

National Paediatric Diabetes Audit (NPDA) Dataset and Methodology Working Group - Terms of Reference

Last updated: November 2025

1. Background

The purpose of the National Paediatric Diabetes Audit (NPDA) is to examine the quality of care received by children and young people with diabetes in England and Wales. The audit reports on whether units are providing a high standard of care in accordance with national guidelines for diabetes treatment, and provides recommendations for health professionals quality improvement.

The NPDA is commissioned by the Healthcare Quality Improvement Partnership (HQIP) as part of the National Clinical Audit and Patient Outcomes Programme (NCAPOP). The NPDA is currently commissioned until 2025.

The NPDA has been managed by the Royal College of Paediatrics and Child Health (RCPCH) since 2011. Under the first contract, a dataset task and finish group was established to re-develop the NPDA dataset in time for the 2017/18 data collection. A new contract to deliver the NPDA was awarded in 2017, which expanded the remit of the NPDA to include 'spotlight audits' of additional areas of practice or outcomes not covered by the core audit.

Members of the dataset task and finish group were therefore invited to be part of a new dataset and methodology group (DMG) to respond to the continuing need for dataset and methodology advice under the new contract, and membership was widened to ensure representation of all disciplines involved in providing paediatric diabetes care or submission of data to the audit.

2. Aims and Objectives

The purpose of the DMG is to ensure that the audit programme accurately and effectively measures and reports on annual data submitted by Paediatric Diabetes Units (PDUs), and that such data is disseminated and made available to all relevant audiences.

The remit should include:

- To ensure that core NPDA dataset items and reporting link directly to current NICE guidance relevant to paediatric diabetes care.
- To ensure that the data items and their methods of collection and submission are achievable and appropriate to the Paediatric Diabetes Unit setting.

- To ensure that topics selected for spotlight audit reflect priority areas for quality improvement.
- To ensure the analysis plans for collected datasets are appropriate and that reporting enables scrutiny of results in line with clinic, regional, CCG and national interest.
- To ensure appropriate outlier identification and reporting.

3. Membership

Membership of the DMG is based on expertise, knowledge and potential contribution in the development of the NPDA.

Membership consists of the following:

- Chair
- RCPCH Head of Audits
- NPDA Clinical Lead
- NPDA Project Manager
- NPDA Project Coordinator
- NPDA Project Administrator
- NPDA Data Analyst
- RCPCH Audits Senior Data Analyst x 2
- Senior clinical practitioners (consultant endocrinologists or diabetologists or senior specialist nurses) x 4
- Paediatric diabetes specialist nurse
- Clinical psychologist
- Dietitian
- Medical trainee
- Welsh CYP Diabetes Network representative x 2

The DMG may agree new members to invite onto the working group.

Term of membership: 2 year term limit for medical trainees, with an option for up to a 2 year extension. Retired members are eligible to remain on the group for up to 3 years following clinical retirement, or longer if still involved in research or quality improvement activity at the discretion of the Chair and NPDA Project Manager.

No remuneration is offered in association with the DMG membership. Members may request reimbursement for reasonable travel expenses (normally standard class travel) for scheduled DMG meetings through the RCPCH claim for reimbursement form. The RCPCH expects early booking for travel and accommodation so as to take advantage of any significant discounts.

4. Chair's responsibilities

The Chair will serve a term of office equal to the length of the contract to deliver the NPDA held by the RCPCH. Nominees for the Chair may be among the serving members of the Committee.

- Chair DMG meetings, nominating another clinical member to deputise in case of absence.

- Recruit the DMG members, with support from the College and project management team.

5. Member responsibilities

DMG members are requested to attend all meetings as their schedule permits, and to send apologies to the project administrator if they are unable to attend a meeting. Members are expected to attend and contribute to two thirds of meetings each year in person or via teleconference.

Members are expected to:

- Prepare for, attend and participate in dataset and methodology group meetings
- Provide expertise and advice on the project
- Consider issues relating to the dataset, reports or methodology raised by stakeholders and others
- Advise on communications planning and assist with promotion and communication of the audit's activities to key stakeholders, using own clinical networks where appropriate
- Other responsibilities as agreed by the Project Board and Dataset and Methodology Group
- To declare all conflicts of interest related to the project.

6. Frequency of meetings

DMG meetings will take place quarterly in either hybrid or virtual format. It may be necessary to have additional face-to-face meetings or teleconferences on an ad hoc basis. Members will be given advance notice of any likely additional meetings.

7. Authority and Reporting

The DMG will report to the NPDA Project Board. The NPDA Project Board will report to the college via the Audits Team. The RCPCH Audits team will report to the RCPCH Executive Committee, the College's governing body.

8. Decision making and Quorum

The DMG will aim to achieve consensus amongst members on decisions taken on the agenda items and the Chair will clarify the decision(s) for the minute taker. Where consensus cannot be reached, the Chair may ask members to vote on an issue when the number present (including those attending virtually) meets the agreed Quorum.

Quorum for a meeting shall be not less than half of the group members. Those attending virtually are considered part of the quorum.

9. Administration

All administration will be carried out by the NPDA Project Team within the RCPCH Audits Team.

Agenda

All agenda items should be submitted for approval to the Chair before the meeting.

Standard order of business shall be;

1. approve the draft minutes as a correct record
2. agenda items
3. other business as agreed by the Chair;
4. Date of the next meeting.

Working group papers

All papers are confidential, unless otherwise stated.

Papers should be submitted to the NPDA team in the correct format five working days before the meeting. The NPDA team will ensure papers are correctly numbered and formatted prior to issue. Papers will be distributed by the NPDA team in an electronic format no later than five calendar days before each meeting; hard copies by request only.

Minutes

Minutes will be prepared by the RCPCH clinical standards team for approval by the Chair of the project board within ten calendar days and circulated to working group within fourteen calendar days of the meeting.

The minutes shall record Members present, brief discussion of business items where it is appropriate to do so and all actions arising from the discussions by Committee.

1. Confidentiality

Group members should not disclose, extract, re-utilise or reproduce information obtained from the guideline update or the RCPCH for any purpose than set out without permission.

Appendix A – Dataset and Methodology Group Membership

Last updated September 2024.

Role	Responsibility	Name
Chair of the NPDA Methodology and Dataset Group	Chair	Dr Fiona Campbell, Consultant in Paediatric Endocrinology and Diabetes, Leeds Teaching Hospitals NHS Trust
NPDA Clinical Lead	Clinical input and leadership	Professor Justin Warner
NPDA Project Manager	Day to day management of the project in line with agreed deliverables	Amani Krayem, RCPCH
NPDA Project Coordinator	Day to day coordination of the project in line with agreed deliverables	Richard Shepherd, RCPCH
NPDA Project Data Analyst	Day to day data analysis of the project in line with agreed deliverables	Zhaonan Fang, RCPCH
RCPCH Audits Team Administrator	Day to day administration of the project in line with agreed deliverables	Tom Keiller, RCPCH
RCPCH Head of Audits	Senior project guidance and oversight	Calvin Down, RCPCH
RCPCH Audits Senior Analyst	Senior data analysis guidance	Saira Pons-Perez, RCPCH
RCPCH Audits Senior Analyst	Senior data analysis guidance	Humfrey Legge, RCPCH
Senior clinical practitioners (consultant endocrinologists or diabetologists or senior specialist nurses)	To provide input and guidance to the audit, representing senior clinical practitioners working within paediatric diabetes units	Dr Dita Aswani, Consultant Paediatrician specialising in Diabetes and Weight Management, Sheffield Children’s NHS Foundation Trust and NHSE CYP Diabetes Programme Dr Evelien Gevers, Consultant Paediatrician in Endocrinology and Diabetes, Barts Health NHS Trust Dr Neil Hopper, Consultant Paediatrician, South Tyneside and Sunderland NHS

		Foundation Trust Dr Mark Deakin, Consultant in Diabetes and General Paediatrics, Alder Hey Children's NHS Foundation Trust
Paediatric diabetes specialist nurse	To provide input and guidance to the audit, representing paediatric diabetes specialist nurses working within paediatric diabetes units	Rachel Harris, Paediatric Diabetes Specialist Nurse, University Hospital of Wales
Dietitian	To provide input and guidance to the audit, representing dietitians working within paediatric diabetes units	Francesca Annan, Clinical Specialist Paediatric and Adolescent Diabetes Dietitian, University College London Hospitals NHS Foundation Trust
Clinical psychologist	To provide input and guidance to the audit, representing clinical psychologists working within paediatric diabetes units	Dr Halina Flannery, Clinical Psychologist, University College London Hospitals NHS Foundation Trust
Medical trainee	To provide input and guidance to the audit, representing paediatric medical trainees working within paediatric diabetes units	Nway Htun Kyi, Paediatric Trainee, Cardiff and Vale University Health Board
Welsh CYP Diabetes Network representative	To provide input and guidance to the audit, representing the organisation that acts as a key central point for clinical communication and collaboration across Wales.	Dr Simon Fountain-Polley, Consultant Paediatrician, Hywel Dda University Health Board Dr Davida Hawkes, Consultant Paediatrician, Aneurin Bevan University Health Board