

Date and Time: 16th November 2009

Minutes:

Quality Standards VTE Prevention Topic Expert Group

Place: Level 1A
City Tower
Piccadilly Plaza
Manchester
M1 4BD.

Present Gerard Stansby (Chair) (GB)
Steven Barden (SB)
Kim Carter (KC)
Nick Chalmers (NC)
Steve Finney (SF)
Jim Gardner (JG)
Beverley Hunt (BH)
Donald McBride (DM)
Sarah McDiarmid (SM)
Carlos Sharpin (CS)
Peter Walton (PW)
Alyson Whitmarsh (AW)
Nandan Gautam (NG)

NICE Staff

Val Moore (VM)
Nicola Bent (NB)
Amanda Pagett (AP)
Esther Clifford (EC)
Richard Diaz (RD)
Craig Grime (CG)
Rachel Neary (RN)
Tim Stokes (TS)
Sarah Willett (SW)

Apologies: Chantelle Bailey (CB)

1.1 Agenda item 1:

1.1.1 Welcome, introductions and plan for the day
GS welcomed the group, noted the apologies and reviewed the agenda for the day.

- 1.1.2 Minutes of the last meeting
The minutes from the induction meeting were agreed as an accurate record.
- 1.1.3 Declarations of interest
None declared
- 1.2 **Agenda item 2: Objectives of the day**
NB confirmed that the objective for the day was to produce between 10 and 15 measurable statements that identify a high quality service to be progressed for field testing and consultation. She emphasised the fact that the new NICE VTE guideline, which covers all patients in hospital rather than just surgical patients, was not yet final. The consultation has now closed and the comments are being reviewed. However, she suggested that the document was unlikely to change significantly.
- 1.3 **Agenda item 3: Presentation on a high quality VTE service**
GS presented to the group an outline of what a high quality VTE service would look like.
- 1.4 **Agenda item 4: Overview of the process for developing VTE quality standards**
TS outlined the process by which the VTE Prevention Quality Standard would be produced. He explained that the draft NICE VTE guideline has been taken as the preliminary evidence source and that the internal quality standards team had preliminary prioritized several recommendations from the guideline for discussion. He added that there was an expectation that the quality statements would relate to areas where care is variable or poor and asked that group to keep measurement in mind during prioritization.

- 1.5 Agenda item 5: Draft Quality Standards and Quality Indicators developed from RCP Stroke guideline Key Priorities for Implementation**
CG led the group in the discussion of the individual KPIs. The TEG reached a consensus about which KPIs should be prioritised for further consideration during field testing and consultation.
- 1.6 Agenda item 6: Other guideline recommendations potentially suitable for QS development**
RD led the group in the discussion and consideration of additional recommendations potentially suitable for quality standard development. The TEG reached a consensus about which of these additional recommendations would be prioritised to draft statements for field testing and consultation.
- 1.7 Agenda item 7: Field testing the draft quality standard**
NB briefly described the proposed approach for field testing the feasibility and face-validity of the draft quality statements and asked for the group's comments and suggestions.
- The group suggested that VTE Exemplar Networks would be a valuable contact for field testing.
- 1.8 Agenda item 8: AOB and next steps**
NB advised that the NICE Quality Standards Team would now draft a set of quality statements and measures based on the group's discussions, which would then be circulated to the TEG for comment.

Close of the meeting

GS thanked the group for their hard work and closed the meeting.