



An Roinn Sláinte  
Department of Health

# National Clinical Effectiveness Committee

## Annual Report 2020



**NATIONAL  
CLINICAL  
EFFECTIVENESS  
COMMITTEE**



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## Introduction to Clinical Effectiveness

### What is Clinical Effectiveness?

Clinical effectiveness is a quality improvement approach which promotes cost-effective healthcare that is evidence-based, with the aim of subsequent improved clinical decision making and clinical outcomes. Clinical effectiveness is defined as the application of the best knowledge, derived from research, clinical experience and patient preferences to achieve optimum processes and outcomes of care for patients. Clinical effectiveness is a collection of activities and tools, based on research and measurement that are used to improve the quality of healthcare. The activities include, but are not limited to; guidelines, audit, research and evaluation.

### What is the aim of Clinical Effectiveness?

Clinical effectiveness aims to ensure that healthcare practice is based on the best available data and evidence of effectiveness. It is a key component for improving patient safety and quality health service delivery.

Clinical effectiveness is about doing the right thing at the right time for the right patient and is concerned with demonstrating improvements in quality and performance:

- the right thing (evidence-based practice requires that decisions about healthcare are based on the best available, current, valid and reliable evidence)
- in the right way (developing a workforce that is skilled and competent to deliver the care required)
- at the right time (accessible services providing treatment at the point of need)
- in the right place (location of treatment/services)
- with the right outcome (clinical effectiveness/maximising health gain) (Worcestershire NHS, 2008).

This aligns with the vision of the Sláintecare Reform programme where it is essential that the right systems are in place to minimize harm and to maximise clinical and cost-effectiveness in order to deliver safe, high quality care. This means that patient safety must be embedded in clinical and corporate governance. Robust governance requires that procedures and practices are in place which ensure high standards of clinical performance, clinical risk management, clinical audit, ongoing professional development and well developed processes to investigate, take action and manage adverse clinical events. (Slaintecare Report, 2017).

### What are NCEC National Clinical Guidelines?

Clinical guidelines are defined as 'systematically developed statements, based on a thorough evaluation of the evidence, to assist practitioner and service users' decisions about appropriate healthcare for specific clinical circumstances across the entire clinical system'. Clinical guidelines endorsed by the Minister are titled 'NCEC National Clinical Guidelines'. This suite of guidelines meets specific prioritisation and quality- assurance criteria.

### How does Clinical Effectiveness work?

Clinical effectiveness uses information gathered from national and international research, health information and data systems and audit to identify what practices are safe, effective, and efficient. It brings this information together to draw conclusions that help healthcare practitioners and their patients to make decisions about what is best for the Irish healthcare system and its individual users.

### What is NCEC National Clinical Audit?

NCEC National Clinical Audit is defined as ‘a cyclical process that aims to improve patient care and outcomes by systematic, structured review and evaluation of clinical care against explicit clinical standards conducted on a national basis’. Clinical audit is an internationally recognised process that requires action to be taken where the audit identifies that quality improvement is necessary. When in place, the results of NCEC National Clinical Audits can inform patients of the structures, process and outcomes of healthcare and show them where improvements are being made.

### What are the NCEC National Standards for Clinical Practice Guidance?

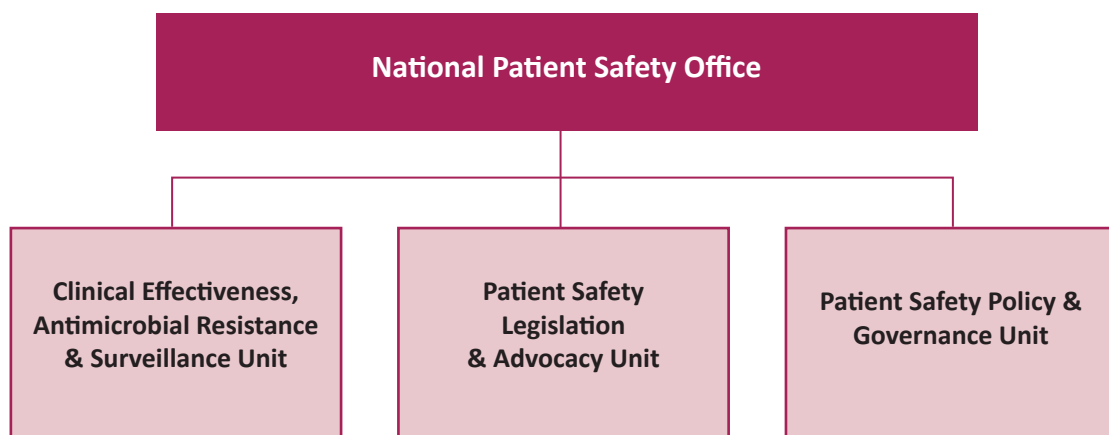
Clinical practice guidance is defined as evidence-based statements or processes for specific clinical circumstances and includes policies, procedures, protocols, and guidelines. National Standards for Clinical Practice Guidance were published by the NCEC in 2015. These Standards help healthcare staff develop quality policies, procedures, protocols, and guidelines (PPPGs) by using an agreed approach nationally. The objectives of the standards are to:

- Provide a standardised terminology and methodology for the development of evidence-based clinical practice guidance nationally.
- Ensure consistency of approach and minimise duplication of clinical practice guidance in the health system.

### What is the National Patient Safety Office (NPSO)?

The National Patient Safety Office was established in December 2016 in the Department of Health. It leads a programme of patient safety policy measures focused on patient safety legislation, extending the national clinical effectiveness framework, establishing a patient safety surveillance system, building further the National Healthcare Quality Reporting System along with policy on antimicrobial resistance. The NPSO will identify patient safety priorities and initiatives. The Independent Patient Safety Council was appointed by the Minister for Health, Simon Harris and held its inaugural meeting on 27th January 2020.

In December 2020, the NPSO comprised three units: patient safety advocacy and policy, clinical effectiveness and antimicrobial resistance, and patient safety surveillance, as seen in figure 1 below.



**Figure 1.** National Patient Safety Office as of December 2020

## The National Clinical Effectiveness Committee

The National Clinical Effectiveness Committee (NCEC) was established in December 2010 as a partnership between key stakeholders in patient safety and clinical effectiveness. The NCEC's mission is to provide a framework for national endorsement of clinical guidelines and audit to optimise patient and service user care. The NCEC has a remit to establish and implement processes for the prioritisation and quality assurance of clinical guidelines and clinical audit, so as to recommend them to the Minister for Health to become part of a suite of National Clinical Guidelines and National Clinical Audit.

The NCEC process for endorsement of National Clinical Guidelines and National Clinical Audit uses a defined process. The oversight of the national clinical effectiveness agenda is provided by the NCEC which is supported by the Clinical Effectiveness Unit (CEU), Department of Health (Appendix 2).

### NCEC Terms of Reference

- Provide strategic leadership for the national clinical effectiveness agenda.
- Contribute to national patient safety and quality improvement agendas.
- Publish standards for clinical practice guidance.
- Publish guidance for National Clinical Guidelines and National Clinical Audit.
- Prioritise and quality-assure National Clinical Guidelines and National Clinical Audit.
- Commission National Clinical Guidelines and National Clinical Audit.
- Align National Clinical Guidelines and National Clinical Audit with implementation levers.
- Report periodically on the implementation and impact of National Clinical Guidelines and the performance of National Clinical Audit.
- Establish sub-committees for NCEC work-streams.
- Publish an Annual Report.

## Annual Statement

This is the 10th Annual Report of the NCEC and reflects the ongoing work and achievements of 2020. As always, there was a focus on embedding the core work of the NCEC into the national policy and Health Service Executive priorities. It is acknowledged that the global COVID-19 pandemic which had a monumental impact on health systems around the world resulted in significant challenges for health services in Ireland, including the work of the NCEC. However, despite these challenges, progress has been made on the work plan in 2020.

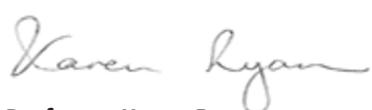
During 2020 the NCEC published 5 new or updates to National Clinical Guidelines. The commitment of the Guideline Development Groups in continuing to progress this work in light of dealing with a global pandemic is specifically acknowledged and commended.

The Health Research Board - Collaboration in Ireland for Clinical Effectiveness (HRB-CICER) is the 5-year research programme established to support the work of the NCEC. Since commencement, HRB-CICER has provided evidence synthesis support to twelve Guideline Development Groups (GDGs) comprising systematic reviews of clinical effectiveness and cost-effectiveness evidence, systematic reviews of clinical guidelines and audits, budget impact analyses and a modified Delphi approach to reach consensus. In 2020 a significant amount of work by HRB-CICER was providing evidence synthesis on a number of topics in relation to COVID-19 for the National Public Health Emergency Team (NPHE) and towards the end of the year they began to re-orientate the work back to supporting the development of National Clinical Guidelines.

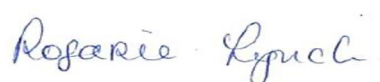
The NCEC continued to invite public representatives onto the multi-disciplinary team of guideline and audit prioritisation and quality assurance appraisers, thus increasing the contribution of public representatives in clinical effectiveness processes. We would like to thank all our appraisers for their professionalism and support of the NCEC. In 2020, due to the impact of the COVID-19 pandemic the programme of work was reduced and included 2 NCEC meetings and impacted on the ability of the subgroups to meet.

We would like to acknowledge the work of the Clinical Effectiveness Unit team within the National Patient Safety Office in providing sustainable and highly effective support to the NCEC and their commitment and expertise in moving forward the national clinical effectiveness framework. We would like to particularly thank Dr Tony Holohan, Chief Medical Officer for his time, efforts and support for the NCEC's clinical effectiveness agenda and the ongoing support of Ms Rachel Kenna, Chief Nursing Officer appointed in 2020 and Ms Marita Kinsella, Director of the National Patient Safety Office.

This year we saw a change of committee membership of the NCEC itself, with new Ministerial nominees joining the committee and we would like to welcome those new committee members. Regardless of whether new to the committee or those members remaining to complete a single or further term of office, appreciation goes to all, for their time, commitment and interest throughout 2020. Further details of all activities are contained in this Annual Report and we would urge you to read further. Alternatively, you could access information on the webpages or follow the NCEC Twitter feed.



**Professor Karen Ryan**  
Chairperson  
National Clinical Effectiveness Committee



**Rosarie Lynch**  
Head of Clinical Effectiveness, AMR & Surveillance  
National Patient Safety Office

## Activities Report

### 1. Special note on 2020 and the impact of the Covid-19 pandemic

2020 has been an extraordinary year. The declaration of COVID-19 as a public health emergency of international concern by the World Health Organisation (WHO) in January, heralded a global pandemic that was to unfold in Ireland over the following months. The response required and the resulting effects on the provision and utilisation of health and social care have generated new ways of care provision and the delivery of services.

As a result of the concerns regarding the global spread of this virus as a public health emergency, a National Public Health Emergency Team (NPHE), to deal with COVID-19, was established in the Department of Health on 27th January 2020.

In addition, the response to COVID-19 pandemic has also affected the preparation of this 2020 NCEC Annual Report as the immediate policy and operational responses required during the pandemic disrupted the usual business of the NCEC.

### The COVID-19 Pandemic and the Clinical Effectiveness Agenda

The outbreak of COVID-19 presented a new and ongoing challenge in terms of the availability of information and evidence to inform decision-making and the development of public health and clinical guidance. To support the work of NPHE COVID-19, a subgroup on Guidance and Evidence Synthesis was established in March 2020, to facilitate information exchange on the public health and clinical guidance relating to COVID-19, currently in development and to be developed in Ireland at that time. Membership of this subgroup included clinical, policy, academic and evidence synthesis experts and both the Clinical Effectiveness Unit and HRB-CICER were represented. Activities of the group included coordination of surge evidence synthesis capacity to support the development of public health guidance and clinical guidance, providing a mechanism to enable rapid evidence synthesis. This NPHE subgroup was stood down in July 2020.



## 2. NCEC activities at a glance

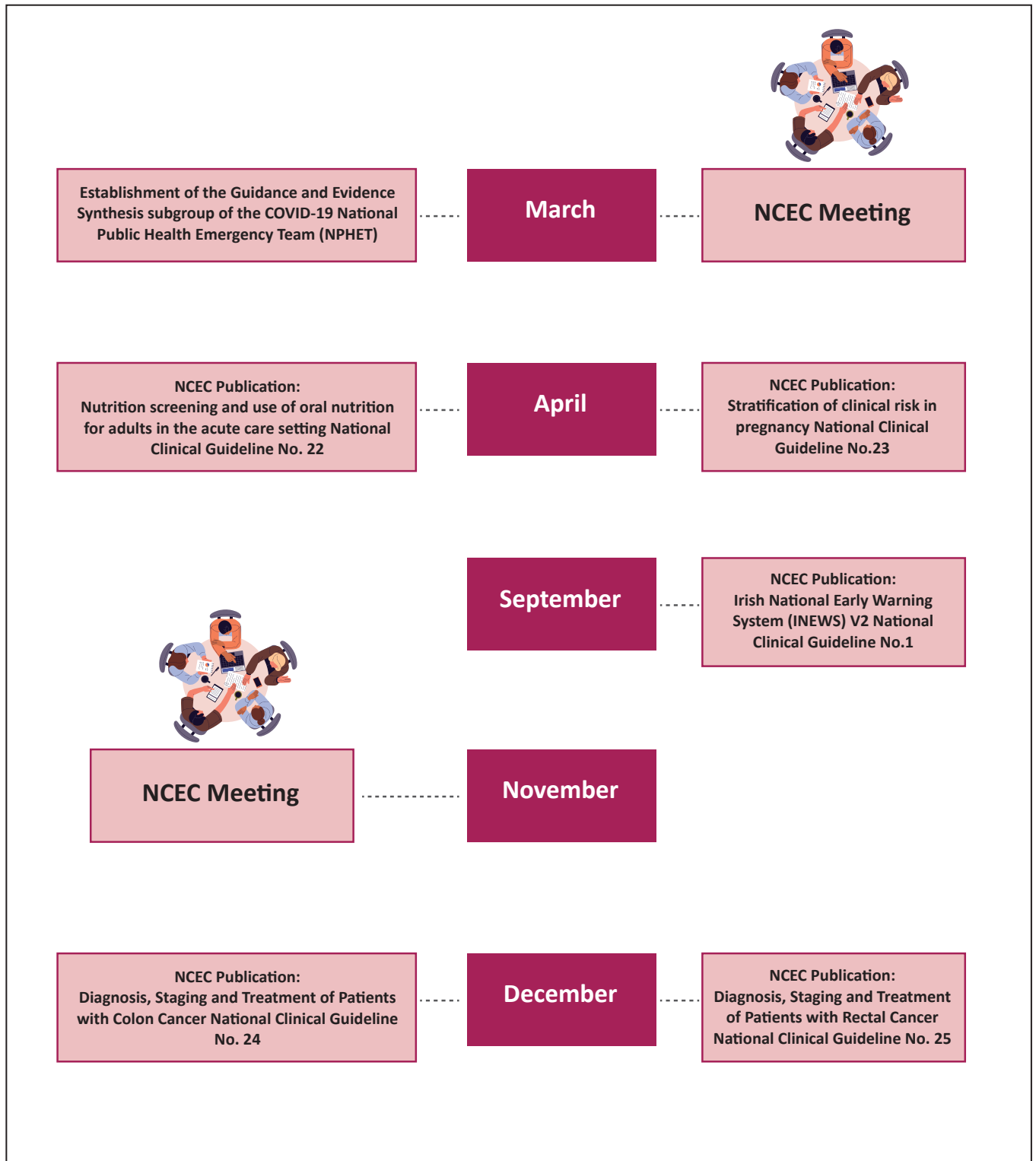


Figure 2. NCEC activities at a glance

### 3. National Clinical Effectiveness Committee and Subgroups

**Table 1.** NCEC Membership

<b>NCEC Membership 2020</b>	
Chairperson	Professor Karen Ryan
<b>Regulation</b>	
Health Information and Quality Authority	Dr Máirin Ryan
Mental Health Commission	Ms Rosemary Smyth (until September)
Health and Social Care Regulatory Forum	Mr Richard Lodge
Health Products Regulatory Authority	Dr Elaine Breslin
State Claims Agency	Mr Cathal O’Keeffe
<b>Education</b>	
Forum of Postgraduate Training Bodies	Prof Gerry Fitzpatrick
Nursing and Midwifery Education Bodies	Dr Anne Marie Brady
<b>Service</b>	
Forum of Hospital Group CEOs	Prof Colette Cowan
Clinical Strategy & Programmes Division	Dr Siobhán Ni Bhriain (from November)
Office of the CCO HSE	Dr Colm Henry (until September)
	Dr Siobhán Ni Bhriain (from September)
HSE Office Nursing and Midwifery Services	Dr Geraldine Shaw
National Office for Clinical Audit	Ms Colette Tully
Private Hospitals Association	Mr John Hurley
<b>Department of Health</b>	
Department of Health	Ms Rachel Kenna (until September)
	Ms Karen Green (from September)
Department of Health	Mr Liam Morris (until September)
	Ms Celeste O’Callaghan (from September)
Director, National Patient Safety Office	Ms Marita Kinsella
<b>Insurers</b>	
Health Insurance Council	Mr Donal Clancy
<b>Research</b>	
Health Research Board	Mr Darrin Morrissey (until May)
	Dr Máiréad O’Driscoll (from August)
<b>Patient Representation</b>	
Patient Representation	Ms Brigid Doherty
Patient Representation	Ms Christine Donnelly
<b>Total: 21</b>	

There are 3 subgroups for the NCEC namely Clinical Audit, Clinical Guideline Methodology and Education and Training. These subgroups did not meet in 2020.

**Table 2.** NCEC Subgroups

NCEC Subgroup	Chair	CEU co-ordinator
Clinical Audit	Mr Ian Callanan	Ms Jenny Hogan
Clinical Guideline Methodology	Prof Declan Devane	Ms Pauline Dempsey
Education and Training in Clinical Effectiveness	Vacant	Dr Mary McGeown

### NCEC Panel of Appraisers

A panel of appraisers is maintained for prioritisation and quality assurance processes on National Clinical Guidelines and National Clinical Audit. Since 2018, public representatives were invited to join the panel of appraisers as part of the implementation of the Public Involvement framework. There were 6 public involvement representatives on this panel in 2020. All contributors to appraisal teams are outlined in Appendix 3.

## 4. National Clinical Guidelines

A dynamic list of guidelines in development is published and regularly updated on the NCEC website. The list provided in Appendix 4 shows the status in December 2020. The full list of 25 National Clinical Guidelines published at December 2020 can be seen in Appendix 5.

No new notice of intent was received, and no clinical guidelines underwent prioritisation by the NCEC in 2020. Meetings were held with a number of new groups who requested interest in the process of NCEC National Clinical Guideline development.

Five clinical guidelines underwent quality assurance by the NCEC in 2020.

Five NCEC National Clinical Guidelines were published in 2020:

- Irish Maternity Early Warning System V2
- Nutrition screening and use of oral nutrition support for adults in the acute care setting
- Stratification of clinical risk in pregnancy
- Diagnosis, Staging and Treatment of Patients with Colon Cancer
- Diagnosis, Staging and Treatment of Patients with Rectal Cancer

## Monitoring and audit of NCEC National Clinical Guidelines

National Clinical Guidelines endorsed by the Minister for Health are mandated for implementation in the Irish health system. Currently, guidelines are monitored through the HSE Performance Assurance Reports, compliance with the National Standards for Safer Better Healthcare (HIQA 2012) and increased alignment with the clinical indemnity scheme. A number of Quality and Patient Safety Performance Indicators that measure implementation, and the impact of National Clinical Guidelines already exist and are specified in the HSE Service Plan. These are presented in Table 3 alongside the targets planned and the actual results achieved. QAVD continues to monitor compliance with early warning systems and clinical handover National Clinical Guidelines under the theme of detecting and responding to patient deterioration (<https://www.hse.ie/eng/about/qavd/audit-service/healthcare-audit.html>).

**Table 3.** Key Performance Indicators for National Clinical Guidelines

Key Performance Indicator (KPI) HSE Service Plan 2020	Target	Actual*
<b>National Clinical Guideline No 1 - National Early Warning Score (NEWS)</b>		
% Of hospitals with implementation of NEWS in all clinical areas of acute hospitals as per 2019 definition	100%	52.1%
<b>National Clinical Guideline No 12 - The Irish Paediatric Early Warning System (PEWS)</b>		
% Of hospitals with implementation of PEWS (Paediatric Early Warning System)	100%	44.4 %
<b>National Clinical Guidelines No 2 and No 3 - Healthcare Associated Infections (HCAIs)</b>		
Rate of new cases of hospital acquired Staph. Aureus bloodstream infection (monthly)	< 0.9/10,000 bed days used	0.9
Rate of new cases of hospital acquired C. difficile infection (monthly)	<2/10,000 bed days used	2.2
No. of new cases of CPE	N/A	659
% of acute hospitals implementing the national policy on restricted anti-microbial agents	100%	59.6%
% of acute hospitals implementing the requirements for screening of patients with CPE guidelines	100%	83%
Consumption of antibiotics in community settings (defined daily doses per 1,000 population)	<22	17.1
<b>National Clinical Guideline No 4 - Irish Maternity Early Warning System (IMEWS)</b>		
% Maternity units/hospitals with full implementation of IMEWS as per 2019 definitions	100%	78.9%
% Of all hospitals with full implementation of IMEWS (as per 2019 definition)	100%	27.9%

\*These results are based on the HSE Performance Report and Management Data Report at December 2020 reporting cycle.

## 5. Collaboration in Ireland for Clinical Effectiveness Reviews (HRB-CICER)

Established in April 2017, HRB-CICER is in its third year of a 5-year programme. This programme is led by Dr Máirín Ryan of HIQA's Health Technology Assessment (HTA) directorate, with clinical lead support from Professor Susan Smith of the HRB Centre for Primary Care Research at the Royal College of Surgeons in Ireland (RCSI), and programme management by Ms. Joan Quigley. Funding and contract management is by the Health Research Board.

Since commencement HRB-CICER has provided evidence synthesis support to twelve Guideline Development Groups (GDGs) comprising systematic reviews of clinical effectiveness and cost-effectiveness evidence, systematic reviews of clinical guidelines and audits, systematic reviews of qualitative literature, conduct of budget impact analyses and a modified Delphi approach to reach consensus.

The HRB-CICER work programme is planned by an executive committee, comprising representation from the Clinical Effectiveness Unit of the Department of Health and HRB-CICER, and during 2020 the following services were provided:

- Systematic review of four clinical and economic questions to support the Care of dying adult guideline
- Methodological support to Sepsis GDG.
- Two systematic review to support healthcare acquired infection guideline
- Budget impact analysis to support the update to the National Early Warning System (NEWS) guideline.
- Systematic literature review of ten economic questions to support the development of chronic obstructive pulmonary disease (COPD) guideline in adults
- Scoping review of the economic literature to support the development of stop smoking guideline.
- Systematic review of the incidence of intraoperative massive haemorrhage in Ireland to support the development of the national clinical guideline for Unexpected Intraoperative Life Threatening Haemorrhage.

Support is on-going to the following guideline development groups:

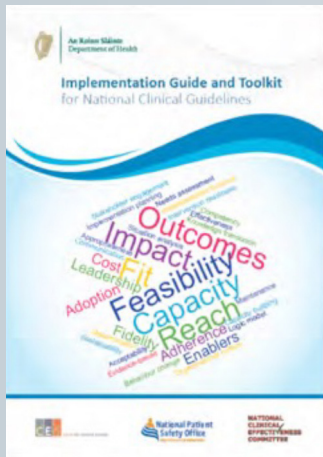
- Chronic Obstructive Pulmonary Disease in Adults
- Healthcare acquired infection
- Unexpected Intraoperative Life Threatening haemorrhage
- Stop Smoking

In 2020, due to the COVID-19 pandemic all guideline development groups temporarily paused development work. During this period HRB-CICER provided evidence synthesis on a number of topics in relation to COVID-19 for the National Public Health Emergency Team (NPHE), and for related groups tasked with the national COVID-19 response.

In 2020, four posters and one oral presentation, were presented at the Irish Sphere (Structured Population and Health-services Research Education) conference. A total of 10 papers were accepted for publication in peer reviewed journals relating to the COVID-19 work of HRB-CICER members.

## 6. Implementation

The purpose of the NCEC's Implementation Guide and Toolkit for National Clinical Guidelines is to support those involved in the development and implementation of National Clinical Guidelines and PPPGs. It provides the theory, steps and tools for each stage of implementation and includes:



- ▶ Context for the importance of Implementation Science in successfully implementing clinical guidelines
- ▶ An outline of Implementation Science theory and an introduction to key concepts
- ▶ Key elements common to implementation frameworks
- ▶ A package of information, tools and resources.

The Guide is available on the Department of Health website at: <https://www.gov.ie/en/collection/70a20b-public-involvement-framework/>

Individual dynamic tools are also available in the Guide and on the website.

## 7. National Clinical Audit

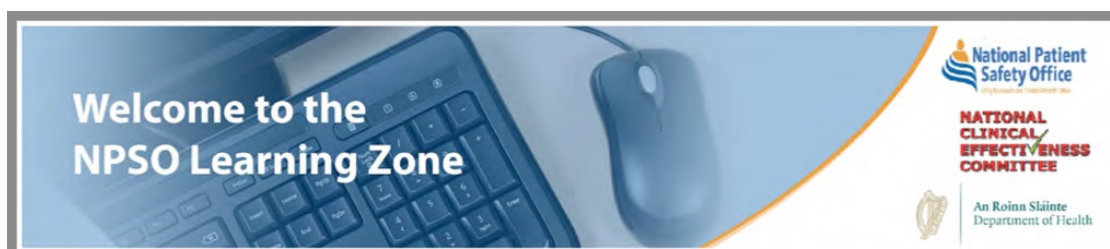
The first NCEC National Clinical Audit was NOCA's Major Trauma Audit which was endorsed by the Minister for Health in December 2016. The 2017 annual report from this National Clinical Audit was published in February 2019 and is available on the NOCA website <https://www.noca.ie/publications>.

The development of the NCEC National Clinical Audit function continued to progress in 2020. The National Perinatal Epidemiological Centre (NPEC) commenced the Perinatal Mortality Clinical Audit in 2009, it became a national audit in 2011. It is endorsed by both the Institute of Obstetricians and Gynaecologists (IOG) and the National Office for Clinical Audit (NOCA) and was prioritised by the NCEC to progress to submission for quality assurance as a National Clinical Audit in March 2020. The audit went through Quality Assurance (QA) at an NCEC meeting on 26 November 2020 scoring 77.5%. It has been recommended for endorsement by the NCEC following minor amendments. These amendments are currently being reviewed by the CEU and preparation for publication will commence.

## 8. Education and Training

### The NPSO Learning Zone

The NPSO Learning Zone continues to host e-learning modules, training videos and presentations relevant to clinical effectiveness.



## 9. Public Involvement in Clinical Effectiveness Processes

The Framework for Public Involvement in Clinical Effectiveness Processes, published in 2018, outlines the practices that may be undertaken to involve the public in Clinical Effectiveness Processes of National Clinical Guideline Development and National Clinical Audit Governance. It also has a toolkit with a range of practical resources to assist Guideline Development Groups with its implementation. The framework adopts the viewpoint that public involvement can improve clinical guideline and audit quality, implementation, and representativeness and responds to the needs and expectations of the public.



A supportive project plan continues to be actioned. This includes the appointment of patient representatives onto National Clinical Guideline and National Clinical Audit appraisal panels. These patient representatives have been supported in this process through the availability of online training videos and NCEC documentation on the NPSO Learning Zone and direct links with the Clinical Effectiveness Officers.

2020 work continued within the Department, supported by the Clinical Effectiveness Unit, into the development of a policy to select and pay patient representatives. This work has been underpinned by the principles outlined in the *Framework for Public Involvement in Clinical Effectiveness Processes* and seeks to recognise and advance the contribution of patient representatives in developing and reforming health services.

## 10. The National Patient Safety Office Conference

Due to the ongoing Covid-19 pandemic the 2020 NPSO conference did not take place.



## 11. Communications, Collaboration and Dissemination

NCEC continued to build its profile in 2020 through the provision of a number of presentations, posters and publications at national and international events, and through information technology such as web content and social media presence. In addition, and to assist in embedding the clinical effectiveness policy agenda in relevant initiatives, relationship building, consultations and committee work with pertinent stakeholders was undertaken throughout the year.

### NCEC website and social media

The NCEC webpages have been part of the National Patient Safety Office section of the Department of Health website since December 2016. In September, the Department of Health website became part of the Government of Ireland website.

The new link is <https://www.gov.ie/en/publication/90221b-clinical-effectiveness/>.

There were 37,830 page views of the National Clinical Guidelines website pages in 2020. Information is categorised into one of six areas on the NCEC webpages: National Clinical Guidelines, National Clinical Audit, Clinical Practice Guidance, the NCEC (governance), Resources and Learning, and Patient and Public Involvement. Minutes of NCEC meetings are also posted on the website.

### NCEC Presentations

In 2020

- CEU presentation on the NCEC to the HSE Clinical Forum
- CEU presentation on NCEC and National Patient Safety Office to final year Pharmacy students, Royal College of Surgeons, Ireland

## 12. Clinical Effectiveness informing Policy, Strategy and Legislation

Members of the CEU participated in Department of Health policy, strategy and legislation formulation in 2020 in order to ensure that clinical effectiveness is used as a policy foundation for healthcare practice.

The Clinical Effectiveness Unit is a collaborator with Evidence Synthesis Ireland. This initiative is funded by the HRB (Ireland) and the Public Health Agency (Northern Ireland). It commenced in December 2018 and incorporates Cochrane Ireland. Its remit is to provide education, training and Fellowships in Evidence Synthesis. (<https://evidencesynthesisireland.ie/>). The Head of Clinical Effectiveness sits on ESI's International Advisory Board.



## Appendix 1

### NCEC meeting attendance

	12 March 2020	28 November 2020
Prof Karen Ryan	√	√
Dr Máirin Ryan	√	√
Ms Rosemary Smyth (until September)		
Mr Gary Kiernan (from September)		
Mr Richard Lodge		√
Dr Elaine Breslin		
Mr Cathal O’Keeffe		√
Prof Gerry Fitzpatrick		
Dr Anne Marie Brady		√
Ms Colette Cowan		
Dr Colm Henry (until September)		
Dr Siobhàn Ni Bhriain (from September)		√
Ms Mary Wynne (until September)		
Dr Geraldine Shaw (from September)		
Professor Colette Tully	√	√
Mr John Hurley		
Ms Rachel Kenna (until September)		
Ms Karen Green (from September)		√
Mr Liam Morris (until September)		
Ms Celeste O’Callaghan (from September)	√	
Ms Marita Kinsella		√
Mr Donal Clancy	√	√
Mr Darrin Morrissey		
Ms Brigid Doherty	√	√
Ms Christine Donnelly		
Ms Elena Hamilton		√

## Appendix 2

### Department of Health, Clinical Effectiveness Unit

Department of Health Clinical Effectiveness Unit	
Director of NPSO	Ms Marita Kinsella
Head of Clinical Effectiveness	Ms Rosarie Lynch (January - August 2020, redeployed to NPHE to support the COVID-19 response)
Clinical Effectiveness Officers	Ms Pauline Dempsey
	Ms Jenny Hogan
	Ms Claudine Hughes (January to August 2020, redeployed to NPHE to support the COVID-19 response)
Assistant Principal	Ms Susan Reilly (until September)
Higher Executive Officer	Ms Paula Monks (until September)
Clerical Officer	Mr Jamie Duncan (until September)
	Ms Hilary Crosby (from September)

## Appendix 3

### Members of NCEC Appraisal Teams during 2020

Dr Sarah Gibney	Ms Marina Cronin	Dr Helen Ferris
Ms Theresa O'Donovan	Prof Zena Moore	Mr Shane Byrnes
Ms Mary Bedding	Dr Sarah Condell	Ms Ruth Ryan
Dr Fergal Flynn	Dr Niamh O'Rourke	Dr Lisa Mellon
Ms Susan Curtis	Ms Mairita Clifford	Ms Carmel O'Hanlon
Ms Shelly O'Neill	Ms Miriam Kennedy	Ms Edel Costigan
Dr Patricia Harrington	Mr Richard Walsh	Dr Kieran Walsh

## Appendix 4

### Guidelines in development

Guidelines in development at the end of 2020.

No.	Title	Chairperson(s)
1	Management of Chronic Obstructive Pulmonary Disease (COPD)	Dr Desmond Murphy
2	Sepsis Management in Adults and Maternity Services (V2 of NCG No. 6)	Dr Vida Hamilton
3	Healthcare Associated Infections (will encompass updates of NCG Nos. 2 and 3)	Prof. Martin Cormican
4	Care of the Dying Adult in the Last Days of Life	Dr Brian Creedon
5	Diagnosis, Staging, and Treatment of Patients with Pancreatic Cancer	Mr Justin Geoghegan
6	Intraoperative Massive Haemorrhage	Prof. John Hyland
7	Dental Guideline – Alternatives to Amalgam	TBC
8	Diagnosis and treatment of Tobacco Addiction (Stop smoking)	Dr Paul Kavanagh
9	NCG No. 7 Diagnosis, staging and treatment of patients with breast cancer - Update	TBC
10	NCG No. 8 Diagnosis, staging and treatment of patients with prostate cancer - Update	Dr David Galvin
11	NCG No. 13 Diagnosis, staging and treatment of patients with gestational trophoblastic disease - Update	Dr John Coulter

## Appendix 5

### National Clinical Guidelines and National Clinical Audit

NCG No.	Title	Publication Date
1	Irish National Early Warning System (INEWS) Version 2	2020 September (Note: version 1 - 2013 February with rapid update 2014 August)
2	Prevention and Control of Methicillin-Resistant Staphylococcus Aureus (MRSA)	2013 December
3	Surveillance, Diagnosis and Management of Clostridium Difficile Infection in Ireland	2014 June
4	Irish Maternity Early Warning System (IMEWS) Version 2	2019 February
5	Communication (Clinical Handover) in Maternity Services	2014 November
6	Sepsis Management	2014 November Methodological update: 2015 February
7	Diagnosis, Staging and Treatment of Patients with Breast Cancer	2015 June
8	Diagnosis, Staging and Treatment of Patients with Prostate Cancer	2015 June Clinical update: 2016 March
9	Pharmacological Management of Cancer Pain in Adults	2015 November
10	Management of Constipation in Adult Patients Receiving Palliative Care	2015 November
11	Clinical Handover in Acute and Children's Hospital Services	2015 November
12	The Irish Paediatric Early Warning System (PEWS)	2015 November Clinical update: 2016 March
13	Diagnosis, Staging and Treatment of Gestational Trophoblastic Disease	2015 November
14	Management of an Acute Asthma Attack in Adults (aged 16 years and older)	2015 November
15	Hepatitis C Screening	2017 July
16	Diagnosis, Staging, and Treatment of Patients with Lung Cancer	2017 November
17	Adult Type 1 Diabetes Mellitus	2018 June
19	Diagnosis, Staging and Treatment of Patients with Oesophageal or Oesophagogastric Junction Cancer	2019 August
20	Diagnosis and Staging of Patients with Ovarian Cancer	2019 August
21	Appropriate Prescribing of Psychotropic Medication for Non-cognitive Symptoms in People with Dementia	2019 December

NCG No.	Title	Publication Date
22	Nutrition Screening and use of Oral Nutrition Support for Adults in the Acute Care Setting	2020 April
23	Stratification of Clinical Risk in Pregnancy	2020 April
24	Diagnosis, Staging and Treatment of Patients with Colon Cancer*	2020 December
25	Diagnosis, Staging and Treatment of Patients with Rectal Cancer*	2020 December

### National Clinical Audit

1	Major Trauma Audit	2016 December
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## Appendix 6

### Abbreviations

The following abbreviations are used in this document:

<b>CEU</b>	Clinical Effectiveness Unit
<b>COPD</b>	Chronic Obstructive Pulmonary Disease
<b>GDG</b>	Guideline Development Group
<b>HCAI</b>	Healthcare Associated Infection
<b>HRB</b>	Health Research Board
<b>HRB-CICER</b>	Health Research Board-Collaboration in Ireland for Clinical Effectiveness Reviews
<b>HSE</b>	Health Service Executive
<b>HTA</b>	Health Technology Assessment
<b>IMEWS</b>	Irish Maternity Early Warning System
<b>IOG</b>	Institute of Obstetricians and Gynaecologists
<b>KPI</b>	Key Performance Indicator
<b>MRSA</b>	Methicillin-resistant Staphylococcus Aureus
<b>NCEC</b>	National Clinical Effectiveness Committee
<b>NCG</b>	National Clinical Guideline
<b>NEWS</b>	National Early Warning Score
<b>NOCA</b>	National Office for Clinical Audit
<b>NPEC</b>	National Perinatal Epidemiological Centre
<b>NPHE</b>	National Public Health Emergency Team
<b>NPSO</b>	National Patient Safety Office
<b>PEWS</b>	Paediatric Early Warning System
<b>PPPG</b>	Policies, Procedures, Protocols, Guidelines
<b>QA</b>	Quality Assurance
<b>QAVD</b>	Quality Assurance and Verification Division
<b>RCSI</b>	Royal College of Surgeons in Ireland
<b>WHO</b>	World Health Organisation



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