

Meeting Notes

UKHCDO Peer Review Working Party

19th May 2017 15:30

Brussels meeting room, St. Giles, 154 Southampton Row, London, WC1B 5JX, UK

Present: John Hanley (Chair), Liz Carrol, Cathy Harrison, Anna Wells, Tim Nokes, Lishel Horn, Julia Anderson, Ri Liesner, Jane Eminson (Director, West Midlands Quality Review Service)

Apologies: Liz Chalmers, Gillian Evans, David Perry and Kate Khair. David Perry has resigned from the WP as he is retiring in the near future. JH has conveyed thanks for his considerable input.

Notes of previous meeting accepted as an accurate record.

1. Outcome of discussions at the UKHCDO Advisory Committee 19th May 2017

Several of the group had been at the UKHCDO advisory committee earlier in the day. JH and JE presented the proposal from the Peer Review WP which was supported. So the plan is to proceed with a collaborative UKHCDO/WMQRS UK-wide peer review programme (see attached outline proposal). There had been a general discussion at the advisory committee about the proposal including the perceived problems with the haemoglobinopathy peer review process in the North West. The outline funding model had also been approved – with the costs of the peer review programme ultimately to be recouped from Trusts by WMQRS. It was also agreed that the process should tap into the administrative support available from within the UKHCDO.

The WP will now need to work on the details of how to proceed with a view to updating the advisory committee and UKHCDO executive as the programme develops.

2. Development of Peer Review standard proforma

JE outlined the process of developing the peer review standards. WMQRS will use available information from multiple sources including:

Previous UKHCDO audit proforma; update proforma worked on by David Perry; existing Guidelines (tapping into Julia's recent guideline review work); Physio standards; Nursing competencies; Clinical psychology/social work standards; previous service specifications both for haemophilia and generic standards for care of children – and any other literature /useful documents.

All this info will be distilled into the WMQRS standard format and form a "first draft" for discussion, further modification and wide consultation before being finalised. It will take 6-8 weeks to produce the first draft. This can be worked on by email in advance of the next meeting.

JE to work on standards document via usual WMQRS process and circulate drafts to group as developed

3. Training for Peer Review visits

No detailed discussion – but will need to be developed once shape of the programme is finalised. Agreed there should be wide invitation for potential peer review team

members – as training in itself of value. It may be possible to tag on some training around time of UKHCDO AGM in November. Some discussion about make-up of peer review visit teams – agreed that an overall WMQRS representative to attend all visits/write reports/collate overview report would be best approach to ensure consistency. For team members, maybe a minimum number of visits should be required – but recognised this will come down to availability.

JE to approach Anne Yardunian who may be interested in taking on the WMQRS key role

4. Involvement of other stakeholders in development of peer review standards

Agreed need to involve others in the working party at early stage as part of the standards development process:

Patient/Carer representatives	<i>LCa/CH to recruit</i>
Commissioner	<i>JH to email Will Horsley</i>
Trust Manager	<i>JH to email UKHCDO membership</i>
Social Worker	<i>JH to invite social worker rep</i>
Clinical Psychologist	<i>JH to invite psychologist rep</i>

Laboratory issues – some discussion about how to do this without duplication with lab standards/accreditation. Agreed to include lab standards but not involve lab representative in the WP at this stage but will need lab input into review of standards when first draft done.

If no commissioner representative is identified – agreed important to keep commissioners informed and email minutes of meetings and involve in consultation.

5. Logistics of peer review visits – definition of geographical areas/existing Networks

Need to look at existing geographical based service provision and networks to work out the best way to approach visits including consideration of particular geographical areas like London, Wales, Scotland, Northern Ireland. Also need to look at adult/paediatric services. This needs to be done with reference to the “commissioning map”.

It would be useful to survey all HCCCs/HCs to ask if they are in a network and whether provide adult, paediatric service or both.

JH to collate and summarise info about the current geographical organisation of haemophilia services in UK and identify established networks – including a survey of HCCCs/HCs

6. Timelines

Broad timelines as per the proposal document.

Key dates:

Mon 24th July 2017 – next meeting of the WP

Nov 2nd/3rd 2017 – UKHCDO AGM – aim for final sign off

Then 6 months preparation time – so first visits in May 2018?? (after WFH meeting – see below)

7. Any other business

Patient/carers/family/children feedback/surveys.

Agreed this is an important part of the process and aim should be to gather as much feedback as possible. Paper and/or electronic options. Haemophilia society members and UKHCDO database could be used. HS has had offers of pharma support for admin costs. Picker institute may be a valuable source of info about best approach.

LCa to lead on this aspect of the programme

World Federation of Haemophilia Meeting, Glasgow 20th-24th May 2018

Need to avoid peer review work around this time as many in the UK haemophilia community will be involved in either organising or attending the meeting.

May be some interest in presenting details of UK peer review programme

JH to ask Gerry Dolan if a session on Peer review could be included

Ensuring process includes all aspects of bleeding disorders

Agreed that the peer review should encompass all aspects of bleeding disorders – not just haemophilia

Programme to be called: Peer Review of Services for People with Haemophilia and inherited and acquired bleeding disorders

8. Date of next meeting

Mon 24th July 2017 – 11am start – venue TBC (Haemophilia Society office if available)