



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*

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Author: Rachel Gittins
Approver: Claire Bevan

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Next Review Date:

Tŷ Glan-yr-Afon
21 Heol Ddwyreiniol Y Bont-Faen, Caerdydd CF11 9AD
21 Cowbridge Road East, Cardiff CF11 9AD

Ffôn/Tel: 02920 500500

www.cymru.nhs.uk/gwybodeg

www.wales.nhs.uk/informatics

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SOP – National Information Data Standardisation

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 Jonathan Pinkney
8/1/2020	0.3	Rachel Gittins	Amendments following review by Fran Beadle
23/04/2020	0.4	Rachel Gittins	Amendments following review by Claire Bevan
14/05/2020	1.0	Rachel Gittins	Final Version

1.2 Reviewers

This document requires the following reviews:

Date	Version	Name	Position

1.3 Authorisation

Signing of this document indicates acceptance of its contents.

Author's Name: Rachel Gittins	
Role: Lead Specialist (Data Standards)	
Signature:	Date: 14/05/2020

Approver's Name: Claire Bevan	
Role: Senior Responsible Officer	
Signature:	Date: 14/05/2020

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 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

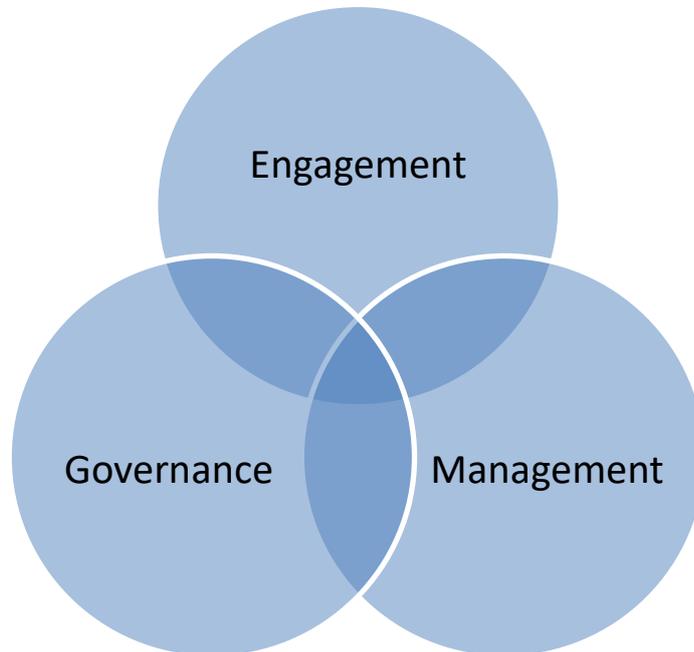
The procedure applies to all NHS Wales health boards and trusts to standardise clinical documentation for use across the NHS in Wales e.g. Secondary, Community and Emergency care. The process can be applied to the standardisation of paper documents, prior to digitisation if required, or for standardisation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

5 REFERENCES

Website / Document	
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

The first step in the process is to check whether an All Wales form / document exists and whether a data standards specification has been developed or is currently under development. Enquiries should be addressed to NHS Wales Informatics Service – 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 <http://www.nwisinformationstandards.wales.nhs.uk/home> 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 NHS Wales Informatic Service.

If an All Wales form / document doesn't exist or not in current development, then research will need to be undertaken on any documentation relating to the form you wish to standardise. The process below should be undertaken to assist in the standardisation of the form / document:

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

- If national specialty group exist;
 - Ensure that you are aware of the group structures (chair), meeting formats, regularity.

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- 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.
- 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 rep (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)
- Identify national and local (Health Board/Trust) document approval groups:
 - To approve final drafts
 - To approve adoption across local health board/trust sites
- Review & Research:
 - What forms are currently in use across Wales (if any)
 - Current legislation/NICE guidance
 - Current good practice guidelines
 - Existing reporting / auditing requirements
 - Existing standards in Wales and other home countries
 - All Wales Document template?
 - Is there a national specialty group in place?
- 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:
 - National Speciality Group
 - Technical
 - Information Standards
 - Clinical Leads – secondary, primary, community, therapies etc
 - Project staff
- Once initial draft of the standard has been agreed within the working group, share draft with local specialists, national groups and Heads of Information; agree how long you will allow for feedback (suggested 2 weeks)
- Working group to then review all feedback received.
- 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.
- 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.

6.2 Governance

Once a final document has been agreed you will need to ensure it goes through the correct governance process for final sign off.

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).

Issue the new national paper document.

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):

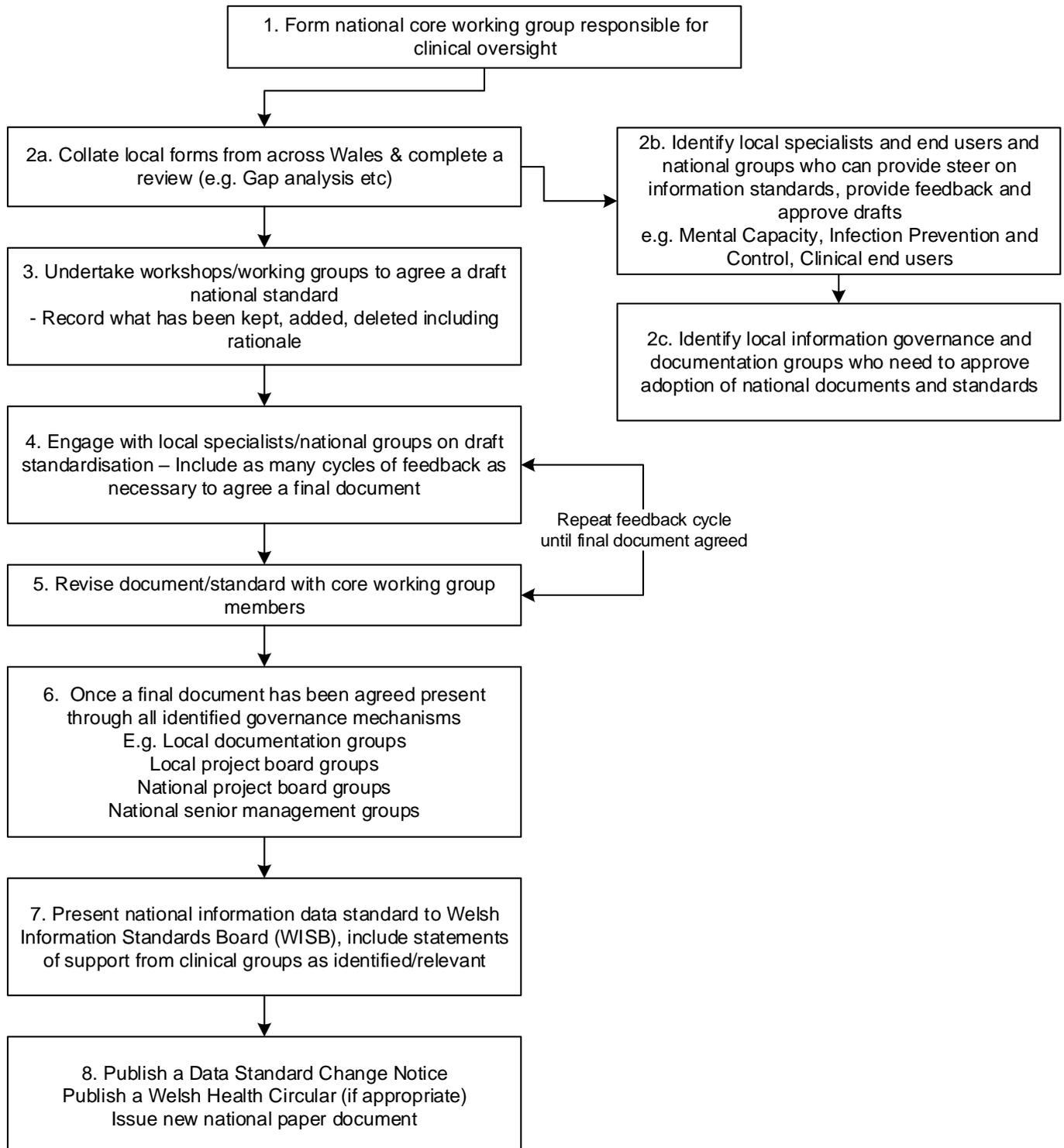
- Impact of changes to existing processes
- Printing implications (any associated costs)
- Training implications (clinical, paper, digital)

It is the responsibility of the 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

Forming a Clinical Group



8 APPENDIX

All Wales Document Template



AllWales
DocumentTemplate.d

All Wales Document Adoption Template



TEM-Document
Adoption.docx