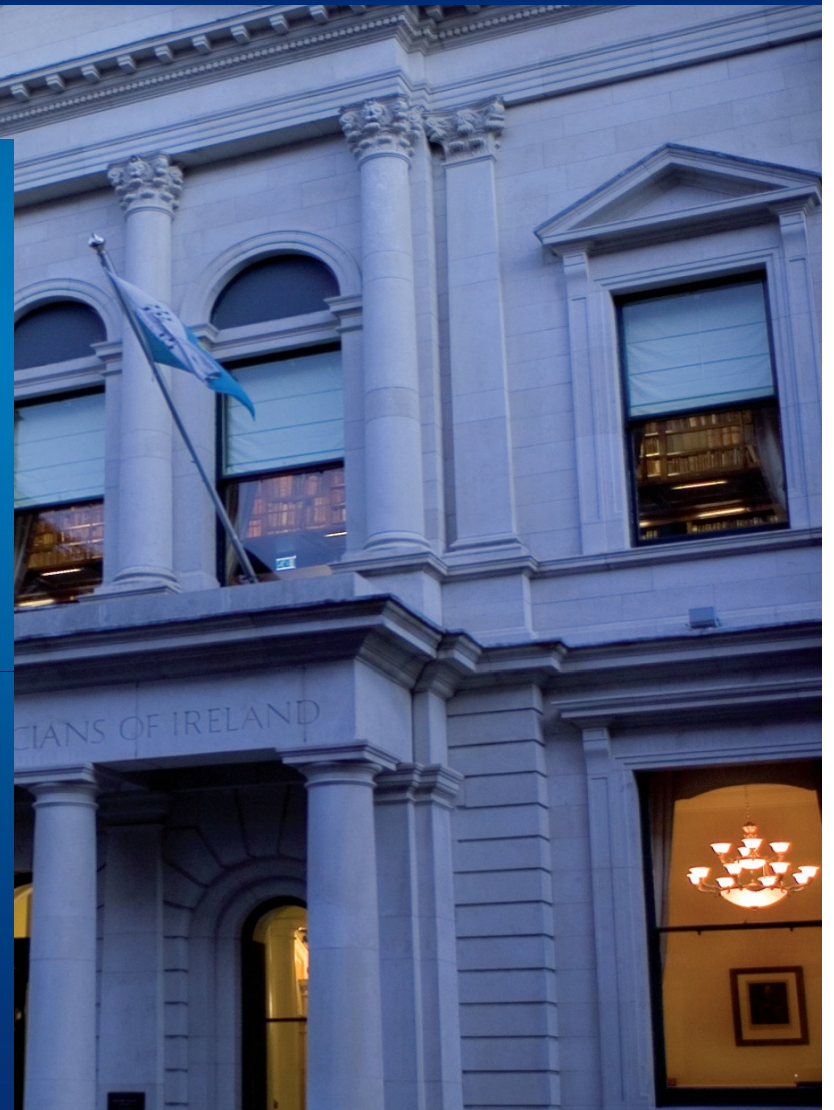


Next Steps

Dr Niall Swan
Consultant Histopathologist
QA programme Working Group



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HIQA Draft National Quality Assurance Criteria for Clinical Guidelines

- Aim to support National Clinical Effectiveness Committee to quality assure clinical guidelines
- 7 Domains with 24 Criteria:
 1. Feasibility
 2. Scope and Purpose
 3. Stakeholder involvement
 4. Editorial Independence
 5. Rigour of development
 6. Clarity of presentation
- Guidelines rated against each criterion on a scale:
 - 1: strongly agree to 7: strongly disagree
- Guidelines currently being updated to fulfil all criteria
 - Minor adjustments and reformatting



HIQA tool and the comparison with the National QA Guidelines in Histopathology

Summary of results of comparison	Histo
No of criteria satisfied but minor reformatting may be required	9
No of criteria satisfied in QA context but may appear discrepant as HIQA tool written for clinical context	3
No of criteria satisfied but not documented	9
No of criteria not satisfied but may not be relevant in QA context	2
No of criteria not addressed	1



Patient Engagement

- One of HIQA guidelines criteria to be fulfilled under stakeholder involvement
- Upcoming Presentations:
 - Public meeting at RCPI's annual St Luke's Symposium *Perspectives in Medical Error: Understanding Uncertainty in Medicine* 1/11/2011
 - Medicine in Changing times: Protecting the Patient and Doctor 5/11/2011
 - HSE Patient Forum Group 2/11/2011



Summary of Programme Status

Task	Completion
Development, approval & release of guidelines	Q2 2009 ✓
Development & approval of high level implementation strategy. Engagement with key stakeholders.	Q2 2009 ✓
Commencement of collation of QA data by each phase 1 hospital	Q1 2010 ✓
Selection of Data processing method	Q2 2010 ✓
Implementation of Guidelines and Commencement of collation of QA data at Phase 2 hospitals	Q1 2011 ✓
Development of proposal for ongoing management of programme	Q2 2011 ✓
Release of revision 4 of guidelines	Q3 2011 ✓
Development of IT system for data storage, analysis & reporting	Q3 2011 ✓
Conduct Workshop on Practical Implementation 25th October	Q4 2011
Submission/Extraction of key quality data at all hospitals	Q2 2012
Generation of QA reports at all hospitals	Q2 2012
Conduct Training on IT system	Q1 2012
Conduct Workshop on IT solution and QA reports	Q2 2012
Release of revision 5 of the Guidelines	Q1 2012
Development of proposal for setting of National Benchmarks	Q2 2012

Next Steps

- Incorporating your feedback from today and evaluation questionnaire
- Continuing roll out of IT implementation
- Review of report design/layout – actively seek your feedback
- IT focused Workshop in April 2012



Workshop Outcomes

- Mandatory Double reporting
 - Record as Focused real time review
- EQA schemes
 - ?Code in-house cases stained
- Communication directly to clinician
 - Frozen section not included
 - Count also if clinician contacts pathologist



Thank You



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