

## **FINAL**

### **MEMORANDUM OF UNDERSTANDING BETWEEN *THE NATIONAL CLINICAL AUDIT ADVISORY GROUP THE HEALTHCARE QUALITY IMPROVEMENT PARTNERSHIP AND THE NATIONAL INSTITUTE FOR HEALTH AND CLINICAL EXCELLENCE***

#### **TO WORK TOGETHER TO SUPPORT THE IMPLEMENTATION OF NICE GUIDANCE THROUGH THE REINVIGORATION OF CLINICAL AUDIT**

##### **1. RATIONALE**

The National Institute for Health and Clinical Excellence (NICE), the National Clinical Audit Advisory Group (NCAAG) and the Healthcare Quality Improvement Partnership (HQIP) have a shared interest in the drive to improve quality of care for patients through clinical audit.

HQIP have a contract with the Department of Health (DH) to manage the programme of national clinical audit projects previously commissioned by the DH and Healthcare Commission. These involve services in England and Wales. The contract also gives HQIP a remit to reinvigorate local clinical audit in England. The NCAAG set the strategic direction for this work and advise the DH in England on clinical audit issues, planning and development.

NICE is a special health authority and provides national guidance on the promotion of good health and the prevention and treatment of ill health in line with the best available evidence of clinical effectiveness and cost effectiveness for England and Wales. Implementation support (such as audit support) is only provided for England.

All parties are seeking to promote clinical audit as a process for improving patient care by encouraging and developing best practice and the uptake of NICE guidance.

##### **2. PURPOSE OF THE AGREEMENT**

The purpose of this memorandum is to formally set out a collaboration between NCAAG, HQIP and NICE. The aim is to join up the strategic development and delivery of the national clinical audit programme and local audit support with NICE efforts to support the implementation of relevant guidelines. NCAAG, HQIP and NICE recognise that by working together they can enhance the impact that clinical audit can have on improving the quality of care for the benefit of patients.

### **3. FUNCTIONS**

#### **3.1. NCAAG**

The National Clinical Audit Advisory Group, has been established by the DH to: drive the reinvigoration of clinical audit, both nationally and locally, yielding new publicly available information to support improvements to clinical practice and service delivery; be steering group to the National Clinical Audit and Patient Outcomes Programme (NCAPOP), providing advice and guidance on the overall programme of work, and in particular to consider proposals for new audits or for discontinuing existing audits; and advise on issues as requested by the DH.

#### **3.2 HQIP**

The management of the clinical audit reinvigoration programme, called for by the English CMO and government, has been awarded to a consortium comprised of the Academy of Medical Royal Colleges, the Royal College of Nursing and the Long Term Conditions Alliance. The consortium has established a new company limited by guarantee that has applied for charity status – HQIP. Its strategic objectives are to manage a successful and balanced national audit programme in England and Wales, to reinvigorate clinical audit at the local level in England, to support and enable a culture of quality improvement and to develop the role of HQIP as a centre for healthcare quality improvement and so to sustain and grow HQIP as a business.

#### **3.3 NICE**

The National Institute for Health and Clinical Excellence (NICE) was formed on 1 April 2005, when the National Institute for Clinical Excellence took on the functions of the Health Development Agency to create a single excellence-in-practice organisation responsible for providing national guidance on the promotion of good health and the prevention and treatment of ill health.

Currently NICE produces guidance in four areas of health:

- Technology appraisals - guidance on the use of new and existing medicines and treatments within the NHS in England and Wales.
- Clinical guidelines - guidance on the appropriate treatment and care of people with specific diseases and conditions within the NHS in England and Wales.
- Interventional procedures - guidance on whether interventional procedures used for diagnosis or treatment are safe enough and work well enough for routine use in England, Wales and Scotland.
- Public health intervention and programme guidance.

In 2004, NICE established a programme to support implementation. This programme covers three main areas:

***Working with partner organisations*** – this includes a wide range of organisations, all with the aim of underpinning and supporting the implementation of NICE guidance. Joint work with HQIP and NCAAG would fall within this category, and is seen as particularly important to embed the use of NICE guidelines into NCAPOP and other national and local clinical audit initiatives, and to provide synergistic audit support tools.

***Providing practical support*** – this includes cost impact tools, slide sets and audit support for each clinical guideline at the point of launch, and other guidance specific support materials. A series of “How to” guides provide generic advice to organisations on the processes required to put guidance into practice, and a “Shared Learning” database on the NICE website provides local examples of where implementation has been successful. Recent initiatives include the introduction of commissioning guides and a small team of implementation consultants to support local trusts.

***Assessing feedback*** – this is important to identify where recommendations are being successfully implemented, and where barriers remain. Some of the feedback is based on routine data, including the findings of national audit reports, and some is more informal via the implementation consultants.

#### **4 SPECIFIC AREAS OF COMMON INTEREST**

A number of common interests between the three organisations have been identified. An annual joint work programme will be developed by NCAAG, HQIP and NICE between October and March of previous financial year to agree the specific activities to be undertaken under each heading.

##### **Strategic development and forward planning of national clinical audit programme**

NCAAG will use the availability of NICE guidance as a criterion for decision making on the prioritisation of future topics for national clinical audits. NICE guidance will also inform revisions and updates to national clinical audit projects to ensure alignment and consistency with NICE standards.

##### **Communications**

In the interests of enhancing each others efforts to reinvigorate clinical audit and to provide clarity and mutually reinforcing messages, NCAAG, NICE and HQIP will work together to develop some key common messages and share plans for communicating on clinical audit with clinical leaders, opinion formers and audit/clinical governance leads and staff within trusts. Likely areas of overlap include: engagement with National Clinical Directors in their role of informing clinical audit priorities; regular engagement with the National Clinical Audit Forum; and the development of an audit community around particular topic interests.

### **Local audit support**

HQIP and NICE will work together to inform the development and dissemination of local audit support and other relevant tools. This will help ensure synergy between the NCAPOP, local audit support initiatives and NICE audit support, and that they are clinically relevant and as useful as possible to the NHS.

### **Development of standards and evidence-based indicators**

Lord Darzi's *High Quality Care for All* report highlights a number of areas where NICE will be asked to build on its current role in order to expand the reach and number of national quality standards. This work is in progress and is a potential area for collaboration between NICE and HQIP.

### **Databases/registries**

As part of its interventional procedures programme, NICE supports the reporting of outcomes of certain procedures. The purpose of this is to collect research information about effectiveness that will inform future updates of the NICE guidance. As research, this activity falls outside the remit of NCAPOP. However, if this collection of registry-type data can be developed into systems to capture information that would enable clinical audit of provider organisations or practitioners, as the National Joint Registry has done, it could become a potential area for NCAPOP funding. HQIP would wish to collaborate with NICE on the process of development of databases for clinical audit as part of its developmental role in building audits in areas where audit is currently not adequately represented.

### **Development of guidance specific online educational tools**

As part of the NICE implementation strategy we work with a range of organisations to embed NICE guidance into curriculum planning and other educational initiatives. We also develop online educational tools in specific areas, including how to do audit on specific guidance topics. HQIP also plans to develop on-line resources which will include audit tools and clinical audit educational material. To avoid duplication HQIP and NICE will identify common areas of interest through the annual joint work programme.

### **Sharing Information**

NICE, HQIP and NCAAG will share information where this is appropriate to inform future work planning.

This will include anonymised information from the NICE implementation consultants (who work with a wide range of organisations to promote uptake of NICE guidance) to inform the planning of local audit support initiatives.

## **5 DELIVERING THE MEMORANDUM OF UNDERSTANDING**

NCAAG, HQIP and NICE will develop an annual work programme to agree the activities which need to take place in the areas of common interest identified above. This will be developed by the operational leads from each body during October to March of each year.

A formal review meeting will be held six monthly to review progress against the MOU, to update it as necessary and to enhance ongoing learning from each other's work. Task-specific meetings may also be held as needed.

The three bodies will also:

- Establish lead contacts, who will be:
  - NICE: Julie Royce, Associate Director, Implementation Support  
Kirsty Maclean Steel, Audit Programme Manager
  - NCAAG : Nick Black, Chair  
Sarah Schofield, Member
  - HQIP: Robin Burgess, Chief Executive  
Darren Thorne,  
National lead for local quality improvement
- Report the outcome of our joint working as appropriate to our relevant shared stakeholders.

Signed on behalf of:

NCAAG by Nick Black, Chair

NICE by Val Moore, Implementation Director

HQIP by Robin Burgess, Chief Executive