

NATIONAL QUALITY BOARD

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UPDATE ON THE BOARD'S WORK PROGRAMME

*A note from the NQB secretariat*

<b>Annex:</b> Letter to inform trusts about new requirements for Quality Accounts
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**Summary**

1. This paper provides a brief update on progress in taking forward key aspects of the Board's work programme that do not have a dedicated agenda item for the fifth meeting.
2. Updates on the following areas are included:
  - i. the Quality Standards programme;
  - ii. the work of the Quality Information Committee (QIC);
  - iii. the work on Quality Accounts; and
  - iv. the development of the patient-led inspections process.

**NICE Quality Standards**

3. Following referral of the core library of Quality Standards, NICE has been mapping the topics against available sources of high quality accredited

guidance. Those with associated guidance will be prioritised for early development, and a schedule with planned timelines will be published shortly on the NICE website. Some topics, however, appear to have no underpinning source of guidance, and these will need a Ministerial referral for NICE to begin new guideline development. This includes topics such as cystic fibrosis, managing symptoms with an uncertain cause, and radiotherapy services. The Department of Health (DH) will also work with relevant professional bodies and societies to help ensure external guidance is produced to a standard that will enable it to be included in Quality Standard development.

4. Recently published Quality Standards include hip fracture and lung cancer. A three month consultation on the process and methods for developing Quality Standards closed in March and, in light of the proposals, DH is amending the process to ensure it is more efficient. One aspect of this is establishing a small number of standing committees (Quality Standard Advisory Committees) to work closely with relevant topic experts. As standing committees, they will avoid the need for regular induction sessions, help ensure consistency of output and enable us to increase the speed of output of Quality Standards.

**Definition of a NICE Quality Standard:**

NICE Quality Standards are a set of some 5-10 specific concise quality statements and associated measures that:

- act as markers of high quality, cost effective care across a pathway or clinical area;
- are derived from the best available evidence from NICE guidance and other sources accredited by NHS Evidence;
- and,
- are produced by NICE collaboratively with the NHS and

social care professionals, along with their partners and service users.

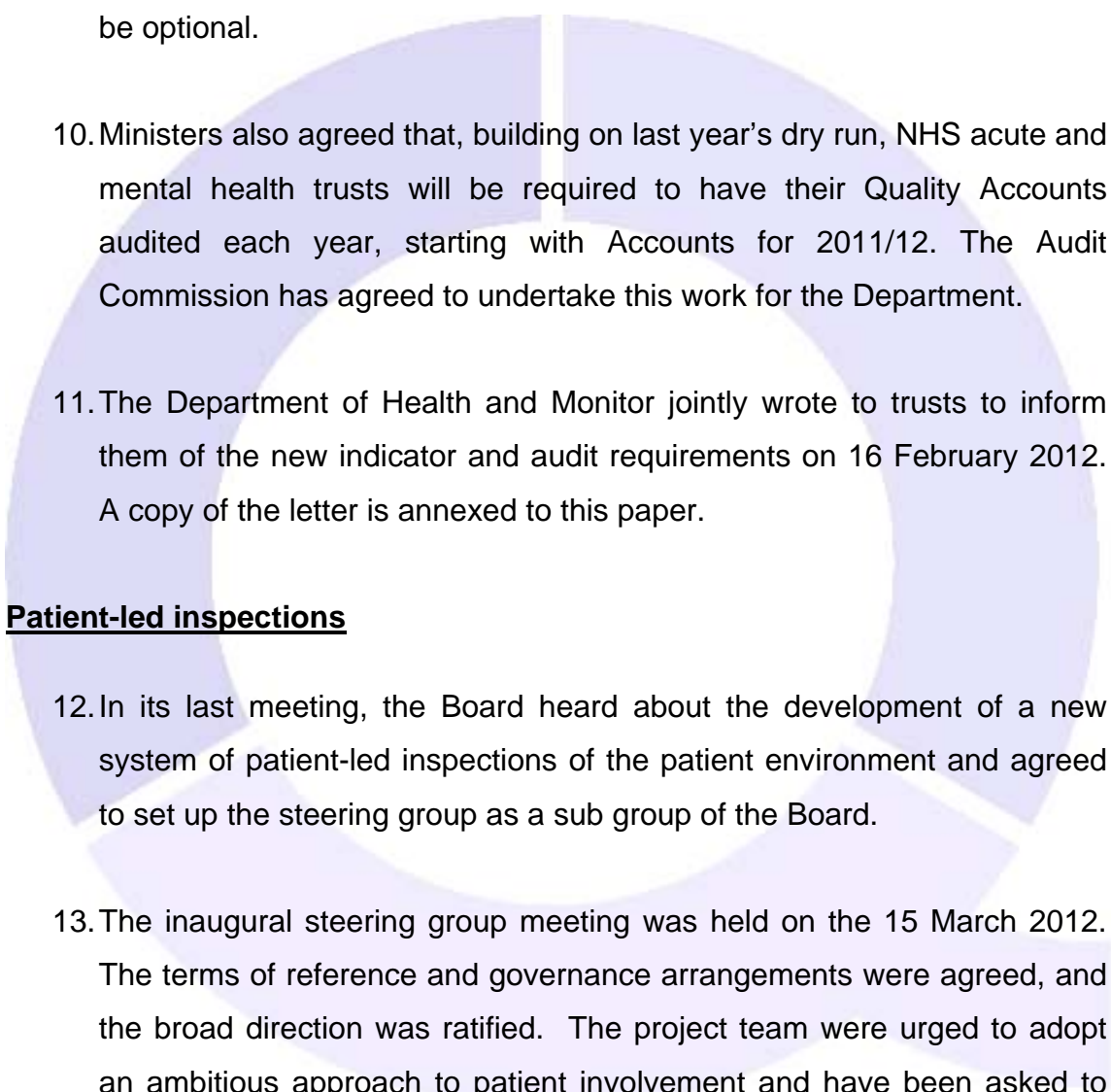
Quality Standards are used to define what good looks like in the context of the statutory duties to secure continuous improvement in the quality of NHS healthcare. For example, alongside NICE clinical guidelines and other evidence, NICE's NHS Quality Standards form the basis of commissioning guidance.

### **Quality Information Committee (QIC)**

5. The QIC is currently finalising a document detailing the scope of its work over the period April 2012 to March 2013, which fully conforms with the terms of reference set by Board.
6. The QIC has been asked by the Board to lead a project to produce a report on data quality across health and social care from a national perspective. The review will consider evidence including research publications and other work on data quality at a national level by any type organisation. Submissions are also being sought from relevant sources.
7. The QIC will review this evidence and produce a report with its conclusions and recommendations in late summer or early autumn, which the Board will be invited to comment on.

### **Quality Accounts**

8. During its meeting on 15 December 2011, the Board approved proposals to mandate a core set of indicators for NHS trust and foundation trust Quality Accounts, and require NHS acute and mental health trusts to obtain external audit assurance of their Quality Accounts.

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9. Ministers accepted the Board's conclusions. They decided to introduce the new indicator requirements in the 2012/13 reporting year, to allow time to explore additional indicators for mental health trusts and community trusts. Including the indicators in Accounts for 2011/12 would be optional.
10. Ministers also agreed that, building on last year's dry run, NHS acute and mental health trusts will be required to have their Quality Accounts audited each year, starting with Accounts for 2011/12. The Audit Commission has agreed to undertake this work for the Department.
11. The Department of Health and Monitor jointly wrote to trusts to inform them of the new indicator and audit requirements on 16 February 2012. A copy of the letter is annexed to this paper.

### **Patient-led inspections**

12. In its last meeting, the Board heard about the development of a new system of patient-led inspections of the patient environment and agreed to set up the steering group as a sub group of the Board.
13. The inaugural steering group meeting was held on the 15 March 2012. The terms of reference and governance arrangements were agreed, and the broad direction was ratified. The project team were urged to adopt an ambitious approach to patient involvement and have been asked to provide further information on the "Scope of Inspections", "What We Mean by Patient-led Inspections" and "What Success Will Look Like". These papers are being drafted and will be circulated to the steering group members shortly.
14. Project funding for the development phase has now been approved and a media and communications plan has been devised. The first patient

workshop is scheduled for 20 April 2012 and will be followed by a more extensive patient survey and a Parliamentary event for around 60 participants. The Health and Social Care Information Centre is also gathering feedback from NHS staff and is working hard to ensure that the patient voice is pre-eminent in the inspection process.

**NQB Secretariat**

**11 April 2012**

