

Additional Clinical Audit Information

Quality Account 2012-2013



Contents

Section Number	Section Title	Page No
1	Introduction	3
2	Clinical Audit Non-Participation	3
3	National Audit	4
4	Local Audit	5

1 Introduction

This clinical audit supplement has been developed to augment the information provided in the UHCW Quality Account, section 5.2, page 70. It provides additional detail as to the review of and benefits gained through participation in both national and local audits and the rationale for non participation in certain national audits. Participation rates for audits that UHCW participated in during 2012/2013 are detailed in the main Quality Account document.

2 Clinical Audit Non-Participation

The following table details those audits included in the Quality Account list published by the Department of Health in which UHCW did not participate.

Of six national Audits, UHCW is eligible to participate in one - the National Cardiac Arrest Audit. Of the rest, in two we do not provide the relevant service, in one UHCW does not perform the procedure and the other two are not applicable to Acute Trusts

UHCW has established a group dedicated to ensuring we both comply with the continuing data collection requirements for the National Cardiac Arrest Audit and for ensuring we address the recommendations of the NCEPOD report *Time to Intervene*. We plan to register for participation in 2013/14.

Audit title	Rationale for non-participation
National Cardiac Arrest Audit	UHCW is currently putting systems in place to guarantee 100% submission of minimum data set required before registering. It is anticipated that registration to this ongoing audit will take place during 2013/14.
Intra-thoracic transplantation (NHSBT UK Transplant Registry)	Not eligible - procedure not performed
Pulmonary Hypertension Audit	Not eligible - service not provided
Paediatric intensive care (PICANet)	Not eligible - service not provided
National audit of psychological therapies	Not eligible - not applicable to Acute Trusts
Prescribing in mental health services (POMH)	Not eligible - not applicable to Acute Trusts

As detailed in the Quality Account, section 5.2, there were two clinical audits that had a lower than expected participation rate. UHCW has investigated the reasons why this occurred as described below:

Audit title	Participation Rate	Rationale for low participation rate
Pain Database (National Pain Audit)	38%	Participation rate is based on the number of follow-up questionnaires which were returned to Dr Foster by patients. UHCW did not have

Audit title	Participation Rate	Rationale for low participation rate
Diabetes (National Adult Diabetes Audit)	64%	any involvement in this data collection process. Participation at Hospital of St Cross was 100%, facilitated by the use of DIAMOND database. This is not used at University Hospitals although this is being explored for the future to improve participation rate. However the benefit of this will not be seen until 2014/15 due to data lag.

3 National Audit

An audit should be based on standards of good practice/outcomes and produce recommendations on how to improve both. The audit action plan should be a plan for turning recommendations (made following review of the audit results) into practice, therefore realising benefits for both patients and/or staff. The person/group who leads the audit is responsible for ensuring an action plan is developed and implemented in order to move onto the next stage of the audit cycle.

When completing an audit action plan the audit lead is required to identify the benefit that is expected to be realised from implementing the actions proposed. This could be a benefit that is specific to a single action or a benefit that encompasses the entire action plan, but should be measurable in order to determine whether the audit has had the desired impact. When a re-audit is planned clinicians are encouraged to include this measure of benefit, as opposed to simply auditing the same standards as were applied previously.

The reports of 20 national clinical audits were reviewed by UHCW in 2012/2013.

The following are brief summaries of some of the key actions we have taken to improve the quality of healthcare as a result of the review of national clinical audit reports:

Audit title	Key Actions
National Comparative Audit of Blood Transfusion	<ul style="list-style-type: none"> • <i>Blood Conservation Strategy</i> implemented December 2012. • All high users get a wastage and usage newsletter every quarter. Generic Trust newsletter. Dashboard with Quality Metrics established October 2012. These will all work to reduce blood usage and wastage. • Introduction of weekly observations audits and dissemination of the results to Nursing and Midwifery Quality Committee. This has significantly increased compliance with blood transfusion observations. This improves safety for patients undergoing transfusions.
Carotid interventions	<ul style="list-style-type: none"> • A new fast-track outpatient referral process for patients seen in the Transient Ischaemic Attack (TIA) clinic who have a recently symptomatic carotid stenosis requiring urgent (i.e. ideally within two weeks of index event) surgery.

BTS Adult Asthma (British Thoracic Society)	<ul style="list-style-type: none"> Ongoing education sessions for patients regarding their condition.
BTS Non Invasive Ventilation (NIV) Adults	<ul style="list-style-type: none"> Oxygen Cards are being distributed to patients. UHCW <i>Guidelines for NIV</i> have been revised. A UHCW NIV Interest group was re-started which manages and co-ordinates NIV Issues on a Trust-wide basis.
National Diabetes Audit 2010/2011	<ul style="list-style-type: none"> Review of services for younger people with both Type 1 and Type 2 diabetes to better meet their needs.
CEM Managing Feverish Children 2010/11	<ul style="list-style-type: none"> <i>Children's Emergency Department Discharge Policy</i> introduced to ensure no children are discharged from CED without appropriate follow-up advice being given to parents. Increase in number of patients assessed within 20 minutes of arrival: Second triage room identified for use as required and staffing issues addressed.
Audit of Major Complications of Airway management in the UK, 4th national audit project (NAP4)	<ul style="list-style-type: none"> Training of Operating Department Practitioners and Theatre nurses in Laryngeal Mask Anaesthesia. Development of a new system for recording difficult airways on <i>Opera</i>. There are future plan for this information to be copied to the patient's electronic health record and to their GP.

4 Local Audit

The reports from 85 local (not national) clinical audits were reviewed by UHCW in 2012/2013.

The following are brief summaries of some of the key actions we have taken to improve the quality of healthcare as a result of the review of local clinical audit reports:

Audit title	Key Actions
Patient Perceptions of the Endoscopy Service - Re-Audit	<ul style="list-style-type: none"> The causes and anticipated length of delays to treatment are now being communicated to patients. Patient information has been reviewed and updated and now includes any suggestions from patients. The <i>Sedation in Endoscopy</i> guidelines were reviewed and updated.
Patient Perceptions of the Gynae-Oncology Clinical Nurse Specialist Service (2012)	<ul style="list-style-type: none"> Measures have been implemented to ensure Gynae-oncology patients are cared for on the appropriate ward unless there are exceptional circumstances. All patients are offered written pre operative information about services offering psychological/social/ spiritual or cultural support. This is also discussed with the Gynae-Oncology Clinical Nurse Specialist and contact details provided in case further support is required. All patients are offered a permanent record of their

	consultation where diagnosis and treatment options are discussed and written information re their condition and treatment.
An audit of admission and hospital-acquired hypernatraemia (serum sodium ≥ 150 nmol/L) and the effectiveness of treatment in medical and surgical patients	<ul style="list-style-type: none"> • Audit results presented at the Grand Round at University Hospital and St Cross, and at the Association for Clinical Biochemistry conference. • Dr Gosling has prepared a paper on these results in conjunction with Wolverhampton Hospital which is due to be published. This will act as a basis for future education and guidelines.
Audit of Phototherapy	<ul style="list-style-type: none"> • New consent form designed for Photo Dynamic Therapy. • Training session planned to educate staff about treatment protocols.
Audit of the Use of Toctino	<ul style="list-style-type: none"> • Side-effects documentation has been improved. • The number of clinic appointments has been increased to ensure appropriate follow-up arrangements.
NPSA Alert Re-Audit of Consent and Monitoring of Methotrexate Use in Dermatology	<ul style="list-style-type: none"> • New proforma in use for patients starting systemic treatment.
Audit against NCEPOD " Emergency Admissions: A journey in the right direction?"	<ul style="list-style-type: none"> • Introduction of UHCW RESUS Management Chart (Non-Trauma)
Re-Audit of Endoscopic Retrograde Pancreatic Cholangiography (ERCP)	<ul style="list-style-type: none"> • Local sedation guideline introduced. • Developed a register and communicated the need to report and monitor Clinical Adverse Events raised when reversal of sedation is required.
Trust-wide Sepsis Audit	<ul style="list-style-type: none"> • Sepsis Champions have been identified on Wards to provide education. • Sepsis posters have been displayed in clinical areas. • An online training tool on the management of Sepsis for all grades of staff is due to be introduced shortly.

**For further information on Clinical Audit please contact
the Quality and Effectiveness Department
at: Clinicalaudit@uhcw.nhs.uk
or: 02476 968282**

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