

Criteria

A criterion is a specific statement describing the area of care being measured. They must be:

- **Specific** – unambiguous, relating to a clear area of care.
- **Measurable** – capable of being assessed.
- **Achievable** – realistic within available resources.
- **Relevant** – linked to the standard and supporting recommendations.
- **Timely** – reflecting current practice.
- **Informed/Evidence-based** – supported by reliable evidence.
- **Effective** – useful in providing meaningful results.
- **Simple** – straightforward to apply.

Hierarchy of Evidence


When developing criteria, use the most reliable evidence available.


The hierarchy of evidence ranks reliability from strongest to weakest:

1. Systematic reviews
2. Randomised controlled trials
3. Non-randomised trials
4. Non-experimental studies
5. Expert opinion (e.g. British Committee for Standards in Haematology)
6. Randomised controlled trials

Contact Us

For advice or support on any aspect of clinical audit at NHSBT, contact the Clinical Audit Team:

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 <https://nhsbloodandtransplant.sharepoint.com/sites/Clinical/SitePages/Clinical%20Audit.aspx>

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How to Set and Develop Clinical Audit Standards and Criteria

Clinical audit is standards-based (also called criteria-based). Standards are explicit, measurable statements describing the quality of care expected. This leaflet explains how to define standards and criteria for a clinical audit.



Standards

A standard can be defined as:

“An explicit statement describing the quality of care to be achieved, which is definable and measurable.”

Standards describe the expected level of care patients or donors should receive.

Examples:

All patients accepted on a liver transplantation waiting list should meet an indication for transplantation as stated in the relevant guideline.

To be eligible to donate bone, donors must not have had a blood transfusion since 1980.

What Can Be Measured?

Donabedian’s Quality Model classifies healthcare measures into three areas:

Structure

Definition:

Resources required (staff, skills, space, equipment)

Example:

Venue suitability, staff training, skill mix

Process

Definition:

Actions/decisions taken by practitioners

Example:

Donor Safety Checks, donor selection, documentation

Outcome

Definition:

Results of care or interventions

Example:

Successful donations, appropriate deferrals, adverse events

Levels of Performance

For each criterion, a target or performance level must be set.

Examples:

- All donors must have a Donor Safety Check prior to donation (100% compliance expected).
- Addressograph labels must not be used on transfusion samples (0% compliance expected).

Who Should Write Standards and Criteria?

Health professionals are responsible for developing standards and criteria, with support from the Clinical Audit Team. Standards may already exist from a variety of sources:

- **National standards/guidelines**
NICE, Department of Health, British Committee for Standards in Haematology, Red Book.
 - **Organisational standards**
NHSBT policies
 - **Professional standards**
Royal Colleges, NMC, GMC, etc.
- If no standards exist, they should be developed in consultation with the clinical team or an expert panel.