



**An Roinn Sláinte**

DEPARTMENT OF HEALTH

# The National Clinical Effectiveness Agenda

## Tenth Annual Cochrane in Ireland Conference

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Director of Clinical Effectiveness

24<sup>th</sup> January 2014

**NATIONAL  
CLINICAL  
EFFECTIVENESS  
COMMITTEE**

Tús Áite do  
Shábháilteacht **1** Othar  
Patient Safety **1** First

# Clinical Effectiveness

- Clinical effectiveness is a key component of patient safety and quality.
- The integration of national and international best available evidence in service provision through utilisation of clinical effectiveness processes promotes healthcare that is up to date, effective and consistent.
- The clinical effectiveness agenda incorporates the utilisation of quality assured national clinical guidelines and national clinical audit.
- This is a quality improvement approach which promotes cost-effective healthcare that is evidence-based with improved clinical decision making and clinical outcomes.

# Clinical Effectiveness

- Commission on Patient Safety recommendations
- National Standards for Safer Better Healthcare

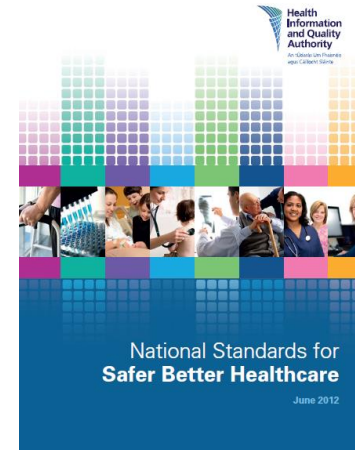


Figure 1: Themes for Quality and Safety



# The National Clinical Effectiveness Committee (NCEC)

- Patient Safety Initiative - established Sept. 2010
- Ministerial committee - key stakeholders
- NCEC Mission is to provide a framework for the quality assurance and endorsement of national clinical guidelines and audit

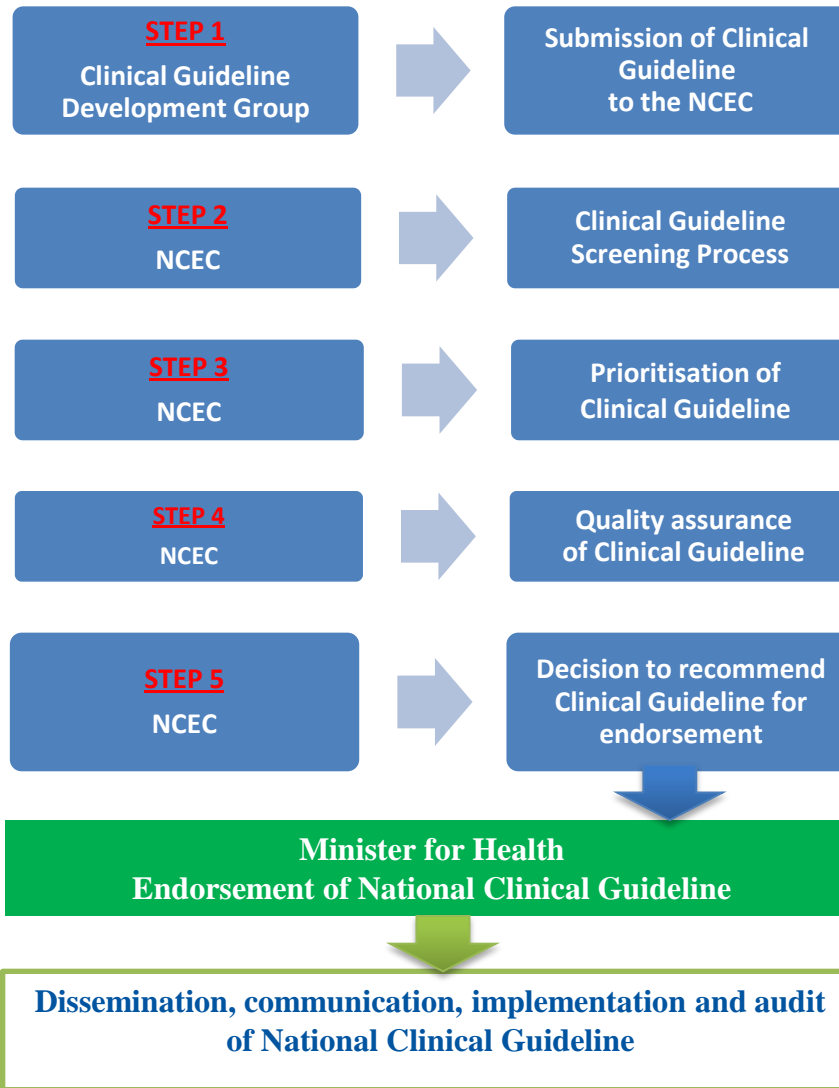
# Clinical Guidelines

*“Systematically developed statements, based on a thorough evaluation of the evidence, to assist practitioner and patient decisions about appropriate health care for specific clinical circumstances, across the entire clinical spectrum”*

# National Clinical Guidelines

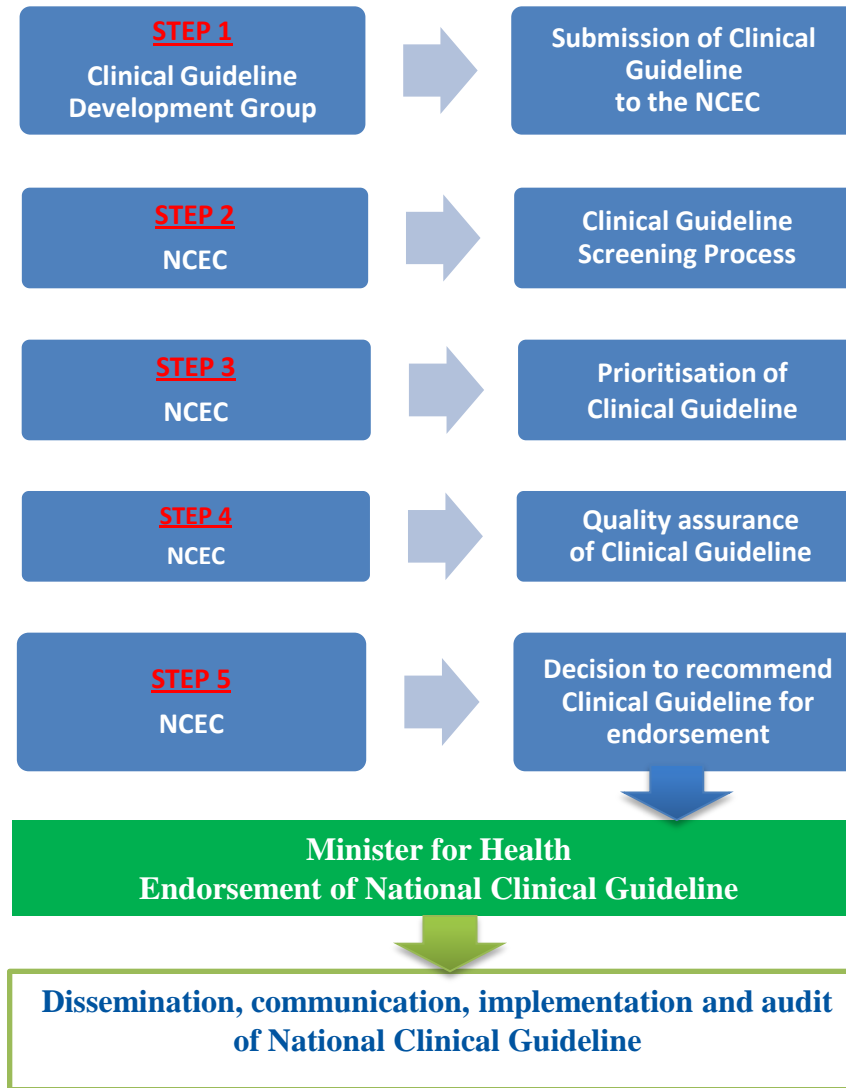
- Provide guidance and standards for improving the safety, quality and cost effectiveness of care across healthcare services in Ireland
- Implementation provides for a model of care that can reduce variability and improve quality of patient decisions
- Implementation supports services in providing consistent evidence-based healthcare

# NCEC Endorsement of National Clinical Guidelines



# Endorsement of National Clinical Guidelines

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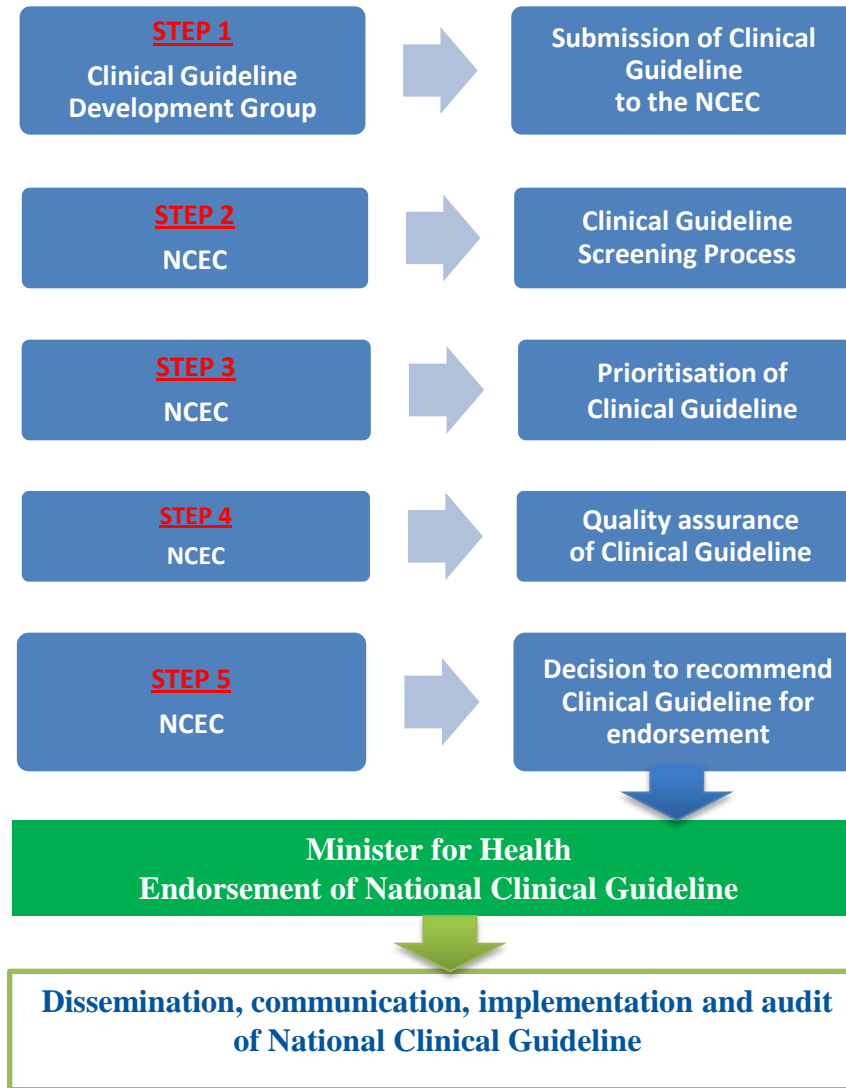
## Prioritisation Criteria

- Burden of clinical topic
- Evidence analysis
- Economic impact
- Variability in practice
- Potential for addressing health issues
- Clinical guideline implementation



# Endorsement of National Clinical Guidelines

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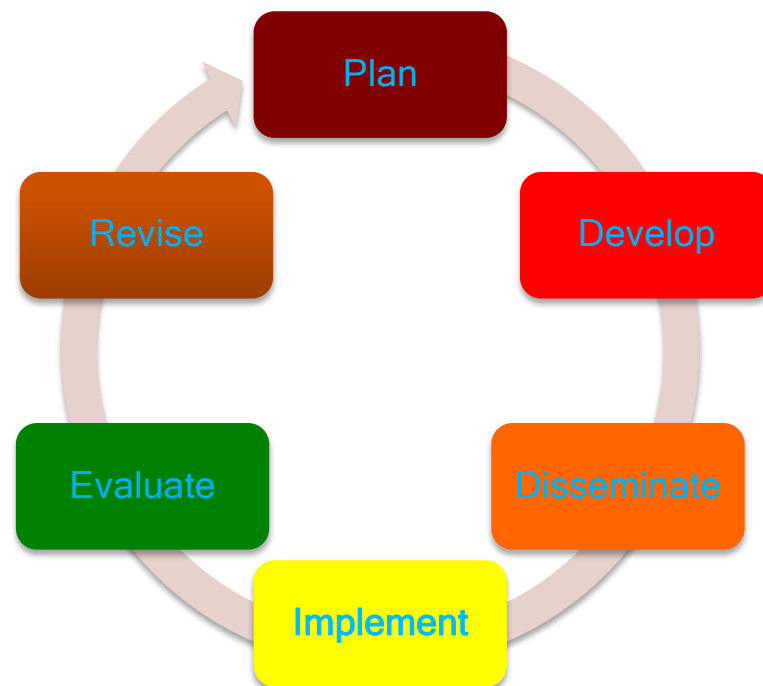
## Quality Assurance Criteria

- Feasibility
- Scope and purpose
- Rigour of development
- Stakeholder involvement
- Applicability/implementability
- Clarity of presentation
- Editorial independence

# Guideline Development Path

*Robust guidelines can take up to 2 years to complete.*

*It is recognised that a national health system is likely to be able to effectively implement and monitor only a small number of new national clinical guidelines each year.*



*NCEC Guideline Developers Manual (2013)*



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The contribution of Cochrane and the expertise of Cochrane Fellows to guideline development groups and the work of the NCEC has the potential to add significant value to the overall.

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# Guideline - Methodology

Step 1.	Define key questions
Step 2.	Search for clinical guidelines and research studies
Step 3.	Screen clinical guidelines
Step 4.	Appraise clinical guidelines
Step 5	Appraise other research studies
Step 5.	- Adopt - Adapt - Develop a new guideline
Step 6.	Prepare a draft guideline
Step 7.	Communicate and consult
Step 8.	External review
Step 9.	Prepare final guideline
Step 10.	Endorsement

?  
*Role of Cochrane  
&  
Cochrane Fellows*

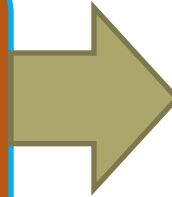
# Implementation

- Ministerial endorsement
- HSE governance
- Informed patients
- Regulation
  - HIQA's National Standards for Safer Better Healthcare
  - Professional regulators
  - Future licensing requirements
- Clinical Indemnity
- Health insurers
- Defining responsibility and subsequent accountability

# NCEC - 2013

*1<sup>st</sup> National Clinical  
Guideline:*

National Early Warning  
Score (*February 2013*)



Implementation across all HSE  
acute hospitals - end 2013

*2<sup>nd</sup> National Clinical Guideline:*

Prevention and Control of Methicillin-Resistant  
*Staphylococcus aureus* (MRSA) (*December 2013*)

Guidelines in development - examples

*Clostridium Difficile, Asthma, COPD, NCCP, Palliative care*

# 2014 NCEC Priority Guidelines

National Maternity Early Warning Score Guideline  
National Paediatric Early Warning Score Guideline  
National Clinical Handover Guideline  
National Sepsis Management Guideline

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National  
Clinical  
Guidelines

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EFFECTIVENESS  
COMMITTEE

Build  
Capacity

NATIONAL  
CLINICAL  
EFFECTIVENESS  
COMMITTEE

Establish  
Clinical  
Audit  
Function

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CLINICAL  
EFFECTIVENESS  
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National and  
International  
Partnerships

**2014 Programme of Work 2014**



# Clinical Effectiveness



*Ireland's global engagement  
with evidence-based practice  
through the  
clinical effectiveness agenda  
in order to ....  
improve patient outcomes*

**Further information:  
[www.patientsafetyfirst.ie](http://www.patientsafetyfirst.ie)**

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