

Issue date: July 2007

Audit criteria

Varenicline for smoking cessation

NICE technology appraisal guidance 123



Audit criteria for NICE technology appraisal guidance 123

Varenicline for smoking cessation

Objective of the audit

The aim of the audit is to assist NHS trusts to determine whether the service is implementing, and is in compliance with, the NICE technology appraisal 'Varenicline for smoking cessation'.

Patient group to be included in the audit

Smokers attending health service consultations or treatment related to smoking cessation, in primary care, hospital or community settings.

Sample for the audit

It is suggested that a sample be selected from all patient contacts in a 1 month period. In most practices (and other settings) this will produce a sample of up to several hundred people, of whom a proportion will be people who smoke. However, even if organisations are unable to commit to an audit of this scale there is considerable value in undertaking a structured audit of the guidance for a shorter period of time.

Data source for the audit

The audit criteria require data to be collected from a range of sources, including patient records and patient administration systems.

Frequency of the audit

The audit should be repeated periodically depending on the trust audit strategy and the time required to implement any necessary action arising from the first audit. This will allow trusts to monitor progress towards full compliance. However, the frequency of repeat audits needs to be considered alongside other priorities for audit.

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Audit criteria: These are the audit criteria developed by NICE to support the implementation of this guidance. Users can cut and paste these into their own programmes or they can use this template

Criterion no.	Criterion	Exceptions	Definition of terms and/or general guidance	Data source
1	The percentage of smokers offered varenicline as an option.	Non-smokers	Information regarding licensed indications for varenicline can be found in section 2 of the NICE guidance.	Patient records
	GP practices, primary care trusts, NHS trusts		Standard = 100%	
2	The percentage of smokers prescribed varenicline who were also offered other behavioural support.	Non-smokers	Varenicline should normally be provided in conjunction with counselling and support. However, if such support is refused or unavailable, this should not preclude treatment with varenicline.	Patient records
	GP practices, primary care trusts, NHS trusts		Standard = 100%	
No. of criterion replaced	Local alternatives to above criteria (to be used where other data addressing the same issue are more readily available)			

Appendix: Using the audit criteria to audit implementation of the guidance

The following paragraphs are provided to assist NHS organisations to audit progress in implementing NICE technology appraisal guidance. They represent current good practice in audit, but additional guidance can be found in 'Principles for best practice in clinical audit'.

Auditing implementation of NICE guidance

Following dissemination of the guidance to all relevant services and partners, NHS organisations are encouraged to undertake a baseline audit to determine whether practice is in accordance with the guidance. Where practicable, the audit should be repeated on a regular basis to monitor implementation and to enable comparisons of practice and results over time.

Audit rationale and planning

The Healthcare Commission assesses the performance of NHS organisations in meeting core and developmental standards set by the Department of Health (DH) in <u>'Standards for better health'</u>. The implementation of NICE guidance will help organisations meet developmental standard D13. Standard C5(a) states that 'Healthcare organisations ensure that they conform to NICE technology appraisals and, where it is available, take into account nationally agreed guidance when planning and delivering treatment and care'. In order to assure themselves of compliance NHS trust boards need to receive regular reports on the implementation of NICE guidance, highlighting areas of noncompliance and risk. The audit of this guidance needs to be planned alongside audits of other NICE guidance, in order to feed into the appropriate reporting cycle.

Audit reporting template

As part of this guidance, NICE has developed recommended audit criteria and has included these within an audit reporting template. It is recognised that some trusts will have their own well-developed systems for reporting audit results within the organisation and for retaining results to allow progress over time to be monitored. Where this is the case, NICE would not wish to alter current approaches – the reporting template is provided for those trusts that might find it useful.

Calculation of compliance

Where compliance (%) with the guidance should be calculated as a measure, this is calculated as follows:

Number within the population group whose care is consistent with the criterion x 100% Number within the population group to whom the measure applies (that is, the total population group less any exceptions)

As well as reporting the percentage compliance, it will often be useful to report the actual numerator and denominator figures (to give an idea of scale).

Review of audit findings

NICE encourages the local discussion of audit findings and, where there is an identified lack of compliance with the guidance, the development of an action plan. See 'How to put NICE guidance into practice: a guide to implementation for organisations'. Progress against the plan can then be monitored and reported to the trust board to show that progress towards desired improvements is being achieved.

Definitions used within the audit criteria and audit reporting template					
Criterion	Measurable element derived from the key priorities for implementation of each piece of guidance. The organisational level to which the criterion applies is shown in italics.				
Exceptions	Where implementation of guidance is not appropriate for a particular subgroup of the population, this is clearly stated. Where there are no exceptions, this is also stated.				
Definition of terms and/or general guidance	Unambiguous definitions of any terms used in the audit criteria to promote consistency of approach and measurement and reduce the risk of non-comparable findings. This may include general guidance specific to that criterion. These definitions do not include any interpretation (or other clarification) of the NICE guidance. Should there be a need to include any such clarification, this will be inserted as a footnote to the audit template. The desired standard is shown in italics.				
Data source	Source(s) of data used to gather evidence of implementation.				
Compliance	Percentage compliance within the audited sample (see previous section for calculation).				
Findings	Usually, this will provide added detail around the basic compliance figure – such as showing variation by age, ethnic group – to ensure that an aggregate compliance figure does not mask difficulties being experienced by particular subgroups of the population.				
Comments	This allows free text for comment on audit findings and the local context in which they exist. It can provide the reference to other, more detailed documents including, if necessary, an action plan for improvement.				

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Audit report: This is designed to be completed for each audit to record compliance, findings and comments

Number of audit:					
Date audit completed:					
Audit lead/manager:					
Summary of previous audit results: (where applicable)					
To be completed by service during audit					
Criterion no.	Criterion	Data source	Compliance	Findings	Comments
1	The percentage of smokers offered varenicline as an option. GP practices, primary care trusts, NHS trusts				
2	The percentage of smokers prescribed varenicline who were also offered other behavioural support. GP practices, primary care trusts, NHS trusts				
No. of criterion replaced	Local alternatives to above criteria (to be used where other data addressing the same issue are more readily available)				

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History of audits: This is designed for recording the results of consecutive audits, to demonstrate progress over time

		Compliance		Other findings			
Number of audit:		Initial	2	3	Initial	2	3
Date audit completed:							
Audit lead/manager:							
Criterion no.	Criterion						
1	The percentage of smokers offered varenicline as an option.						
	GP practices, primary care trusts, NHS trusts						
2	The percentage of smokers prescribed varenicline who were also offered other behavioural support.						
	GP practices, primary care trusts, NHS trusts						
No. of criterion replaced	Local alternatives to above criteria (to be used where other data addressing the same issue are more readily available)						