

Reference Number: UHB 116 Version Number: 2	Date of Next Review: 27 Mar 2018 Previous Trust/LHB Reference Number N/A
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Service Evaluation Guidelines

INTRODUCTION

The Health Research Authority (HRA) has published an online tool which helps to confirm whether proposed projects are research, clinical audit, service evaluation or public health surveillance in their orientation www.hra-decisiontools.org.uk/research. The guidance has been particularly useful in differentiating research proposals which are aligned to robust Research and Development (R&D) processes and serve to ensure that the proposed activity is robustly reviewed, monitored and evaluated. Similarly, clinical audit is robustly defined and managed. The processes supporting service evaluation are not as robust and this guidance seeks to redress this imbalance.

The arrangement for project submission and clarification as to whether it meets service evaluation criteria is highlighted in this guidance document. In addition, the guidance provides a framework for the identification, conduct, management and reporting of service evaluation projects.

AIMS

The guidance aims to provide a uniform assessment process for **all** projects, to determine whether the project is research, clinical audit, service evaluation or public health surveillance. In the acknowledgement that the outputs of research projects are robustly determined and monitored, this guidance serves to develop a mechanism to capture the outputs of service evaluation activity only.

OBJECTIVES

- 2.1** Ensure that the planning, implementation and completion of projects is of a high standard and is in line with the objectives of the Cardiff and Vale University Health Board (UHB)
- 2.2** Ensure that there is a consistent approach to undertaking service evaluation projects within the UHB.
- 2.3** Assist staff with identifying service evaluation topics and ensure that they are in line with UHB objectives.
- 2.4** Ensure that there is an audit trail providing evidence of project completion and that individual investigators are aware of their responsibilities in acting upon the results.
- 2.5** Ensure that the interests of the participants and patients, where appropriate, are protected.

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2.5 Protect the confidentiality of records that could identify subjects, respecting privacy and confidentiality rules in accordance with the applicable regulatory requirement(s).

SCOPE

The guidance applies to all Cardiff and Vale UHB employed staff seeking to undertake an evaluation project that is designed and conducted solely to define or judge current care. It is also applicable to all staff from external organisations who wish to undertake an evaluation project within Cardiff and Vale UHB

The guidance also applies to a group of independent contractors should they be evaluating a service across a neighbourhood or locality structure.

Service evaluation is distinctive from Clinical Audit in that it measures the current service without reference to a standard

In addition, external bodies wishing to undertake service evaluation projects require senior local sponsorship at Clinical Board or Directorate/Locality level.

Equality and Health Impact Assessment	An Equality and Health Impact Assessment (EHIA) has been completed this found there to be no direct impact. The guidance will support a positive impact through robust service evaluations.
Documents to read alongside this Procedure	UHB 099 Research Governance Policy
Approved by	Committee/ Group

Accountable Executive or Clinical Board Director	Medical Director
Author(s)	Kate Craig Joy Whitlock
<u>Disclaimer</u> If the review date of this document has passed please ensure that the version you are using is the most up to date either by contacting the document author or the Governance Directorate.	

Summary of reviews/amendments			
Version Number	Date of Review Approved	Date Published	Summary of Amendments

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1	14/06/12	27/06/12	Not applicable – the policy does not supersede any documents of the predecessor organisations.
2	27/03/18	28/03/18	Update process for sign off; Change of name of National Research Ethics Service (NRES) to Health Research Authority (HRA);

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PROJECT DEFINITION

The HRA has developed helpful guidance to determine whether a project is research, audit, service evaluation or public health surveillance. A decision tool that provides a definitive answer about whether a project counts as research under the policy framework is available at www.hra-decisiontools.org.uk/research. Those planning to undertake projects are advised to undertake this review as soon as possible in the process.

Service evaluation is typically designed and conducted solely to define or judge current care or service delivery.

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REGISTERING PROJECTS

Once projects have been defined as service evaluation by the researcher (with help from the Clinical Board/Directorate if required), the Service Evaluation Project Registration Form (Appendix 1) should be completed and go for approval as outlined below

- Evaluations with one Directorate or Clinical Board should seek approval from the relevant Directorate/Clinical Board
- Projects covering more than one Directorate/Clinical Board should be assessed for the most appropriate sign off by both the Clinical Boards/Directorates.
- Surveillance projects involving Public Health should seek approval from the UHB Public Health Lead;
- Projects involving nurses or nursing only across the UHB should liaise with Corporate Nursing to obtain appropriate approval. .

Liaison and approval is needed to ensure that:

- The project is aligned to the objectives of the UHB;
- The design is robust and of a high standard;
- Service users are appropriately aware;
- The project is registered and outputs monitored by the relevant; department Director of Public Health and the Clinical Directorate
- Appropriate governance arrangements are in place.
- External applications that do not have local sponsorship are advised to discuss and submit the completed Project Registration Form for sign off either by the Clinical Board Director / Nurse / Head of Operational Delivery / Director of Workforce and OD within the Board in which the evaluation will take place As with internal evaluations, projects which cross Clinical Boards should be reviewed in the first instance for advice on the most appropriate signatories.

PROJECT GOVERNANCE AND REPORTING ARRANGEMENTS

A project's governance arrangements depend on how the project is defined, (i.e. as research, or as some other type of investigative project).

Governance for research is highly regulated, independent and rigorous

Governance of other projects

Evaluation and assessment of need are aspects of good clinical practice and all staff have a remit to be involved in these at a level which is commensurate with their position in the organisation. Governance of these projects can be undertaken using the usual systems for clinical supervision and clinical audit and clinical governance.

Important governance issues which are the responsibility of the organisation and the team or individual who is conducting the project, include:

- Quality of the project;
- Avoiding duplication;
- Involving all the stakeholders and getting permission
- Reporting and acting on the results;
- Protecting the interests of participants;
- Managing untoward incidents;
- Considering sources of funding and any potential conflicts of interest.

RESPONSIBILITY FOR PROJECT GOVERNANCE

Responsibility is twofold:

The team (or individual) carrying out the investigative project can legitimately initiate and carry out such work if the project falls within their remit and level of competence. The normal arrangements for clinical/management supervision and standards of good practice should be sufficient to safeguard the project and its participants. The team should communicate fully with everyone who is likely to be affected by the project. It should also consult with the patient safety team as appropriate.

The organisation has a responsibility to prevent duplication, prioritise projects and maximise the impact of the findings. The relevant Executive Director should be aware of all investigative projects and should give formal approval where needed e.g. in larger scale projects which do not constitute research, but which may impact on other departments or involve an element of risk.

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RECORDING ARRANGEMENTS

A record of all SERVICE EVALUATION projects will be kept at Directorate/Clinical Board level. For projects that cross Directorate /Clinical Board boundaries the most appropriate registration point as well as any monitoring and reporting arrangements will be determined at the point of the project's registration and the applicant will be informed accordingly.

Project applicants should confirm to the Directorate/Clinical Board how they intend to use and report their findings e.g.

- For training purposes;
- Inform a reconfiguration of the service in the future;
- Develop a protocol/guideline;
- Patient information materials;
- Confirm compliance.

A copy of the findings of the project must be appropriately disseminated both internally and externally where appropriate.

ROLES AND RESPONSIBILITIES

UHB Board

The Board has ultimate responsibility for ensuring that effective arrangements are in place to ensure that service evaluation projects conform with and are conducted in a manner which meets the criteria set out in this document.

Clinical Board/Directorate Teams and Project Supervisors

Clinical Board and Directorate Teams/Line Manager and Project Supervisors in the case of post graduate studies (MSc; BSc; and MBAs for example) have overall responsibility for ensuring that the project conforms to the service evaluation guidance set out in this document.

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RESOURCES

This guidance largely reflects existing practice and therefore no additional resources are required.

TRAINING

It is not envisaged that any formal training will be required as a result of the development of this guidance.

FURTHER INFORMATION

HRA website:

<https://www.hra.nhs.uk/approvals-amendments/what-approvals-do-i-need/>

IMPLEMENTATION

This guidance reflects existing practice and therefore can be implemented immediately.

AUDIT

Each Clinical Board /Directorate where projects are registered have a responsibility to conduct regular audits on service evaluation submissions, approvals and outcomes

DISTRIBUTION

The guidance will be available via the UHB Clinical Portal, Intranet and Internet Sites. Where staff do not have access to these resources the line manager must ensure that they are aware of the contents where appropriate.

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REVIEW

The guidance will be reviewed to reflect any changes in guidance or legislation. As a minimum it will be reviewed 3 years after the date of approval.

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APPENDIX 1: Service Evaluation Project Registration Form

1.0 Title of project

2.0 Aim of project (the main reason for undertaking the project):

3.0 Objectives: Please detail the objectives in terms which will allow for later evaluation

4.0 Proposed Start Date

dd – mm - yyyy

Anticipated End Date

dd – mm - yyyy

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5.0 Personnel Information

Name of Project Leader

Job title

email: phone

Directorate/Clinical Board

Other Staff involved in the project

Name/Designation	Email / phone number

6.0 Methodology: *Describe briefly the project design e.g. population, method of selecting participants, data collection and analysis methodology.*

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7.0 Service User involvement: *Describe briefly service user/stakeholder involvement in the project*

8.0 Please identify other services which might be affected by this piece of work (eg other departments in the UHB, other professional groups)

9.0 Expected outcome

Training	<input type="checkbox"/>	Restructuring of service	<input type="checkbox"/>	Protocol/Guideline	<input type="checkbox"/>	Patient Information	<input type="checkbox"/>
NICE guideline compliance	<input type="checkbox"/>	Other Please specify	<hr/>				

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10.0 Action Plan

Please list the people who will be involved in the development and implementation of the Action Plan

11.0 Dissemination of the project report

Please state how it is proposed to disseminate the results of the work

Publication/Peer Review Journal	<input type="checkbox"/>	Directorate meeting Locality meeting	<input type="checkbox"/>	Clinical Board Meeting LSB Meeting	<input type="checkbox"/>	Audit / Quality Safety & Experience? meeting
Electronically via email/intranet	<input type="checkbox"/>	Other Please specify	<hr/>			

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12.0 Statement by Project leader

I agree to carry out the project as set out in this plan

I confirm that I have read the Data Protection guidance issued by the UHB and agree to ensure that all data for this project will be collected, collated and stored in accordance with the principles outlined in this guidance.

Signature _____

Name
(PRINT) _____

Date _____

13.0 Statement of Support

I....., Clinical Director / Lead Nurse / Directorate Manager or Clinical Board level equivalent. **for**
..... **support this application.**

Signature _____

Name
(PRINT) _____

Date _____

I....., Clinical Director / Lead Nurse / Directorate Manager or Clinical Board level equivalent. **Director/supervisor for**
..... **support this application.**

Signature _____

Name
(PRINT) _____

Date _____

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Equality & Health Impact Assessment for Service Evaluations Guidance

Please answer all questions:-

1.	For service change, provide the title of the Project Outline Document or Business Case and Reference Number	N/A
2.	Name of Clinical Board / Corporate Directorate and title of lead member of staff, including contact details	Service Improvement Deoartment and Medical Directors Office Joy Whitlock email Joy.Whitlock@wales.nhs.uk Extension UHW 45099 Kate Craig email Kate Craig@wales.nhs.uk Extension UHW 48295
3.	Objectives of strategy/ policy/ plan/ procedure/ service	The arrangement for project submission and clarification as to whether it meets service evaluation criteria is highlighted in this guidance document. In addition, the guidance provides a framework for the identification, conduct, management and reporting of service evaluation projects.
4.	Evidence and background information considered. For example <ul style="list-style-type: none">• population data• staff and service users data, as applicable• needs assessment• engagement and involvement findings• research• good practice guidelines• participant knowledge	Health Research Authority guidance https://www.hra.nhs.uk/planning-and-improving-research/policies-standards-legislation/uk-policy-framework-health-social-care-research/

	<ul style="list-style-type: none"> list of stakeholders and how stakeholders have engaged in the development stages comments from those involved in the designing and development stages <p>Population pyramids are available from Public Health Wales Observatory¹ and the UHB's 'Shaping Our Future Wellbeing' Strategy provides an overview of health need².</p>	
5.	Who will be affected by the strategy/ policy/ plan/ procedure/ service	Healthcare professionals wishing to undertake a service evaluation project and the leadership/management of the associated target area for evaluation (Directorate / Locality teams)

6. EQIA / How will the strategy, policy, plan, procedure and/or service impact on people?

Questions in this section relate to the impact on people on the basis of their 'protected characteristics'. Specific alignment with the 7 goals of the Well-being of Future Generations (Wales) Act 2015 is included against the relevant sections.

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate. Make reference to where the mitigation is included in the document, as appropriate

¹ <http://nww2.nphs.wales.nhs.uk:8080/PubHObservatoryProjDocs.nsf>

² <http://www.cardiffandvaleuhb.wales.nhs.uk/the-challenges-we-face>

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate. Make reference to where the mitigation is included in the document, as appropriate
<p>6.1 Age For most purposes, the main categories are: <ul style="list-style-type: none"> • under 18; • between 18 and 65; and • over 65 </p>	No impact	None	None
<p>6.2 Persons with a disability as defined in the Equality Act 2010 Those with physical impairments, learning disability, sensory loss or impairment, mental health conditions, long-term medical conditions such as diabetes</p>	No impact	None	None
<p>6.3 People of different genders: Consider men, women, people undergoing gender reassignment</p> <p>NB Gender-reassignment is anyone who proposes to, starts, is going through or who has completed a process to change his or her gender with or without going through any medical procedures. Sometimes</p>	No impact	None	None

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate.
referred to as Trans or Transgender			Make reference to where the mitigation is included in the document, as appropriate
6.4 People who are married or who have a civil partner.	No impact	None	None
6.5 Women who are expecting a baby, who are on a break from work after having a baby, or who are breastfeeding. They are protected for 26 weeks after having a baby whether or not they are on maternity leave.	No impact	None	None
6.6 People of a different race, nationality, colour, culture or ethnic origin including non-English speakers, gypsies/travellers, migrant workers	No impact	None	None

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate. Make reference to where the mitigation is included in the document, as appropriate
6.7 People with a religion or belief or with no religion or belief. The term 'religion' includes a religious or philosophical belief	No impact	None	None
6.8 People who are attracted to other people of: <ul style="list-style-type: none"> • the opposite sex (heterosexual); • the same sex (lesbian or gay); • both sexes (bisexual) 	No impact	None	None
6.9 People who communicate using the Welsh language in terms of correspondence, information leaflets, or service plans and design Well-being Goal – A Wales of vibrant culture and thriving Welsh language	No impact	None	None
6.10 People according to their income related group: Consider people on low income, economically inactive,	No impact	None	None

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate.
unemployed/workless, people who are unable to work due to ill-health			Make reference to where the mitigation is included in the document, as appropriate
6.11 People according to where they live: Consider people living in areas known to exhibit poor economic and/or health indicators, people unable to access services and facilities	No impact	None	None
6.12 Consider any other groups and risk factors relevant to this strategy, policy, plan, procedure and/or service	No impact	None	None

7. HIA / How will the strategy, policy, plan, procedure and/or service impact on the health and well-being of our population and help address inequalities in health?

Questions in this section relate to the impact on the overall health of individual people and on the impact on our population. Specific alignment with the 7 goals of the Well-being of Future Generations (Wales) Act 2015 is included against the relevant sections.

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts and any particular groups affected	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate Make reference to where the mitigation is included in the document, as appropriate
7.1 People being able to access the service offered: Consider access for those living in areas of deprivation and/or those experiencing health inequalities Well-being Goal - A more equal Wales	No impact	None	None
7.2 People being able to improve /maintain healthy lifestyles: Consider the impact on healthy lifestyles, including healthy eating, being active, no smoking /smoking cessation, reducing the harm caused by alcohol and /or non-prescribed drugs plus access to services that support disease prevention (eg immunisation and vaccination, falls prevention). Also consider impact on access to supportive services including smoking cessation services, weight	No impact	None	None

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts and any particular groups affected	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate Make reference to where the mitigation is included in the document, as appropriate
management services etc Well-being Goal – A healthier Wales			
7.3 People in terms of their income and employment status: Consider the impact on the availability and accessibility of work, paid/ unpaid employment, wage levels, job security, working conditions Well-being Goal – A prosperous Wales	No impact	None	None
7.4 People in terms of their use of the physical environment: Consider the impact on the availability and accessibility of transport, healthy food, leisure activities, green spaces; of the design of the built environment on the physical and mental health of patients, staff and	No impact	None	None

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts and any particular groups affected	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate Make reference to where the mitigation is included in the document, as appropriate
<p>visitors; on air quality, exposure to pollutants; safety of neighbourhoods, exposure to crime; road safety and preventing injuries/accidents; quality and safety of play areas and open spaces</p> <p>Well-being Goal – A resilient Wales</p>			
<p>7.5 People in terms of social and community influences on their health: Consider the impact on family organisation and roles; social support and social networks; neighbourliness and sense of belonging; social isolation; peer pressure; community identity; cultural and spiritual ethos</p> <p>Well-being Goal – A Wales of cohesive communities</p>	No impact	None	None

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts and any particular groups affected	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate Make reference to where the mitigation is included in the document, as appropriate
<p>7.6 People in terms of macro-economic, environmental and sustainability factors: Consider the impact of government policies; gross domestic product; economic development; biological diversity; climate</p> <p>Well-being Goal – A globally responsible Wales</p>	No impact	None	None

Please answer question 8.1 following the completion of the EHIA and complete the action plan

8.1 Please summarise the potential positive and/or negative impacts of the strategy, policy, plan or service	This guidance will not directly impact on equalities and health. It will serve to support and improve inequalities and health through robust service evaluations.
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Action Plan for Mitigation / Improvement and Implementation

	Action	Lead	Timescale	Action taken by Clinical Board / Corporate Directorate
8.2 What are the key actions identified as a result of completing the EHIA?	None			
8.3 Is a more comprehensive Equalities Impact Assessment or Health Impact Assessment required? This means thinking about relevance and proportionality to the Equality Act and asking: is the impact significant enough that a more formal and full consultation is required?	No			

	Action	Lead	Timescale	Action taken by Clinical Board / Corporate Directorate
<p>8.4 What are the next steps?</p> <p>Some suggestions:-</p> <ul style="list-style-type: none"> • Decide whether the strategy, policy, plan, procedure and/or service proposal: <ul style="list-style-type: none"> ◦ continues unchanged as there are no significant negative impacts ◦ adjusts to account for the negative impacts ◦ continues despite potential for adverse impact or missed opportunities to advance equality (set out the justifications for doing so) ◦ stops. • Have your strategy, policy, plan, procedure and/or service proposal approved • Publish your report of this impact assessment • Monitor and review 	Continue with these revised guidelines.			