectors or HM Forces</li><li>• Technicians and Support Staff in Further and Adult Education</li><li>• Part time teachers in further and adult education</li></ul>

<p><b>The Equality Act 2010</b></p>	<p>The Equality Act 2010 aims to protect disabled people and prevent disability discrimination. It provides legal rights for disabled people in the areas of:</p> <ul style="list-style-type: none"> <li>• employment</li> <li>• education</li> <li>• access to goods, services and facilities including larger private clubs and land based transport services</li> <li>• buying and renting land or property functions of public bodies, for example the issuing of licenses</li> </ul> <p>The Equality Act also provides rights for people not to be directly discriminated against or harassed because they have an association with a disabled person. This can apply to a carer or parent of a disabled person. In addition, people must not be directly discriminated against or harassed because they are wrongly perceived to be disabled.</p>
<p><b>Disability Discrimination Act (DDA)</b></p>	<p>From 1 October 2010, the Equality Act replaced most of the Disability Discrimination Act (DDA). However, the Disability Equality Duty in the DDA continues to apply.</p>
<p><b>Preparing to teach in the life long learning sector (PTLLS)</b></p>	<p>An Award (City and Guilds) in Preparing to Teach in the Lifelong Learning Sector covers the basics of teaching in continuing and adult education - including how to plan sessions, motivate learners and use a variety of assessment methods.</p> <p>It's a first step towards official practitioner status - a full licence to teach in the lifelong learning sector</p>

<p><b>Post Graduate Certificate of Education (PGCE) i.e. Post Compulsory Education and Training</b></p>	<p>A PGCE course mainly focuses on developing teaching skills, and not on a particular subject area. Therefore students are expected to have a good understanding of their chosen subject(s) – usually to degree level – before they start training.</p>
<p><b>Equity and excellence: Liberating the NHS, DH, July 2010</b></p>	<p>The NHS White Paper, Equity and excellence: Liberating the NHS, (DOH, and July 2010) sets out the Government's long-term vision for the future of the NHS. The vision builds on the core values and principles of the NHS - a comprehensive service, available to all, free at the point of use, based on need, not ability to pay.</p> <p>It sets out how the NHS will:</p> <ul style="list-style-type: none"> <li>• put patients at the heart of everything the NHS does;</li> <li>• focus on continuously improving those things that really matter to patients - the outcome of their healthcare; and</li> <li>• empower and liberate clinicians to innovate, with the freedom to focus on improving healthcare services</li> </ul>
<p><b>QIPP agenda (Quality, Improvement, Productivity and Prevention)</b></p>	<p>QIPP underpins the implementation of Lord Darzi's recommendations for improving quality and efficiency in the NHS as set out in <i>High Quality Care For All: NHS Next Stage Review final report</i>, June 2008</p> <p><a href="http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH">www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH</a></p>
<p><b>General Medical Council (GMC)</b></p>	<p>The GMC regulates medical education and training in the United Kingdom. This covers undergraduate education, the Foundation Programme and specialty including GP training. We run quality assurance programmes for UK medical schools and postgraduate deaneries to ensure that these standards and outcomes are achieved</p>

<b>Quality Assurance Agency for Higher Education (QAA).</b>	The primary responsibility for academic standards and quality in UK higher education rests with individual universities and colleges, each of which is independent and self-governing. QAA checks how well they meet their responsibilities, identifying good practice and making recommendations for improvement. We also publish guidelines to help institutions develop effective systems to ensure students have high quality experiences.
<b>Data Protection Act 2003</b>	The Data Protection Act applies to personal information and ensures that it is handled properly.
<b>Freedom of Information Act 2000 (FOI)</b>	The FOI gives a person the right to ask any public body for all the information they have on any subject you choose. Unless there's a good reason, the organisation must provide the information within 20 working days. Request will be handled under the Data Protection Act

## **Acknowledgements**

To be completed following the wider final consultation

