

 National Early Inflammatory Arthritis Audit

UPCARE: Programme name - please do not change this field.*	National Early Inflammatory Arthritis Audit
Workstream name (if applicable) - please do not change this field.*	Not applicable
Contract status	Ongoing
Audit or non-audit	Audit
HQIP commissioned*	Yes
HQIP AD	RS
HQIP PM	NP
1.0 Included in current NHS Quality Accounts*	Yes
1.1a Geographical coverage - HQIP agreement*	England; Wales
1.2a Topic - please select which ONE of the following best describes the topic area for the programme or workstream. If more than one apply, please select 'Other' and add comment to the next question.*	Musculoskeletal
1.3a Healthcare setting*	NHS secondary or tertiary care
1.4 Inclusion and exclusion criteria*	Patients aged 16 and over referred with confirmed early inflammatory arthritis EIA (Rheumatoid arthritis, Psoriatic arthritis, Axial spondyloarthritis, Undifferentiated inflammatory arthritis) and patients with confirmed diagnosis of CTD and Systemic Vasculitis are eligible for recruitment.
1.5 Methods of data submission*	Bespoke data submission by healthcare provider; Extraction from existing data source(s)
1.6a 2023/24 data submission closes - please indicate date, series of dates or frequency.*	2023/24 data submission closes 15th April 2024
1.6b 2024/25 data submission closes - please indicate date, series of dates or frequency.*	2024/25 data submission closes 15th April 2025
1.7 Data flow diagram	https://arthritisaudit.org.uk/filesuploaded/data%20flow%20diagram%20neiaa%20april%202021.pdf
1.8 Data quality & analysis plan	The original dataset was piloted by 10 clinical sites to inform and help refine the dataset. Data validation processes are embedded into the electronic data entry platform.

Data cleaning is undertaken by the KCL analytics partners and data quality reports are included in the quarterly reporting process.

All statistical models are validated and statistical codes used for data cleaning and analysis are retained for quality assurance and audit.

Case mix adjustment will be performed for annual reporting only, and will use established methodological principles.

1.9 Outlier policy	Microsoft Word - detection and management of outliers September 2021.docx (arthritisaudit.org.uk)
2.4 Patient reported outcome measures	Patient reported outcome measures (PROMs) are collected at baseline and at 3, 6, 9, and 12 month intervals thereafter.
2.6a Do measures align with any of the following sources of evidence (select all that apply)	NICE quality standard
2.6b Evidence supplemental information	https://www.nice.org.uk/guidance/qs33
3.1 Results visualisation	Annual report; Interactive online portal (run charts available)
3.2a Levels of reporting*	Trust or health board; Hospital or specialist unit; National; Integrated care system (ICS); NHS region or other geographic area
3.3 Timeliness of results feedback	Within 24 hours; Within 6 months
3.4 Link to dynamic reporting*	https://arthritisaudit.org.uk/pages/home
2023/24 Dataset covers the period FROM/TO (within financial year 01/04 to 31/03)*	04/01/2023 - 03/31/2024
2024/25 Dataset covers the period FROM/TO (within financial year 01/04 to 31/03)*	04/01/2024 - 03/31/2025
Dataset #1 name	Clinical Dataset
Dataset #1 type*	Clinical audit
Dataset #1 population coverage*	All eligible patients
Dataset #1 use of existing national datasets	Office for National Statistics (ONS); Hospital episode statistics (HES)
Dataset #2 name	Patient Survey
Dataset #2 type*	Patient reported outcome measure

Dataset #2 population coverage*	All eligible patients
Dataset #3 name	Organisational Survey Dataset
Dataset #3 type*	Organisational audit
When was your Healthcare Improvement Plan (sometimes referred to as a Quality Improvement Plan) last reviewed? Please upload under 'Files' below using naming convention ('yyyymmdd_PROGRAMME-Workstream-HIplan').	10/12/2023 8:00 AM - 9:00 AM
National report publication date (within calendar year 01/01 - 31/12/2023)*	12th October 2023
Published/planned national report publication date (within calendar year 01/01 - 31/12/2024)*	10th October 2024
Planned national report publication date (within calendar year 01/01 - 31/12/2025)*	October 2025
Please add the most recent date that you have reviewed and updated an online version of UPCARE Workstream section(s) on your project's website (click into the response to see pop-up guidance).	12/15/2023
Please add a hyperlink to UPCARE Workstream section(s) on your website (click into the response to see pop-up guidance).*	https://iaa-uat.netsolving.com/pages/resources
Files	20231012 - NEIAA - HIPlan.pdf NEIAA Audit Metrics Year 6 .xlsx

