

National Services Division

Guidance notes for the completion of the annual/mid-year report and workplan for National Managed Clinical Networks.



National Managed Clinical Network annual/mid-year report and workplan guidance

INTRODUCTION

1. The NSD annual report / workplan builds upon HDL (2007) 21, the former NHS Quality Improvement Scotland Quality Assurance Programme, the review of nine NMCNs (2010) and seeks to align closely with the NHS Scotland Quality Strategy.
2. This document replaced the former NSD annual report workplan from the 2010/11 reporting year.
3. The sections in the document should be further developed by the network to include network designation objectives and related annual objectives.
4. The detail of what will be reported within each section of the annual report should be discussed with the NSD Programme Manager/Assistant Programme Manager at an early point of the reporting year.
5. The network should strive to draw upon and develop the existing evidence base, and it is expected that the workplan will be developed taking into account a range of existing guidance, including:
 - SIGN guidelines
 - governance and risk management standards,
 - other applicable condition-specific NHS Healthcare Improvement Scotland standards
 - UK healthcare standards written by other standard setting authorities and professional bodies
 - International standards
 - Clinical standards/guidelines developed by the National Managed Clinical Network
 - Care Quality Indicators developed or adopted by the network
6. NHS Healthcare Improvement Scotland noted that “seeking continual improvement in the quality of care given to patients is a fundamental goal of MCNs” (2009). The organisation added that to “improve the quality of care, a sequence of steps needs to be followed:
 - define appropriate quality of care via agreed standards and the core principles detailed in HDL(2007)21
 - measure performance against the standards and core principles
 - plan out actions to improve the quality of care”
8. This annual report also aims to embed this sequence of steps into the network’s reporting arrangements to National Services Division as Commissioner of the National Managed Clinical Network. When necessary, National Services Division can then best support the network to improve the quality of care for patients.

Insert title of designated managed clinical network: Annual report

Executive summary

Please provide an overview of the previous year highlighting any specific successes and issues against designation and annual objectives. This can be broken down by working group.

Introduction

Please include a brief introduction to provide an overview of the background of the network.

Aim/ Purpose/ Mission Statement

Please provide the network designation objectives and a short statement setting out the purpose of the network (in plain English).

Please indicate the target group for the network – outline of clinical conditions and population, incidence, prevalence etc.

Plans for the year ahead

The network's agreed plans for the year ahead will be included in this section. Network plans will be aligned to the network's designation objectives and the relevant quality dimensions. Network objectives for the year ahead must be submitted to NSD in early February and agreed by March. Further information is available in the letter on standardisation of process for National Managed Clinical Networks on the NSD website.

Network governance

Please include the Lead Clinician's name, profession, discipline and employing organisation

Please provide a description of network management/administration arrangements and terms of reference

Please provide an organisational chart of all network groups/subgroups, their roles and remits, and a description of governance arrangements. A list of network members is to be included in appendix 1.

Please provide information on any relevant links between the network and management and planning whether through the network or the network office. Please provide information on progress in this area and any issues.

Please provide information on any links with other relevant organisations/work streams including other networks.

Detailed description of progress over the reporting period

Please develop and update the table to include the network's designation objectives and related agreed annual objectives. Where possible, please include all relevant objectives as listed in the quality assurance and improvement workplan, and relevant care quality indicators. When planning for the year ahead and developing the workplan, it is expected that the network will consider the principles of HDL(2007)21 and the six dimensions of quality as described below.

Patient-centred – Providing care that is responsive to individual personal preferences, needs and values and assuring that patient values guide all clinical decisions

The network will:

- ensure that care is responsive to individual personal preferences, needs and values and the network ensures that patient values guide all clinical decisions by its members
- ensure that service users involved in the network are supported and the network acts upon their feedback
- communicate its work and achievements with service users
- promote the use of an individualised care plan that is discussed with patients (or equivalent)
- ensure that improvements in patient care arise from the work of the network
- consider patient experience along the lines of the Better Together programme

Safe – Avoiding injuries to patients from care that is intended to help them

The network will:

- develop and maintain a risk register, with escalation procedures
- promote best clinical practice across Scotland
- develop and promote standards/ guidelines/ protocols

Effective – Providing services based on scientific knowledge

The network will:

- develop and measure Clinical Outcome / Care Quality / Audit Indicators. Progress against these will be included in the workplan
- undertake audit activity to inform the work of the network
- undertake benchmarking activity
- draw upon, develop and promote the evidence base
- inform the configuration and development of services across Scotland
- undertake research activity and make links with relevant universities, colleges and research institutions

Efficient – Avoiding waste, including waste of equipment, supplies, ideas, and energy

The network will:

- add value to patient care in NHS Scotland

- improve access to services for patients
- use telemedicine/ teleconferencing as appropriate
- have an education strategy in place
- use NHS Education for Scotland tools as appropriate
- host/facilitate education and training events
- map and work to streamline the patient pathway
- make efforts to streamline its practices, create financial efficiencies and work to reduce costs for NHS Scotland (financial profile to be included as appendix 2)

Equitable – Providing care that does not vary in quality because of personal characteristics such as gender, ethnicity, geographic location or socio-economic status

The network will:

- undertake an Equality and Diversity Impact Assessment every three years and act upon its findings (for instance, by considering patient needs through transition)
- improve local access to services and to clinical expertise
- use its stakeholder analysis to develop a comprehensive multi-disciplinary membership and a number of relevant links (network membership to be included in appendix 1)
- develop a communications plan

Timely – Reducing waits and sometimes harmful delays for both those who receive care and those who give care

The network will:

- establish a review process for clinical and patient network literature

Appendix 1: Network membership

Please provide a table including the names, professions/disciplines, and NHS Board or employing organisation of all network members (where appropriate)

Appendix 2: Finance

Please provide detail on expenditure against budget for travel, meetings, conferences etc. The network office financial profile will include detail on staffing costs.