

# NQAAP for Clinical Biochemistry Terms of Reference

# 1. Background

National Quality Assurance Advisory Panels (NQAAPs) have responsibility for monitoring of External Quality Assurance (EQA) schemes in each of the disciplines of pathology and through them the performance of the UK laboratories participating in those schemes.

#### 2. Purpose

The NQAAP has delegated responsibility from the Joint Working Group on Quality Assurance (JWGQA) for supporting patient safety by promoting, coordinating and protecting high professional standards in technical EQA and encouraging development of appropriate technical EQA schemes. Through the Quality Assurance in Pathology Committee (QAPC), the NQAAP reports to College Council.

#### 3. Oversight responsibilities

(Please note that the scope and functions of all NQAAPs for technical EQA are undergoing review as part of the RCPath EQA review programme and this will be subject to change)

- Reviewing and approving all technical EQA Schemes in Clinical Biochemistry. This will
  include agreeing criteria for performance standards and the management of persistent poor
  performance in these schemes, ensuring that each provider can identify a common
  definition of poor performance. Where possible, Panels will seek to apply consistent
  definitions across disciplines
- Receiving information on persistently poorly performing laboratories from EQA Scheme organisers (within two weeks of a laboratory being identified as a persistently poor performer)
- Agreeing with EQA scheme organisers' mechanisms for resolution of persistent poor performance. Generally, the scheme organiser will contact the laboratory in accordance with the scheme standard operating procedure and inform the Chair of the Panel with the proposed remedial action to be taken including the timescale.

If this does not lead to a resolution, the Chair of the Panel will offer advice to the laboratory / individual and, if appropriate, will arrange a visit to the laboratory by a Panel member or an agreed expert at the expense of the laboratory. At this point the United Kingdom Accreditation Service (UKAS) will be notified for laboratories accredited in the UK.

If persistent poor performance remains unresolved the Chair of the Panel will submit a report to the Chair of the QAPC, who will write a formal letter to the head of department copied to the CEO of the parent organisation outlining the issue(s) and giving notice that failure to engage in corrective actions will result in reporting to the Care Quality Commission (CQC). The Chair will report such laboratories to the appropriate regulator at the appropriate point in time.

#### 4. Accountabilities

#### 4.1 Performance of schemes

- The development and promotion of criteria for performance standards
- The management of persistent poor performance in these schemes
- The collation and presentation of data and reports from EQA scheme organisers
- Annual reports from all schemes are reviewed.
- Processes and management of mechanisms for reporting and resolving persistent poor performance
- Receiving and resolving complaints from scheme participants where these have not been resolved by the scheme organisers through their own internal processes
- Working with other NQAAPs and College Committees on common EQA performance issues

# 4.2 External relationships

- The NQAAP is accountable for managing a number of external relationships.
  - Working with UKAS to harmonise performance standards between different EQA schemes covering the same analyte to ensure a consistent approach. This includes the reporting of potential risks to UKAS.
  - Working with the Medicines and Healthcare products Regulatory Agency (MHRA) to identify potential different performance standards between different manufacturer methods for the same analyte to ensure a consistent approach. This includes the reporting of potential risks to the MHRA.
  - Working with the QAPC, other NQAAPs and EQA scheme organisers towards harmonisation of policies and definitions relating to poor performance, with separate policies becoming the exception. This does not prescribe how policies are implemented and overseen, but the emphasis is on harmonising outcomes. The policies and any exceptions will be discussed and agreed at QAPC meetings.
  - The EQA Schemes covering their analytes of induction training for all new EQA Scheme organisers (this is intended to provide a briefing to new scheme organisers to establish relationship and give clarity on what is expected. It is envisaged that this can be covered adequately in a telephone conversation with some brief supporting documentation).

# 5. Membership

The membership comprises:

- a chair, elected from amongst the membership of the Panel, and approved by the QAPC
- members nominated by and representing stakeholder groups such as professional bodies working in the field covered by the panel (these will need to be specified for each panel)

- co-opted members are permitted, but these are on an individual basis and the Panel should document the reason for a particular individual's co-option
- EQA providers should under normal circumstances not be members of the Panel. For convenience, Panels may hold a Panel meeting with a meeting with EQA providers before or after it, but all EQA providers must be invited to attend
- one of the members of the Panel will be designated as Deputy Chair. This role will be filled by an RCPath member of the NQAAP
- All members normally serve a three-year term of office renewable at the discretion of the organisation that they represent. There is no limit to the length of time a member may serve, but after six years (i.e. two terms of office), and then every subsequent three years the stakeholder group should specifically reaffirm their desire that the individual continue in this role. Co-opted members will be recruited for a specific term (typically 12 months) to contribute for specific topics or projects. The membership of the NQAAP will be confirmed annually by the QAPC.

# 6. Governance and operation

- The Panel produces an annual report which is submitted to the QAPC.
- The Panel usually meets twice yearly. These meetings will normally be held via videoconferencing. Administrative support for organising meetings, distribution of papers and taking of minutes will be provided by RCPath on a cost basis. Minutes of the meetings are produced and distributed to panel members and EQA scheme providers that attend the meeting.
- Meetings of the panel will be quorate when more than 33% of the members are present (this includes members using teleconference/videoconference facilities).
- Panel members must declare conflicts of interest as they arise. Good practice would be for the chair to ask for any known conflicts of interest at the commencement of the meeting, but this should not preclude declaration during the meeting if necessary.
- Panel members must maintain appropriate confidentiality. The oversight system operates under a system of *confidentiality*, and <u>not</u> anonymity. EQA schemes must fully identify laboratories reported to the Panels (only providing ID numbers etc is not acceptable). The Panel members are under an obligation to keep this information confidential.
- Panel communications must appropriately identify labs and manufacturers to minimise patient risk.
- Panels must invite organisers from all EQA schemes covering UK medical laboratories testing patient samples to an annual Panel meeting as a minimum. It is not acceptable to have other meetings where only one or a selection of EQA providers are invited, however, this should not be applied where the Panel was not aware of a registered provider.

#### 7. Resources

- The administrative and costs of operating the NQAAP is funded by a levy on EQA providers.
- Travelling expenses will be paid to members (but not observers) of the committee in line
  with the College's expenses policy. The expenses policy is available on the website. Claims
  must be made through the College's on-line finance system.

Terms of Reference agreed at QAPC meeting	
Chair of QAPC	Signed
Approved at College Council meeting	
Review date (3 years following Council approval)	

# NOTE: for this pilot NQAAP, the terms of reference will be reviewed after 12 months

#### **Proposed support services**

Based on the requirements identified in consultation with NQAAP chairs and members of the EQA forum, the following support is proposed for the NQAAPs:

- arrange meetings/teleconferences and to produce written minutes for all meetings
- host 2 x NQAAP meetings a year
- maintain document controlled SOPS, Person Specs etc
- organise appointments processes for the NQAAP chairs
- support the chair by following up on actions, producing correspondence and maintaining central records including conflict of interest declarations etc
- collate and manage the data required for the NQAAP to be able to exercise its function
- develop a common method of cloud-based or RCPath Server based document sharing and e-working to share out the work, speed up business and minimise face-to-face meetings
- produce, in conjunction with the NQAAP chair, an annual report of NQAAP activities for the QAPC.

#### Cost breakdown and proposed funding for the pilot

The breakdown of costs for providing the proposed pilot support services to the Clinical Biochemistry Panel is as follows:

Support Service	Cost
Committee administration	£1650.00
Day delegate rate, meeting room and catering (x2 per year)	£400.00
Expenses for NQAAP (7 members, £175 per meeting)	£2450.00
Set up of shared IT system (one off cost, access to office 365)	£50.00
Data management, correspondence, annual report writing	£1072.50
Total	£5622.50

N.B. These costings do not include IT support service for shared IT system or website, cost of hosting the proposed larger NQAAP-EQA supplier meeting, management of College staff or services. The expenses rate is an estimated figure from Daniel Ross.

The Professional Standards team propose that the cost of providing these pilot services is covered by the existing surplus within the EQA levy.

(N.B To be discussed with Daniel Ross)