Monitoring and improving quality through clinical audit

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Clinical Audit for Improvement
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**Who are HQIP?**

**Our vision:** enabling those who commission, deliver and receive healthcare to measure and improve services.

**Our values:** independent, working in partnership with patients and health professionals to improve practice.

**Our history:** established in 2008, governed by the AoMRC, National Voices and RCN.
What is Clinical Audit?

‘Clinical audit is a quality improvement cycle that involves measurement of the effectiveness of healthcare against agreed and proven standards for high quality, and taking action to bring practice in line with these standards so as to improve the quality of care and health outcomes.’

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- An active process of intervention which aims to change practice for the better
Monitoring?

To monitor:

• “To watch or check something over a period of time in order to see how it develops” (Oxford online)

• “To regularly check something or watch someone in order to find out what is happening” (Macmillan)

• A passive process that may or may not involve intervening to bring about change
Successful clinical audit means completing the audit cycle – but audit for ‘monitoring’ allows you to dodge the difficult bits.
The outcome?

To monitor:

• “Our audit findings show that we are 90% compliant with standards”
• In other words, 1 in 10 patients are receiving substandard care

To improve:

• “Our initial audit findings show that we are 90% compliant with standards, and we are implementing an action plan to address the shortfall”
• What do we mean by audit for assurance? What kind of assurance can clinical audit provide?
When is a clinical audit complete?

- When you have collected and analysed the data, presented your findings and made recommendations.
- When you have discussed your recommendations with your colleagues and produced an action plan which has been signed off by a senior clinician.
- When you have implemented an action plan which includes reminding staff of the need to adhere to guidance and updating the local policy.
Steps to completion

• Collect and analyse the data, discuss your findings with the multidisciplinary team

• Understand the fundamental reasons for any shortfalls in the quality of care

• Develop and implement an action plan which addresses the root causes – make it easier to do the right thing and harder to get it wrong

• Monitor the effects of the action plan to check that improvement has actually happened
How can HQIP help?

- The Berwick report: ‘Give the people of the NHS career-long help to learn, master and apply modern methods for quality control, quality improvement and quality planning.’

- We have a range of resources on our website:
  - Guidance and templates
  - Case studies and e-learning
  - News stories and e-bulletins
  - All free to access and download

www.hqip.org.uk
Best practice in clinical audit

• Updated guide to replace ‘Criteria and indicators of best practice in clinical audit’ HQIP, 2009
• Criteria to assess both organisational issues and audit practice
• Extensive links to other guides
• Checklists to facilitate self assessment

<table>
<thead>
<tr>
<th>Clinical audit best practice criteria</th>
<th>Links to further information</th>
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<td>1  Clinical audit is a quality improvement activity and therefore it functions best as part of a planned programme of quality improvement that has been approved by the Board and/or senior management of the organisation.</td>
<td>HQIP, A guide for NHS Boards and partners: <a href="http://www.hqip.org.uk/resources/clinical-audit-a-guide-for-nhs-boards-and-partners/">http://www.hqip.org.uk/resources/clinical-audit-a-guide-for-nhs-boards-and-partners/</a></td>
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Engaging the Board

Recommendation 5:
The Board should institute a programme of improving the arrangements for audit in all clinical departments and make participation in audit processes in accordance with contemporary standards of practice a requirement for all relevant staff. The Board should review audit processes and outcomes on a regular basis.

Guidance for boards

- Clinical audit: a guide for NHS boards and partners
- Commissioned from the Good Governance Institute
- Updating previous guide, developed in consultation with board members and through workshops
- Includes maturity matrix for self assessment

Clinical leads

Clinicians who are asked to ‘lead’ clinical audit in their services, divisions, directorates or specialties to enable the organisation to ensure that clinical audits are being carried out effectively in all clinical services

- KEY to successful clinical audit
- Can come from any clinical profession
- Co-operation and collaboration
- Authority to act
- Volunteer or conscript?
- UPDATED guide available

http://www.hqip.org.uk/resources/guide-for-clinical-audit-leads/
Clinical audit and junior doctors

Junior doctor audits are dismissed and disregarded and a waste of resources.
- Time pressures
- Inadequate training and support
- Lack of co-ordination
- Tick box ‘audits’ which are just data collection exercises
- No benefit to patients

Junior doctor audits can be brilliant.
- Enthusiasm
- Insight and perspectives
- Motivation
- Extra resources to meet the demand for audit
- Benefits both to patients and to the trust
- Updated guidance to come
Policy, strategy, programme

• Every NHS provider needs:
  – A policy on the use and conduct of clinical audit
  – A strategy on the development of clinical audit
  – A clinical audit programme which reflects key national and local drivers for quality improvement

• Updated HQIP guidance soon to be published
Documenting clinical audit . . .

. . . a guide to reporting and recording

- New guide to replace the old clinical audit report template
- Includes an updated template report and action plan
- Also includes guidance on managing data flows
- Documenting each stage in the process
- Making sure the board hears everything it needs to know without burying it in detail
- Monitoring the clinical audit process and ensuring that lessons are learned
- Promoting clinical audit, celebrating success
Clinical audit awareness week

What will you be doing to celebrate and promote clinical audit?

• Building on the success of previous years, runs from:

• Patient First (22-23 Nov, ExCel London) where HQIP is overseeing content for the Quality Improvement Theatre,

• CASC Junior Doctors Clinical Audit/QI Conference & Awards (30 Nov, Leicester), to be chaired by HQIP medical director Danny Keenan
And there’s more . . .

- Statutory and mandatory requirements for clinical audit
- Information governance for local quality improvement
- Ensuring data quality in clinical audits
- An introduction to statistics for local CA & QI
- Using root cause analysis techniques in CA
- A guide to quality improvement methods
- Using clinical audit in commissioning
- Ethical issues in quality improvement
And finally . . .

www.hqip.org.uk

Guidance, resources, e-bulletin, events

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