STANDARD OPERATING PROCEDURE STANDARDISATION OF NATIONAL DOCUMENTS / DATA

This is the process to follow when standardising documentation and / or data sets for use across the NHS in Wales

Document Version	1.2

Status	Approved

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Date approved:	
Review date:	

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1 DOCUMENT HISTORY

1.1 REVISION HISTORY

Date	Version	Author	Revision Summary
16/09/2019	0.1	Rachel Gittins	Initial Draft
12/11/2019	0.2	Rachel Gittins	Amendments following review by Jonathon Pinkney WNCR Project Manager
08/01/2020	0.3	Rachel Gittins	Amendments following review by Fran Beadle National Nurse Informatics Lead
23/04/2020	0.4	Rachel Gittins	Amendments following review by Claire Bevan Senior Responsible Officer
14/05/2020	1.0	Rachel Gittins	Final Version
07/01/2022	1.1	Rachel Gittins	Amendments to update process and changes the flow chart
28/02/2022	1.2	Rachel Gittins	Amendments following CNIO and SRO review if 1.1 version

1.2 REVIEWERS

This document requires the following reviews:

Date	Version	Name	Position
28/02/2022	1.2	Claire Bevan	Senior Responsible Officer
28/02/2022	1.2	Clinical Nurse Informatics Officers	

1.3 AUTHORISATION

Signing of this document indicates acceptance of its contents.

Author's Name:	Rachel Gittins
Role:	Standards Development Manager
Signature:	X_____ Author

Approver's Name:	Claire Bevan

Role:	Senior Responsible Officer
Signature:	X _____ Approver

1.4 DOCUMENT LOCATION

Type	Location
Electronic	Z:\Information Standards\IS1 Data Standards\IS1-2 Background Info\Acute Nursing Documentation\SOP

2 PURPOSE

The purpose of the procedure is to detail the processes and good practice guidelines to follow when standardising clinical documentation and/or data sets for use across the NHS in Wales.

3 CONTEXT

The principles outlined within the document were captured as part of phase one of the Digitalisation of Nursing Documents project, specifically the activities and actions undertaken to nationally standardise the adult inpatient assessment and six risk assessments. Lessons learned during this initial phase of standardisation were captured, and the principles incorporated into this Standard Operating Procedure (SOP). The principles and processes are not exhaustive or intended to be restrictive, but rather provide some good practice approaches which will help other standardisation activities proceed efficiently and effectively.

4 SCOPE

The procedure applies to all NHS Wales health boards and trusts to standardise clinical documentation for use across the NHS in Wales e.g. Secondary, Community and Emergency care. The process can be applied to the standardisation of paper documents, prior to digitisation if required, or for standardisation of a set of information data sets/standards (collectively referred to as a 'document' for the purposes of this SOP).

5 REFERENCES

DOCUMENT	VERSION
Information Standards Assurance Process	http://www.wales.nhs.uk/sites3/home.cfm?orgid=742
WHC 2019 (026) Nationally Standardised Adult Inpatient Assessment and Core Risk Assessments	https://gov.wales/standardisation-nursing-core-risk-assessment-documents-whc2019026

6 PROCEDURE

Standardisation of a series of documents requires consideration across three key areas.
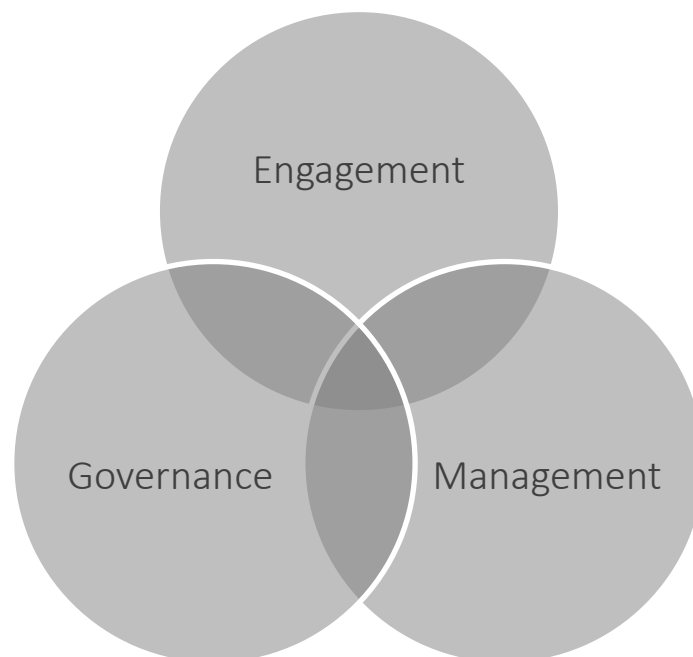
6.1 Engagement

If a decision is taken to standardise nursing / MDT documentation the first step in the process is to check whether an All Wales nursing / MDT form / document exists and whether a data standards specification has been developed or is currently under development. Enquiries should be addressed to Digital Health & Care Wales – Data Standards Team. Email: data.standards@wales.nhs.uk.

Alternatively, a repository for the register / catalogue of all forms / documents that have been developed nationally so far can be accessed at NHS Wales Nursing Documentation - Digital Health and Care Wales and are available to be accessed both internally and externally to NHS Wales. Forms/documents currently under development will only be available internally to the information standards team at Digital Health & Care Wales.

If an All Wales form / document does not exist or is not in current development, then research will need to be undertaken on any documentation relating to the form that is required to be standardised. The process below should be undertaken to assist in the standardisation of the form / document. The identified lead should:

- Identify national clinical specialty group / or core clinical work group:
  - o Oversee the work
  - o To carry out reviews
  - o Present their recommendations

- Review & Research:
  - o What forms are currently in use across Wales (if any)

- o Current legislation/NICE guidance
- o Current good practice guidelines
- o Existing reporting / auditing requirements
- o Existing data standards in Wales and other home countries
- o All Wales Document template?
- o Is there a national specialty group in place?
- o Review existing digital applications to determine if the information is already captured and can be utilised and copied forward

- If national specialty group exist;
  - o Ensure that you are aware of the group structures (chair), meeting formats, regularity.
  - o Request that you attend their meetings to discuss documentation and request that they share any recommendations of forms / tools that they may have or are currently using.
  - o Set up a contact log to record details of national group to include – National group name, National group lead (name and contact details), National group representative (Name, Health Board & Specialty), Formal meeting dates of group and include a log of any contact between the project team and group members (emails/calls/meetings/versions/sharing of versions for feedback)

- Follow national and local (Health Board/Trust) document approval processes:
  - o To approve final drafts
  - o To approve adoption across local health board/trust sites

- Set up an initial workshop / working group to begin the initial draft, attendees should include representatives from the following areas. This will then become your working group:
  - o National Specialty Group
  - o Technical
  - o Information Standards
  - o Clinical Leads – secondary, primary, community, therapies etc
  - o Project staff

- Once initial draft of the standard has been agreed within the working group, share draft with the Chief Nursing Informatics Officers (CNIOs) to review and make recommendations on the information data standard to feedback to specialist groups.
- Share draft with specialist group for feedback and approval.
- Set up a Change log to record all feedback received from local specialists / national groups. Record what has been kept, added, deleted including the rationale. This will ensure that you don't revisit decisions unnecessarily.
- Include as many cycles of feedback as necessary to agree a final draft.
- Develop and share SBAR on recommendation with local health boards/trusts to approve the information data standard.
- Ensure you set a final deadline date of when you need to have a final draft document / standard agreed and revise final draft with core working group members.

- Review with national groups post implementation to ensure that user feedback is considered and is fit for purpose. Any recommendations for changes must align with Service Management Change Management process.

6.2   Governance

Once a final information data standard has been agreed by national and local approval processes the DHCW Information Standards team will then seek approval through the Welsh Information Standards Assurance Process and the Welsh Information Standards Board ensuring appropriate governance of all data standards by appropriate stake holder.

For example, if the document was a risk assessment there would be a need to include the wider multidisciplinary team i.e. falls assessment this would need to be approved by NHS Wales Executive Directors of Therapies prior to final approval by the NHS Wales Directors of Nursing.

This will include presenting the proposed standard and accompanying Data Standards Change Notice to the Welsh Information Standards Board for their approval; ensuring that you have statements of support from clinical groups.

Publish Data Standards Change Notice and Welsh Health Circular (if applicable).

6.3   Management

Ensure that timescales are set and agreed from the beginning and that everyone involved is aware of the proposed plan and expectations are clear from the outset.

Advise everyone involved that they need to use standard non-jargon language so that everyone understands what is being said.

An impact assessment will need to be undertaken to consider the following (not an exhaustive list):

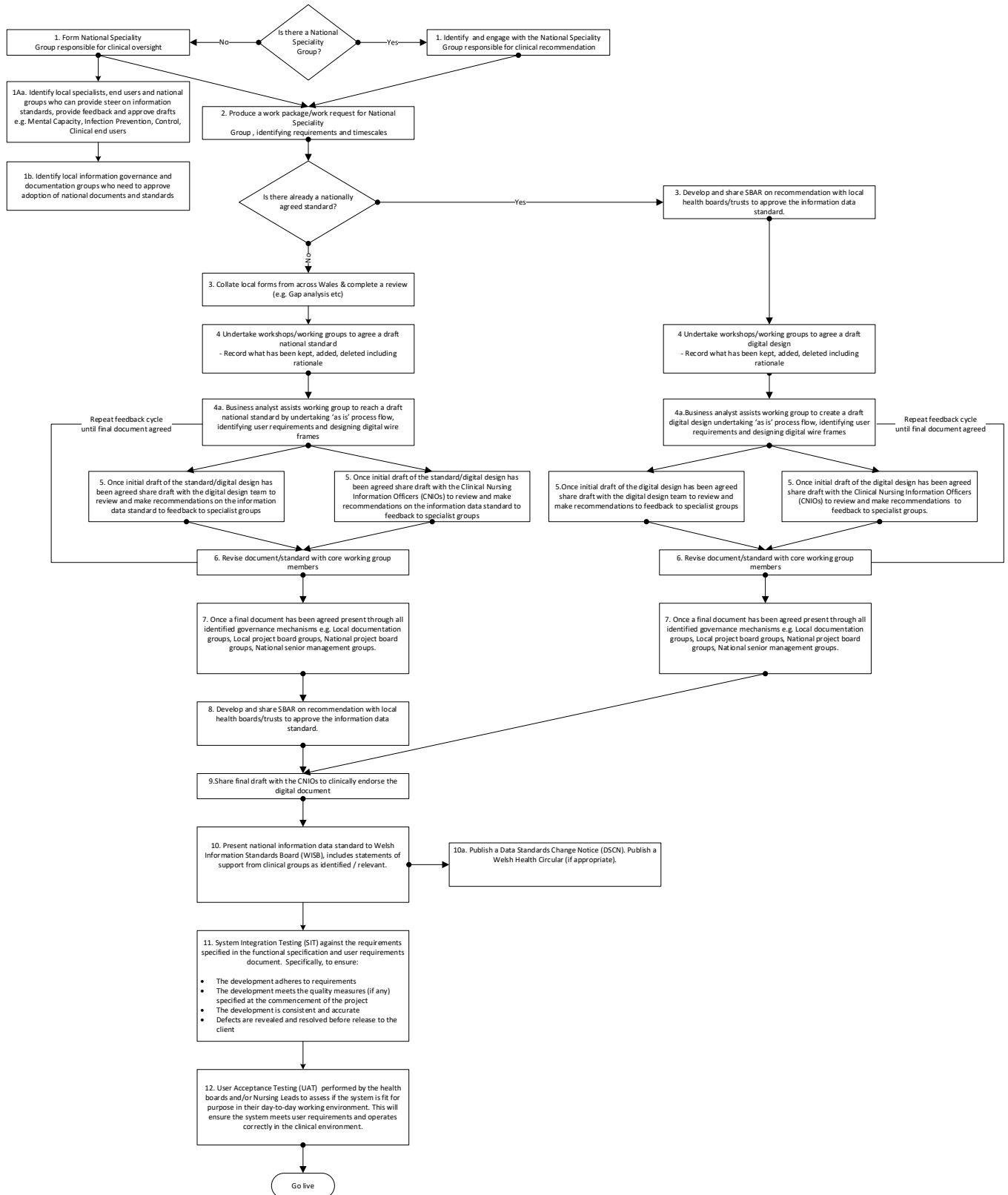- Impact of changes to existing processes
- Training implications (clinical, digital)

It is the responsibility of the WNCR project team to ensure that all changes and decisions made are recorded in the change log as detailed above.

A review process should be in place, once the national standard/document has been implemented to cover lessons learned and review how the standard meets ongoing requirements.

7   PROCESS

WNCR new documents process map

The diagram contains the following elements:

Decision: Is there a National Speciality Group?
- **No →** 1. Form National Speciality Group responsible for clinical oversight
- **Yes →** 1. Identify and engage with the National Speciality Group responsible for clinical recommendation

1Aa. Identify local specialists, end users and national groups who can provide steer on information standards, provide feedback and approve drafts e.g. Mental Capacity, Infection Prevention, Control, Clinical end users

1b. Identify local information governance and documentation groups who need to approve adoption of national documents and standards

2. Produce a work package/work request for National Speciality Group, identifying requirements and timescales

Decision: Is there already a nationally agreed standard?
- **Yes →** 3. Develop and share SBAR on recommendation with local health boards/trusts to approve the information data standard.
- **No →** (continue below)

Left branch:

3. Collate local forms from across Wales & complete a review (e.g. Gap analysis etc)

4 Undertake workshops/working groups to agree a draft national standard - Record what has been kept, added, deleted including rationale

4a. Business analyst assists working group to reach a draft national standard by undertaking 'as is' process flow, identifying user requirements and designing digital wire frames

Repeat feedback cycle until final document agreed

5. Once initial draft of the standard/digital design has been agreed share draft with the digital design team to review and make recommendations on the information data standard to feedback to specialist groups

5. Once initial draft of the standard/digital design has been agreed share draft with the Clinical Nursing Information Officers (CNIOs) to review and make recommendations on the information data standard to feedback to specialist groups

6. Revise document/standard with core working group members

7. Once a final document has been agreed present through all identified governance mechanisms e.g. Local documentation groups, Local project board groups, National project board groups, National senior management groups.

8. Develop and share SBAR on recommendation with local health boards/trusts to approve the information data standard.

9. Share final draft with the CNIOs to clinically endorse the digital document

10. Present national information data standard to Welsh Information Standards Board (WISB), includes statements of support from clinical groups as identified / relevant.

10a. Publish a Data Standards Change Notice (DSCN). Publish a Welsh Health Circular (if appropriate).

11. System Integration Testing (SIT) against the requirements specified in the functional specification and user requirements document. Specifically, to ensure:
- The development adheres to requirements
- The development meets the quality measures (if any) specified at the commencement of the project
- The development is consistent and accurate
- Defects are revealed and resolved before release to the client

12. User Acceptance Testing (UAT) performed by the health boards and/or Nursing Leads to assess if the system is fit for purpose in their day-to-day working environment. This will ensure the system meets user requirements and operates correctly in the clinical environment.

Go live

Right branch:

4 Undertake workshops/working groups to agree a draft digital design - Record what has been kept, added, deleted including rationale

4a. Business analyst assists working group to create a draft digital design undertaking 'as is' process flow, identifying user requirements and designing digital wire frames

Repeat feedback cycle until final document agreed

5. Once initial draft of the digital design has been agreed share draft with the digital design team to review and make recommendations to feedback to specialist groups

5. Once initial draft of the digital design has been agreed share draft with the Clinical Nursing Information Officers (CNIOs) to review and make recommendations to feedback to specialist groups.

6. Revise document/standard with core working group members

7. Once a final document has been agreed present through all identified governance mechanisms e.g. Local documentation groups, Local project board groups, National project board groups, National senior management groups.

8   APPENDIX

All Wales Document Template

AllWales
DocumentTemplate.d

All Wales Document Adoption Template

REF-WNCR-P2-TEMP
LATE-SBAR National A