

**CASnet**  
East Midlands Clinical Audit Support Network



**East Midlands Clinical Audit Support Network (EMCASnet)**

**Minutes of the meeting held 22<sup>nd</sup> September 2016 at Derbyshire Healthcare F.T.  
Kingsway Site, Derby DE22 3LZ**

**Present**

Marina Otley (Joint Chair)	-	Nottingham CityCare
Paul Gilliatt (Joint Chair)	-	Northampton General Hospital
Russell Mason	-	Sherwood Forest Hospitals NHS Trust
Lisa Barrett	-	Derbyshire Community Health Services
Chandni Gadhia	-	Leicestershire Partnership Trust
Cheryl Withenshaw	-	Lincolnshire Partnership Foundation Trust
Rubina Reza	-	Derbyshire Healthcare Foundation Trust
Mark Capel	-	St Andrews Healthcare
Carl Lomas	-	Leicestershire Partnership NHS Trust
Mavis Hawley	-	In attendance - minutes

**Apologies**

Mandy Smith	-	HQIP
Donna Staples	-	Sherwood Forest Hospitals
Sarah Jessop	-	Chesterfield Royal Hospital
Joanne Gooch	-	Lincolnshire Community Health Services
Roger Simpson	-	Derbyshire Community Health
Tracy Ruthven	-	Clinical Audit Support Centre (CASC)
Stephen Ashmore	-	Clinical Audit Support Centre (CASC)
Anne-Marie Murkett	-	Rainbows Hospice for Children and Young People
Sharon Sinha	-	United Lincolnshire Hospitals
Richard Higgins	-	Health Education East Midlands
Helen Turner	-	Nottingham University Hospitals
Gareth Tomlinson	-	Nottingham University Hospitals
Sandra Owdziej	-	Derby Teaching Hospitals
Lucy Sitton-Kent	-	Q Network

		<b>Action</b>
<b>1</b>	<b>Welcome</b>	
	Marina Otley opened the meeting and welcomed attendees.	
<b>2</b>	<b>Minutes of the previous meeting and matters arising</b>	
	Mandy Smith is retiring and is not being replaced. HQIP will not longer be represented at CASnet meetings <b>Action: Mavis to remove Mandy from the mailing list.</b>	<b>MH</b>

		<b>Action</b>
	The minutes of the meeting were approved.	
<b>3</b>	<b>Update from Q Network – Lucy Sitton-Kent</b>	
	Lucy was expected later as she had a meeting early morning. She was delayed long than expected and later sent her apologies.	
<b>4</b>	<b>Update from NQICAN &amp; HQIP - Carl Walker</b>	
	<p>Carl has sent his apologies and no member of his team has attended.</p> <p>Marina provided the update using information posted on Twitter. Marina reminded everyone that we now had a Twitter page for CASnet and there is also lots of useful contacts to be made through Twitter. Some colleagues are still unsure about using Twitter so Mavis to resend the crib sheet Marina put together</p> <p><b>Action: Attach Marina’s twitter sheet to these minutes</b></p> <p>The National Advisory Group on Clinical Audit and Enquiries (NAGCAE) which is chaired by Professor Nick Black has been disbanded with immediate effect but no reasons have been given to date. It was felt that this is not a good sign, hopefully HQIP will now take a more active role although it was noted that they are on a 1 year rolling contract. Mandy is not being replaced and Sue Latchem who is Head of Operations is taking over some of her role.</p> <p>Cathy Hassell went to NQICAN to talk about her research project. It is hoped that a more detailed report will be available from Carl at the next meeting.</p> <p>There is a 7 day service clinical audit project in progress. NHS England has written to the Chief Executives of Acute Trusts.</p> <p>Subscription funding for National Clinical Audit and Patient Outcomes Programme (NCAPOP) was also discussed (see later item).</p> <p><b>Action: Circulate minutes when they become available.</b></p>	<b>MH</b>
<b>5</b>	<b>Update from Clinical Audit Support Centre (CASC)</b>	
	<p>Stephen and Tracy have sent apologies</p> <p>The Junior Doctor Competition deadline has now passed. 70% of submissions were clinical audit.</p>	

		Action
<b>6</b>	<b>Twitter</b>	
	<p>Marina gave a brief update on recent discussions on Twitter-</p> <p>Clinical Audit Awareness week is the 22<sup>nd</sup> to 30<sup>th</sup> November. Lisa said that Derbyshire Community is having a clinical audit awareness day that week. There will be 4 people talking about their experience of clinical audit rather than about a specific project. Last year's event was so successful that this year there has been an over subscription of speakers. Cheryl has also organised a clinical audit day but it has had to be moved from this week to a day in January,</p> <p>Lisa thinks that sometimes it's the language that we use which puts people off. They have changed the language and the emphasis now is on improving things for patients. This is working well. Those who haven't been chosen for the event have been re-directed to other forums. Cheryl told of one of their consultant's secretary who is an enthusiastic advocate of clinical audit and can really get the message across.</p> <p>It was felt that we need to get better at trumpeting the work we do. It was noted that 2 month's notice of the week was not enough and a guidance pack would have been helpful.</p> <p><b>Action: Feedback to HQIP re notice and welcome pack</b></p> <p>The poor quality of national audits is undermining any efforts to promote clinical audit to clinicians. Lisa is passing on some follow up national clinical audits until the changes in practice from the original are embedded. She has the support of her Medical Director for this. This was considered to be good practice. It was noted that most Medical Directors insist they are done because they have to report in the Quality Accounts.</p> <p>The Academy of Fabulous NHS Stuff <a href="http://fabnhsstuff.net/about-us">http://fabnhsstuff.net/about-us</a> Is having a change day on the 19<sup>th</sup> October. This will include Randomised Coffee Trials as another source of innovative ways of sharing and showcasing.</p> <p>NHS Improvement are running a consultation on their Never Event Policy.</p> <p>Mark is putting together an Autism and Learning Difficulties Audit Group which will involve patients.</p>	<b>PG/MO</b>
<b>7</b>	<b>Update from Health Education East Midlands</b>	
	Richard has sent his apologies.	
<b>8</b>	<b>Update on acquiring a CASnet Bank Account and Terms of Reference – Marina Otley &amp; Paul Gilliatt</b>	

		<b>Action</b>
	<p>At the last meeting there was a discussion about the funding we are receiving from HQIP for this financial year. In the past we have received up to £2,500 for events and £1,000 for administration. This has now been reduced to £936 to cover both. (post meeting note – this includes VAT).</p> <p>An application to the Co-Operative Bank has been put together to enable CASnet to have it's own bank account into which the HQIP funding can be paid and also any additional funding we can raise. In order to apply for the bank account certain changes have to be made to our Terms of Reference. These were discussed at the meeting and approved subject to minor changes</p>	
<b>9</b>	<b>Risk Scoring for Clinical Audit - discussion</b>	
	<p>Please find attached the presentation by Marina pulling together responses from members.</p> <p>The level of support provided varies greatly from organisation to organisation. Although we try to support all requests that's not always possible. RAG rating is used quite widely. The Health Assure system has a module which sends out letters when progress is delayed. It was felt that sometimes enough time is not allowed to come up with and action robust plans.</p> <p>The RAG rating of outcomes seems to be encouraging use of clinical audit as an assurance tool which it is not. It was noted that with RAG ratings depending on where the limits are set there could be considerable room for improvement which would not be addressed as the outcome would be graded green and these would be overlooked in favour of those outcomes graded red and amber.</p> <p>It was noted that the CQC haven't generally asked for Clinical Audit information. They don't usually seem very interested although there have been some exceptions.</p>	
<b>10</b>	<b>Registering and Following Up Re-audits - discussion</b>	
	<p>Re-audits are difficult to implement:-</p> <ul style="list-style-type: none"> <li>• Junior Doctors move on and it's no longer relevant to their practice.</li> <li>• There are not always action plans so there can be no re-audit.</li> <li>• If practice is changed that sometimes means a change of questions.</li> <li>• If there is a significant time lapse then that is no longer relevant to the original audit.</li> </ul> <p>It was pointed out that if we are true to the audit cycle then a re-audit is necessary and should form part of the action plan.</p>	

		<b>Action</b>
	<p>Some organisations still class an audit as a re-audit even after two years. In many cases the audit and the re-audit are registered separately Sometimes the re-audit is known as the second cycle which is perhaps a better description. It can be easy to get bogged down with re-audits and there is not time to embed the improvements.</p> <p>Guidance on Information Governance is to be published soon by HQIP.</p>	
<b>11</b>	<b>CASnet's relationship with East Midlands Quality Improvement Network – Marina Otley &amp; Paul Gilliatt</b>	
	<p>As Lucy was unable to attend this will now be put on the February agenda  <b>Action: February agenda item</b></p>	<b>MO/PG/ MH</b>
<b>12</b>	<b>Subscription Funding for NCAPOP – Lisa Barrett.</b>	
	<p>NCAPOP subscriptions currently mainly impact on acute hospitals which are over run with national audit. A letter has gone out to Finance Directors and Chief Executives saying a standard charge of £10,000 + VAT per annum will be made to all NHS Trusts. This will be refunded through the tariff but it is unclear how this will impact on organisations such as CityCare and Rainbows who are not paid NHS tariffs but have NHS contracts (Marina is still waiting to hear how this will affect her organisation). A copy of the letter is available on the HQIP web page.</p> <p>The Patient Outcomes of Mental Health is undertaken every 3 years by Derbyshire Healthcare. Rubina finds this really useful because the data is benchmarked</p> <p>Whilst some trusts are benefitting from reduced costs, it was felt community and mental health trusts will be particularly affected paying the flat fee for very few applicable national clinical audits.</p>	
<b>13</b>	<b>Future Meeting Dates, Venues and Items.</b>	
	<p>The next meeting will go ahead on Wednesday 16th November 10am to 3pm. Carl has kindly provided us with a room in the Odames Library at Leicester Royal Infirmary which holds up to 40 people. We have invited Orlando Hampton from Health Education East Midlands will talk about Quality Improvement Training and Michael Spry who has won an award for using DATIX to manage Clinical Audit. As we have a slightly larger room, members are welcome to invite colleagues to attend to hear the speakers</p>	

		Action
	<p><b>Action- members to let Mavis know who will be attending the November meeting as soon as possible</b></p> <p>In February 2017 Cheryl Crocker from the Patient Safety Collaborative will attend. Robin Sasaru will also present his Audit Survey following his Freedom of Information requests,</p> <p>The following meeting will be on the 25th May 2017.</p> <p>It was agreed one of the meetings should include a discussion on patient involvement progress since Kim Rezel's presentation at the November 15 event.</p>	
<b>14</b>	<b>Any Other Business</b>	
	<p>Paul is going to survey organisations on staffing and resources and would appreciate colleague's help with completing it. It was noted that this had already been done nationally so he may hold off for a little while.</p>	

**Future meetings:**

**16<sup>th</sup> November 2016 – Odames Library Meeting Room at Leicester Royal Infirmary**

*(some capacity for colleagues to attend, contact Mavis to book)*

**9<sup>th</sup> February 2017 - Chesterfield Royal Hospital**

**25<sup>th</sup> May 2017 – Lincolnshire Partnership, Sleaford**