



**Minutes  
National Clinical Effectiveness Committee (NCEC)  
Thursday 16<sup>th</sup> May 2019**

<b>Present</b>	<b>Apologies</b>
Prof Karen Ryan (Chair) Dr Anne Marie Brady Mr Donal Clancy Ms Christine Donnelly Mr John Hurley Ms Marita Kinsella Dr Cathal O'Keeffe Dr Máirín Ryan Ms Rosemary Smyth Ms Colette Tully	Dr Elaine Breslin Prof Colette Cowan Ms Brigid Doherty Dr Gerry Fitzpatrick Dr Colm Henry Ms Rachel Kenna Mr Richard Lodge Mr Liam Morris Mr Darrin Morrissey Ms Mary Wynne

**Secretariat:** Ms. Susan Reilly

**Clinical Effectiveness Unit:** Ms Pauline Dempsey, Ms Jenny Hogan and Dr Mary McGeown.

**Apologies:** Dr Sarah Condell

**Item 1 Welcome and apologies**

Apologies as per table above. The Chair welcomed Marita Kinsella, the new Director NPSO and Mr John Hurley Private Hospitals Association to the Committee.

**Item 2 Conflict of Interest Declarations**

The members present were reminded of the commitment to sign an annual declaration of COI and issued with a form. No verbal COIs were declared.

**Item 3 Minutes (7<sup>th</sup> February, 2019)**

All action points have been met or will be discussed at the meeting.

**Item 4 Matters arising from Minutes**

No matters arising.

**Item 5 Correspondence**

The Director NPSO advised that there was one letter to bring to attention of the NCEC. This letter was from the Dean, Faculty of Radiologists in the RCSI. The Faculty had contacted the CEU in March 2019 advising that they wished to pause the National Clinical Audit of Radiology. CEU met representatives of the Faculty in April following which, further correspondence was received by the NPSO. The Faculty advised that they intended to pause NCA-02 pending an in-depth review of KQIs from their annual workshop in May. The Faculty also advised that they wished to await the publication of the Patient Safety Bill (PSB).

Given the NCEC has approved the NCA-02 at its previous meeting, MK advised that it was important that this matter be brought to the attention of the Committee.

**Discussion:**

- The Committee noted that awaiting the publication of the PSB (likely to be in 2020) before submitting the NCA could cause the evidence base to become out of date and therefore the Committee noted that it may be that the NCA-02 will require revalidation from the NCEC when the Faculty resubmits it with new KQIs.
- It was noted that there are a number of current matters which may need consideration in the context of the progress of this Audit, including: the recent Court judgement (Morrissey case) in relation CervicalCheck; the CCO's commissioned review of Clinical Audit in Ireland; and the current proposals for the Patient Safety Bill.

The Committee noted that there was no intention on the part of the Faculty, in pausing the NCA, to undermine the work of the Committee. The Committee noted the importance of clinical audit in maintaining high quality care and also acknowledged the commitment of the Faculty to bring constituents along with it to achieve a better clinical audit process, with patient wellbeing at the heart of the decision.

**Decision:** The Committee agreed to the Faculty's request to pause NCA-02.

**Action 1:** CEU to write to NCA-02 Group and advise them of the Committee's agreement to the proposed pause of the Audit.

**Item 6 National Clinical Audit**

JH provided a number of updates on clinical audit.

JH advised that the research commissioned from University College Cork in December 2018 to examine the international literature and experience around serious reportable events and clinical audit to inform the guidance to be issued by the Minister for the Patient Safety Bill is almost complete. The Draft Report is excellent. CEU advised that it would organise a Lunch and Learn on Clinical Audit. The UCC Report, once finalised, is to be circulated to the Committee.

It was noted that the National Perinatal Epidemiology Centre (NPEC) has informed CEU of its intention to submit an NCA on maternal morbidity for prioritisation. A meeting has been arranged for 31-5-2019.

CT advised the Committee that the HSE National Review of Audit is due to be completed at end May 2019. Final sign off from the Steering Group and CCO will occur by end July 2019. NOCA will forward completed HSE Review to the Department. It was agreed that sharing the documents would facilitate a coherent interpretation/understanding of audit throughout the system.

**Decision:** The UCC Research Report is to be circulated to the NCEC following approval by the UCC authors.

**Action 2:** Circulate UCC Report to NCEC members.

**Action 3:** CT to forward completed HSE Review to JH.

**Item 7 – National Clinical Guidelines****7(a) List of NCGs and guidelines in development (for information)**

The number of clinical guidelines in development and nearing completion was noted by the Committee.

**(b) Quality assurance reports for:**

**CG-47 Ovarian cancer economic review**

MMcG presented the economic quality assurance report from the economic appraiser. The GDG on Ovarian Cancer was chaired by Dr Josephine Barry, Consultant Radiologist, Cork University Hospital and Dr Ciarán O’Riain, Consultant Histopathologist, St. James’s Hospital. This National Clinical Guideline is supported by the HSE National Cancer Control Programme (NCCP).

**Discussion:** The economic reviewer’s appraisal of the Budget Impact Analysis was discussed. It was agreed that the GDG should make the amendments required by the economic reviewer to the Budget Impact Analysis.

**Decision:** Recommend clinical guideline for endorsement following these amendments to be approved by the economic reviewer and the Clinical Effectiveness Unit, Department of Health.

**Action 4:** Letter and report to go to the Co-chairs of CG-47 outlining the NCEC decision and amendments required.

**CG-55 Appropriate prescribing of psychotropic medication for non-cognitive symptoms in people with Dementia**

MMcG presented the quality assurance report from the appraisal team. This clinical guideline was prioritised successfully by the NCEC in October 2018. The GDG was joint-chaired by Susanne Timmons, Clinical Lead, National Dementia Office, and Professor Stephen Byrne, Senior Academic Pharmacist, University College Cork. It was supported by the HSE National Dementia Office, and the HSE Acute Hospitals and Social Care Divisions.

**Discussion:** The AGREE II appraisal score of 87% was noted, demonstrating a high level of confidence in the rigour of development of the guideline. However, some amendments were highlighted by the appraisal team and outlined in the report.

NCEC members considered the Mental Health Acts and the possible implications for this guideline. It was agreed that the GDG will be asked to review and confirm compliance or revise as necessary. The CEU will liaise with MHC re Mental Health Act and Regulations.

**Decision:** Recommend the clinical guideline for endorsement following minor amendments approved by the CEU.

**Action 5:** Letter and report to go to the Co-Chairs of CG- 55 outlining the NCEC decision and amendments required.

**CG-040 Nutrition screening and use of oral nutrition support for adults in the acute care setting**

PD presented the quality assurance report from the appraisal team. This clinical guideline was prioritised successfully by the NCEC in October 2015. This GDG was joint chaired by Prof John Reynolds, Consultant Surgeon and Dr Declan Byrne, Consultant Geriatrician. It is supported by the HSE Acute Operations and Health and Wellbeing Division. Overall the guideline scored very highly in all 5 AGREE II domains and has an overall quality score of 91%. However, some amendments are required and are outlined in the report.

**Discussion:** The importance of the BIA was discussed and in particular its relevance for the Annual Estimates process and national implementation. It was agreed that the economic reviewer would need to be satisfied with the resubmitted guideline prior to presenting it to this Committee again.

**Decision:** Recommend the clinical guideline for endorsement following significant, but not fundamental amendments approved by the appraisal team.

**Action 6:** Letter and report to go to the Co-chairs of CG- 40 outlining the NCEC decision and amendments required.

### **Item 8 HRB-CICER-biannual update from Director**

a) The Director HRB-CICER told the Committee that since commencement in April 2017, HRB-CICER has provided evidence synthesis support to ten Guideline Development Groups comprising systematic reviews of clinical effectiveness and cost-effectiveness evidence, systematic reviews of clinical guidelines and audits and budget impact analyses.

Since the last progress report in October 2018 the following have been completed:

- a systematic review of economic literature for risk factors in pregnancy,
- the budget impact analysis of implementation of the COPD guideline,
- a systematic review of nutrition screening tools for the undernutrition guideline,
- a preliminary costing analysis for the ovarian cancer guideline.

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

- COPD
- Risk classification in pregnancy
- NEWS
- Care of the dying adult
- Sepsis
- Healthcare acquired infection.

Since October 2018, three full day training course in the use of GRADE have been provided open to all Guideline Development Groups. A training session on Budget Impact Analysis open to all Guideline Development Groups has also been provided.

HRB-CICER work with the GDGs has been presented at a national and international conference through 2 posters since October 2018. Oral and poster presentations have been accepted for a number of forthcoming conferences.

b) Register of research gaps

MR spoke of the work HRB-CICER has done in identifying gaps in research. This important information is being pulled together in a register and HRB-CICER will share it with the third level institutes and any other interested parties. AMB proposed forwarding it to the Faculty of Health Sciences in all third level institutions. This was agreed.

**Decision:** HRB-CICER to forward register of evidence gaps to third level institutes

**Action 7:** Director HRB-CICER to arrange circulation of register of evidence gaps.

### **Item 9 Subgroup updates**

MMcG gave an update on the Education and Training subgroup and its activities. A 3-day training in evidence-based practice held in Dublin castle, March 2019. An implementation workshop with GDGs was held in April 2019, where each guideline group presented their logic model and implementation plan.

The publication of Clinical Effectiveness Competency Framework has been completed with full and summary versions available on the Department's website. The last subgroup meeting was held on 21 March, with subgroup members were disseminating the clinical effectiveness competency framework within their organisations.

**Discussion:** The Chair expressed her gratitude for the work and contribution of Dr Niamh O'Rourke to the Clinical Effectiveness Unit and wished her well in her new role.

#### **Item 11 NCEC Events in 2019**

- a) NCEC Meeting dates in 2019: 19<sup>th</sup> September and 21<sup>st</sup> November 2019
- b) NPSO Conference date: Wednesday 13<sup>th</sup> November.
- c) Guideline launches: To be confirmed

#### **Item 12 A.O.B. – Summary Minutes**

(a) It was agreed that the full minutes of the NCEC meetings would be placed on the NCEC webpage w.e.f. January 2019.

(b) The Chair proposed that given the change in membership of the Committee now might be an opportune time to dedicate one of the forthcoming NCEC meetings as a time to reflect/evaluate on the work of the Committee and how this might evolve into the future with particular emphasis on how the Committee supports and drives the implementation of guidelines.

**Decision:** This was agreed for the November meeting. CEU will prepare an outline for the meeting and members were asked to submit potential topics/considerations for discussion.

**Action 8:** CEU to prepare outline and agenda for the November meeting focussed on reflection.

#### **Actions Arising**

	<b>Action</b>	<b>Responsibility</b>
<b>1</b>	CEU to write to NCA-02 Group and advise them of NCEC agreement to pause the Audit.	<b>JH</b>
<b>2</b>	Circulate UCC Report to NCEC members.	<b>JH</b>
<b>3</b>	CT to forward completed HSE Review to JH.	<b>CT</b>
<b>4</b>	Letter and report to go to the Co-chairs of CG-47 outlining the NCEC decision and amendments required.	<b>MMcG</b>
<b>5</b>	Letter and report to go to the Co-Chairs of CG- 55 outlining the NCEC decision and amendments required.	<b>MMcG</b>
<b>6</b>	Letter and report to go to the Co-chairs of CG- 40 outlining the NCEC decision and amendments required.	<b>PD</b>
<b>7</b>	Director HRB-CICER to arrange circulation of register of evidence gaps.	<b>MR</b>
<b>8</b>	CEU to prepare outline and agenda for the November meeting with NCEC members submitting items for consideration.	<b>All</b>

**Prof. Karen Ryan**  
**Chair**