

Guidance on Quality Accounts, the Quality Accounts list, and requirements of Healthcare Service Providers

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1.0 What is a Quality Account?

A Quality Account is a written report that providers of NHS services are required to submit to the Secretary of State and publish on the NHS Choices website each June summarising the quality of their services during the previous financial year. One of the elements included in the Quality Account relates to clinical audit.

2.0 The Legislation

The legislation governing Quality Accounts is found in [The Health Act \(2009\)](#) and [The National Health Service \(Quality Accounts\) Regulations \(2010\)](#). These state that local healthcare providers must publish a document each year which sets out information relation to the quality of their services (a “quality account”).

2.1 Summary of legislative requirements:

1. Healthcare Service Providers (HSP) must report within their Quality Account:
 - the number of national clinical audits (NCAs) and clinical outcome review programmes (enquiries) which they have participated in and the participation rate

- the number of NCA and enquiry reports reviewed by the HSP's board
 - the actions they intend to take to improve services as a result of the NCA and enquiry reports that they have reviewed
2. Where an HSP has not participated in an NCA or enquiry, they are required to report the reason within their Quality Account

The Quality Accounts legislation does not impose any requirement on a HSP to participate in specific NCAs or enquiries, simply to report on whether or not they have participated in them.

The requirement to participate in the HQIP commissioned National Clinical Audit and Patient Outcome Programme (NCAPOP) projects stems from the [NHS Standard Contract](#), which also gives commissioners the power to impose penalties on service providers who fail to participate. The requirement to participate in NCAs and enquiries does not extend to non-NCAPOP projects unless commissioners have chosen to add a requirement to participate, by adding variations to the local contracts.

3.0 Requirements for Healthcare Service Providers

In participating in NCAs and enquiries, each HSP must allocate appropriate resource to:

1. Check the relevance of all known NCAs and enquires to their service. The HQIP National Clinical Audit & Enquiry Directory provides details of geographical coverage and care setting
2. Register with applicable NCAs and enquiries
3. Collect and validate data
4. Review annual NCA and enquiry reports produced during the previous year
5. Agree and implement action plans to improve the quality of their services based on the NCA and enquiry reports
6. Monitor progress against action plans
7. Compile and publish a Quality Account

Input is required from a range of personnel and teams across the HSP responsible for data collection, quality assurance and clinical governance. Most HSPs have a dedicated clinical audit team, however, often the collecting and validating of data for NCAs and enquiries is undertaken by a range of personnel including clinicians and specialist nurses or doctors.

4.0 The NHS England Quality Accounts list

The NHS England Quality Accounts list details the NCAs and enquiries that NHS England would like health service providers to report on as part of their Quality Account for the following financial year.

In December 2010 the Department of Health (DH) published guidance in the form of [The Quality Accounts Toolkit 2010/11](#) to assist service providers with the preparation of their Quality Accounts. This toolkit introduced the concept of a list of all known NCAs and enquiries, which became known as the Quality Accounts list. The list is compiled by the National Advisory Group on Clinical Audit and Enquiries (NAGCAE) with input from HQIP. NHS England agrees and confirms the list before it is published on the HQIP website.

The 2010/11 Quality Accounts Toolkit remains unchanged and will not be republished.

4.1 Statutory function of the Quality Accounts list

Healthcare providers have historically used the Quality Accounts list to plan which NCAs and enquiries they will participate in during the following financial year. However, **the Quality Accounts list currently has no statutory function.** Its legal position is that it is an advisory document and intended to aid HSPs in determining which NCAs and enquiries to engage with. By solely using this list to determine which NCAs and enquiries to engage with, a HSP may therefore fail to comply with the current legislation.

Further information about the statutory and mandatory requirements for clinical audit is available on the [HQIP website](#).

4.2 How the list is compiled

Each autumn HQIP undertakes a scoping exercise to determine which NCAs and enquiries will be operating during the following financial year and whether or not they comply with the inclusion criteria. Projects that do not respond to the HQIP scoping exercise are not considered for inclusion on the list. The information that is collected is reviewed by NAGCAE who make a recommendation to NHS England on which projects should be included on the list. The list is published each December / January on the HQIP website.

Once published the list is not amended and remains static during the year. Organisations that deliver NCAs or enquiries who wish to be considered for inclusion on the Quality Accounts list should contact HQIP directly.

4.3 The NHS England Quality Accounts list inclusion criteria

NAGCAE and NHS England have agreed the following criteria which will determine the projects included on the Quality Account list:

Quality Accounts list inclusion criteria for NCAs (2016/17)	Quality Accounts list inclusion criteria for NCAs (2017/18)
1. Coverage: collects data from at least 60% of eligible services	1. Coverage: collects data from at least 70% of eligible services

<p>nationally</p> <ol style="list-style-type: none"> 2. Data: collected on individual patients 3. Comparisons of providers (trusts, hospitals, networks) 4. Plan to recruit patients during the following financial year 5. Public reporting: comparing providers' performance published within 18 months of completion of the most recent patient recruitment period 6. Outcomes and processes of care being audited must be based on rigorous evidence (including NICE Quality Standards and Guidelines) 	<p>nationally</p> <ol style="list-style-type: none"> 2. Data: collected on individual patients 3. Comparisons of providers (trusts, hospitals, networks) 4. Plan to recruit patients during the following financial year 5. Public reporting: comparing providers' performance published within 12 months of completion of the most recent patient recruitment period 6. Outcomes and processes of care being audited must be based on rigorous evidence (including NICE Quality Standards and Guidelines)
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The above criteria will be reviewed periodically by NAGCAE and NHS England. There is an expectation that all NCAs should work towards complying with these criteria.

4.4 Why use the Quality Accounts list to plan audit activity?

The NHS England Quality Accounts List details the National Clinical Audits and Clinical Outcome Review programmes which NHS England advises Trusts to prioritise for participation and inclusion in their Quality Account. The list, however, should not be used by HSPs in isolation. Each HSP should consider other NCAs and enquiries outside of the list and whether they should participate. If they decide not to, they are required to report the reason within their Quality Account.

5.0 The HQIP National Clinical Audit & Enquiry Directory

In addition to publishing the NHS England Quality Account list, HQIP publishes an Excel-based directory of all known NCAs and enquiries that plan to run during the forthcoming financial year, as well as those that ran during previous financial years. This has previously been known as the HQIP Quality Accounts Resource.

All NCAs and enquiries that respond to the Quality Accounts list scoping survey, along with any other projects that make themselves known to HQIP are included on the HQIP National Clinical Audit & Enquiry Directory. The Directory therefore includes all projects included on the NHS England Quality Accounts list, all those that are part of the NCAPOP programme, and other projects that are funded separately.

The directory includes information on each project including contact details for the NCA or enquiry project manager, data collection cycles and published reports. HSPs should consult the HQIP National Clinical Audit & Enquiry Directory when preparing

their Quality Accounts.

NB: The information detailed in the directory is provided by the individual NCA or enquiry and may therefore not be up-to-date. Any queries about the requirements of a particular NCA or enquiry should be addressed to the relevant NCA or enquiry project manager in the first instance.

6.0 Completing a Quality Account

The NCA part of a quality account should consist of two elements:

- **Element 1** relates to the collection of patient level data for the quality accounts year being reported
- **Element 2** relates to reviewing audit reports published during the course of the previous **calendar year**, and acting upon them within the most recent financial year. This includes tabling these reports at board meetings.

Each HSP should ensure that their Quality Account is publically accessible. Commissioners and the Care Quality Commission will review information included within Quality Accounts when assessing service providers.

6.1 Reporting requirements for Quality Accounts

The DH provides guidance on the reporting requirements for the clinical audit section of the quality accounts in its [gateway letter ref no 00931, \(09.01.2014\)](#).

6.2 Penalties for non-participation in NCAs

Under the terms of the NHS Standard Contract, all HSPs must participate in the NCAPOP projects which are relevant to the services they provide. If they fail in this contractual obligation, the commissioners of the relevant services can charge financial penalties under General Condition 9 of the contract, and it is up to the commissioners to decide on the scale of the penalties. It should be noted that commissioners do not have the power to permit providers to 'opt out' of their obligation to participate - to do so they would have to have permission from NHS England and this is unlikely to be given unless the circumstances are exceptional.

If an HSP has a genuine reason for not participating in an NCA e.g. not providing the service, this may be reported in the Quality Accounts instead of reporting participation. You can find more information about the contractual and statutory requirements for clinical audit on the HQIP website [here](#).

7.0 Further information

Links to further information are detailed below:

- [Quality Accounts: reporting arrangements for 2012/13](#)

- [DH Quality Accounts audit guidance \(pub Apr 2012\)](#)
- [Quality Accounts Toolkit on the DH website \(2010/11\)](#)
- [Statutory and mandatory requirements for Clinical Audit](#)
- [Schedule to the National Health Service \(Quality Accounts\) Regulations 2010 \(sections 2, 2.1, 2.2 and 2.3\)](#)
- [Quality accounts information on the Department of Health's website](#)

8.0 Contact

If you have a question about a specific audit or enquiry you should contact the audit team directly using the email or phone details listed on the HQIP National Clinical Audit and Enquiry Directory. If you have a general query, or a query about the NHS England Quality Accounts list or HQIP Directory, please email communications@hqip.org.uk.