

Trust Board Report

Meeting Date:	25 th January 2016
Title:	Clinical Audit Month 9 Position Report
Executive Summary:	This report provides with the clinical audit activity in the Trust for the first 9 months of 2015/16. This information is split by Division and audit type.
Action Requested:	Assurance to the Trust Board
Report of:	Medical Director
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Resource Implications:	
Public or Private: (with reasons if private)	Public Session
References: (eg from/to other committees)	
Appendices/ References/ Background Reading	Appendix 1a: Division 1 Audit Completion Rate Report Appendix 1b: Division 2 Audit Completion Rate Report Appendix 2a: Division 1 Progress Against Plan Appendix 2b: Division 2 Progress Against Plan Appendix 3: Split by Audit Type Report – Trust wide Appendix 4: NCAPOP Participation 2015/16
NHS Constitution: (How it impacts on any decision-making)	In determining this matter, the Board should have regard to the Core principles contained in the Constitution of: <ul style="list-style-type: none"> ✚ Equality of treatment and access to services ✚ High standards of excellence and professionalism ✚ Service user preferences ✚ Cross community working ✚ Best Value ✚ Accountability through local influence and scrutiny

Executive Summary

Audit completion rate at month 9

Trust wide completion rate was 43% against plan (200 out of 467 clinical audits). The expected trust wide completion rate at this point was 57%.

- Division 1: Completion rate: 40%. Expected completion rate at this point in time, based on proposed completion dates, was 58%.
- Division 2: Completion rate: 46%. Expected completion rate at this point in time, based on proposed completion dates, was 56%.

Divisional Activity	Total audits minus abandoned	Total in Progress	Total Pending	Total Audits Completed	Total Completion Rate
Division 1	257	129	25	103	40%
Division 2	210	105	8	97	46%
Total	467	234	33	200	43%

To date 60 audits have been abandoned with agreed rationale, 41 in Division 1 and 19 in Division 2.

Monitoring of Clinical Audit Plans

Clinical audit plans are monitored on a monthly basis via the audit completion rate report at Divisional Governance and the Clinical Audit Group. It is also presented quarterly to Quality Standards Action Group (QSAG). All abandoned audits are reviewed and agreed at the respective Divisional Governance Meetings. Audit completion and progress is also included in the Integrated Governance Reports presented monthly to the Directorates.

Adjusted audit completion rate at month 9

Excluding the 83 National Audits for which the Trust has no influence regarding completion timescales, the adjusted completion rate for the Trust is 44% (169 of 384 clinical audits Trust wide).

Outcome of audits

Completed audits are reviewed to identify outcome and how the audits are improving services. 78% demonstrate either full compliance or minor non-compliance against audit standards. Where audits have identified poor compliance, actions are being undertaken to improve future compliance and will be considered for inclusion on the 2016/17 audit plan. Of the 200 completed audits, 158 have had the outcome rated as follows:

Level of Compliance	Div 1	Div 2	Total No
Fully Compliant	21 (29%)	28 (33%)	49 (31%)
Minor Non-Compliance	35 (48%)	39 (46%)	74 (47%)
Moderate Non-Compliance	11 (15%)	16 (19%)	27 (17%)
Significant Non-Compliance	6 (8%)	2 (2%)	8 (5%)
Total Rated	73	85	158
Not applicable (Service Evaluations)	9	9	18
Not Rated by Audit Convenor to date	21	4	25

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1.0 Introduction

“The Royal Wolverhampton NHS Trust is committed to developing a robust clinical audit programme as part of the process through which the Trust can discharge its duty to ensure the quality of service is of the highest standard and that improvements are continuously implemented”

OP45 Clinical Audit and Effectiveness Policy

Through the delivery of the clinical audit programme/plans the Trust is able to demonstrate a methodical process for continuous monitoring and evaluating the level of care and service provided to patients and service users in order to make sustainable quality improvements.

This report gives the summary of clinical audit activity carried out across the Trust for the first 6 months of the 2015/16 financial year. This information is split by Division.

2.0 Clinical Audit Plans 2015/16 Development

The 2015/16 clinical audit plans were developed by the Audit Convenors in conjunction with the responsible Governance Officer. Directorates were asked to prioritise the audit projects to be undertaken during 2015/16. These plans were then agreed at a local Directorate Governance meeting. Following this, the Healthcare Governance Manager for the Division presented the Directorate approved plans to the Divisional Management Team at a Divisional Governance meeting to seek Divisional approval.

Clinical audit plans included contributions to National Clinical Audit and Patient Outcomes Programme (NCAPOP) and various other National Audits, NICE (National Institute for Health and Care Excellence) guidance, CQUIN and NHS Litigation Authority (NHSLA) audits. Furthermore, locally driven Trust audits were included.

3.0 Monitoring of Clinical Audit Plans

The 2015/16 clinical audit plans are monitored on a monthly basis via the audit completion rate report. Appendix 1 provides a breakdown of the current audit status by Division and Directorate; the overall completion rate shows the percentage of clinical audits which have registered and completed on Clinical Audit Database. Audits are defined as completed once they have been presented at an appropriate forum and a final report and action plan have been developed. Appendix 2 provides details of divisional progress against planned activity by completion per quarter.

This report is included in the Integrated Governance Reports presented monthly to the Directorates by the Governance Officers at their local Directorate Governance meetings. Healthcare Governance Managers also present the audit completion rate report on a monthly basis at the Divisional Governance meetings. Progress, in terms of completion of audit projects and attainment of the clinical audit plans are reported bi-monthly to the Trusts Clinical Audit Group (CAG) and quarterly to Quality Standards Action Group (QSAG). Progress with the National Clinical Audit and Patient Outcomes Programme (NCAPOP) has been monitored on a quarterly basis at the Clinical Quality Review Meeting (CQRM). NCAPOP data has been included as Appendix 4 to this report.

4.0 Summary of Clinical Audit Activity at Month 9 (2015/16)

Clinical Audit activity across the Trust includes contribution to numerous National Clinical Audits, NICE audits, CQUIN audits, NHSLA audits and many locally driven Trust audits. The numbers of clinical audits taking place in year 2015/16 are as follows.

4.1 Clinical Audit Activity

The table below provides an overview of the 467 audits authorised to date for completion during 2015/16.

Divisional Activity	Audits on Original Plan	Additional Audits Authorised in year	Authorised Abandoned Audits	Total Audits
Division 1	224	74	41	257
Division 2	181	48	19	210
Overall Trust	405	122	60	467

4.2 Types of Audits undertaken

The table below demonstrates the different types of audits which have been authorised to date for completion during 2015/16. The 'Other' category includes service evaluations and Trust Wide documentation audits.

Divisional Activity	National	Local	NICE	Other
Division 1	37 (14%)	151 (59%)	46 (18%)	23 (9%)
Division 2	46 (22%)	96 (46%)	42 (20%)	26 (12%)
Overall Trust	83 (18%)	247 (53%)	88 (19%)	49 (10%)

4.3 Completion Rate by Audit Type

There have been 200 audits completed to date. The table below demonstrates the Divisional and Trust completion rate by Audit Type at the end of month 9 2015/16.

Divisional Activity	National	Local	NICE	Other	Totals
Division 1	10	68	21	4	103 (40%)
Division 2	21	50	18	8	97 (46%)
Overall Trust	31	118	39	12	200 (43%)

4.4 National Audit

The Trust is participating in 83 national audits projects during 2015/16 of which 31 (37%) have been completed to date. Due to the complexity and reliance on set national timescales, the majority of these audits are not expected to be completed within the 2015/16 financial year. Any National audits that will not be completed by the end of the financial year will be carried over and included on the 2016/17 audit plans. The on-going national audits will only be classified as completed when the national results have been collated, distributed and Trust actions for improvement have been identified in line with Trust policy.

Divisional Activity	No. of Audits	% of Audits	No. in Progress	% in Progress	No. Completed	% Completed
Division 1	37	14%	27	73%	10	27%
Division 2	46	22%	25	54%	21	46%
Overall Trust	83	18%	52	63%	31	37%

4.5 Adjusted Completion Rate

Due to the complexity and reliance on set timescales for National Audits an adjusted completion rate figure has been provided below. This is a combined total of Local, NICE and Other audit and completely excludes National audit figures.

Divisional Activity	No. of Audits	% of Audits	No. in Progress	% in Progress	No. Completed	% Completed
Division 1	220	86%	127	58%	93	42%
Division 2	164	78%	88	54%	76	46%
Overall Trust	384	82%	215	56%	169	44%

4.6 Progress Against Quarter

The table below details the total number of audits completed within the agreed timeframes as per the Directorates Annual Audit Plan. To date there have been 157 audits (33%) completed early or within their agreed quarter for completion. Please note that of the 267 audits due to be completed in Quarter 4, 52 of these are National Audits.

Divisional Activity	Total Audits Due	Audits completed earlier than proposed	Audits completed within time frame	Audits completed later than proposed	Total Audits Completed
Division 1	257	16	55	32	103
Division 2	210	21	65	11	97
Overall Trust	467	37	120	43	200

4.7 NICE Audits

Presently there are 88 NICE Audits scheduled for completion in 2015/16, of these 39 (44%) have been completed. A number of the NICE audits cover more than one piece of guidance. In 2014/15 71 NICE audits were completed.

Divisional Activity	No. of Audits	% of Audits	No. in Progress	% in Progress	No. Completed	% Completed
Division 1	46	18%	25	54%	21	46%
Division 2	42	20%	24	57%	18	43%
Overall Trust	88	19%	49	56%	39	44%

The table below provides a breakdown of NICE audits by NICE guidance type, scheduled for audit during 2015/16 (excluding abandoned audits).

Guidance Type	No. of Audits Planned	No. Completed To Date	Completion Rate
Clinical Guideline (CG)	42	23	55%
Joint CG/QS	4	2	50%
Cancer Services Guidance (CSGGSTIM)	1	1	100%
Interventional Procedure (IPG)	13	2	15%
Medical Technologies (MTG)	1	1	100%
Public Health (PH)	2		0%
Quality Standard (QS)	9	3	33%
Technical Appraisal (TAG)	16	7	44%
Total	88	39	44%

5.0 Outcomes of Audits Completed

A review of completed audits has been undertaken to identify the outcomes of audits and how these are being used for service improvement in Directorates. Clinical audit Conveners have been asked to confirm the compliance status of the audits undertaken within their Directorates.

The table below provides a breakdown of completed audits by level of compliance; it is evident that 78% of audits undertaken are demonstrating either full compliance or minor non-compliance. It is crucial that where audits have identified poor or non-compliance, actions are taken to address the shortfall to improve future compliance.

Please note that at this time there are 25 audits that do not have a confirmed level of compliance. Some of these audits have only recently been completed and so have not yet have been rated by the Directorates Audit Convenor. The data is still being collected and a complete compliance rate will be presented in the Clinical Audit Annual Report.

Level of Compliance	Div 1	Div 2	Total No
Fully Compliant	21 (29%)	28 (33%)	49 (31%)
Minor Non-Compliance	35 (48%)	39 (46%)	74 (47%)
Moderate Non-Compliance	11 (15%)	16 (19%)	27 (17%)
Significant Non-Compliance	6 (8%)	2 (2%)	8 (5%)
Total Rated	73	85	158
Not applicable (Service Evaluations etc)	9	9	18
Not Rated by Audit Convenor to date	21	4	25

6.0 The National Clinical Audit and Patient Outcomes Programme (NCAPOP)

The NCAPOP is a closely linked set of centrally-funded national clinical audit projects. All projects within NCAPOP are commissioned and managed by Healthcare Quality Improvement Partnership (HQIP), under the guidance of the National Advisory Group on Clinical Audit & Enquiries (NAGCAE), and funded by NHS England. The clinical audits collect data on compliance with evidence based standards, and provide local trusts with benchmarked reports on the compliance and performance. They also measure and report patient outcomes. The projects analyse data supplied by local clinicians centrally and feedback comparative findings to help participants identify necessary improvements for patients.

NCAPOP also includes the Clinical Outcome Review Programmes which now encompass Confidential Enquiries and are designed to help assess the quality of healthcare, and stimulate improvement in safety and effectiveness by systematically enabling clinicians, managers and policy makers to learn from adverse events and other relevant data. The programme aims to complement and contribute to the work of other agencies such as NICE; CQC, the Royal Colleges and academic research studies with the aim of supporting changes that can help improve the quality and safety of healthcare delivery.

During 2015/2016 there are 34 audits identified on the national clinical audit plan, 28 of which are for inclusion on the Quality Accounts. Overall, 26 audit projects have been confirmed as applicable to the Royal Wolverhampton NHS Trust. The Trust is presently participating in 21 of these audits. To date 2 audits have been completed. There are 5 audits the Trust are not participating in with agreed rationale. There are 2 audits where confirmation of applicability is awaited. Please see attached table for details (Appendix 4).

Appendix 1a: Divisional Audit Completion Rate Report - Division 1

Directorate/ Specialty	Audits on original 2015/16 Plan	Additional Audits added in year	Authorised Abandoned Audits	Total audits minus authorised abandoned audits	Type of Audits Been Undertaken				Total Audits Completed	Types Of Audits Completed				Total Audit in Progress	Total Audit in Pending	Total Completion Rate	National Completion Rate	Local Completion Rate	NICE Completion Rate	Other Completion Rate	Combined Local, NICE and OTHER completion rate
					National Audit	Local Audit	NICE Audit	Service Evaluation & Other Audit		National Audit	Local Audit	NICE Audit	Service Evaluation & Other Audit								
Audiology	6	0	0	6	0	3	0	3	2	0	1	0	1	4	0	33%	-	33%	-	33%	33%
Cardiology	13	3	0	16	6	5	4	1	9	4	2	3	0	7	0	56%	67%	40%	75%	0%	50%
Cardiothoracic Surgery	7	7	1	13	3	8	1	1	3	1	2	0	0	7	3	23%	33%	25%	0%	0%	20%
Childrens Services Group - Acute	18	9	4	23	5	14	2	2	15	2	10	2	1	8	0	65%	40%	71%	100%	50%	72%
Childrens Services Group - Community	7	2	0	9	0	7	1	1	2	0	1	1	0	7	0	22%	-	14%	100%	0%	22%
Critical Care	22	7	4	25	5	15	5	0	10	1	7	2	0	7	8	40%	20%	47%	40%	-	45%
Dental	14	0	0	14	0	9	3	2	7	0	4	3	0	7	0	50%	-	44%	100%	0%	50%
General surgery	22	8	7	23	4	12	6	1	7	0	6	1	0	14	2	30%	0%	50%	17%	0%	37%
Gynaecology	9	3	2	10	1	4	4	1	5	1	3	1	0	5	0	50%	100%	75%	25%	0%	44%
Head & Neck	22	3	11	14	0	8	5	1	7	0	7	0	0	3	4	50%	-	88%	0%	0%	50%
Obstetrics	15	3	2	16	2	7	6	1	8	0	3	5	0	7	1	50%	0%	43%	83%	0%	57%
Ophthalmology	17	5	1	21	1	18	1	1	8	0	8	0	0	12	1	38%	0%	44%	0%	0%	40%
Pathology	7	1	1	7	2	5	0	0	1	0	1	0	0	6	0	14%	0%	20%	-	-	20%
Radiology	10	2	1	11	1	10	0	0	6	1	5	0	0	4	1	55%	100%	50%	-	-	50%
Speech & Language Therapy	7	0	1	6	0	4	1	1	2	0	1	1	0	4	0	33%	-	25%	100%	0%	33%
Trauma & Orthopaedics	18	20	6	32	5	19	4	4	9	0	6	1	2	20	3	28%	0%	32%	25%	50%	33%
Urology	10	1	0	11	2	3	3	3	2	0	1	1	0	7	2	18%	0%	33%	33%	0%	22%
Total	224	74	41	257	37	151	46	23	103	10	68	21	4	129	25	40%	27%	45%	46%	17%	42%

Appendix 1b: Divisional Audit Completion Rate Report - Division 2

Directorate/ Specialty	Type of Audits Been Undertaken				Types Of Audits Completed								Total Audit in Progress	Total Audit in Pending	Total Completi on Rate	National Completi on Rate	Local Completi on Rate	NICE Completi on Rate	Other Completi on Rate	Combined Local, NICE and OTHER completi on rate	
	Audits on original 2015/16 Plan	Additional Audits added in year	Authorise d Abandone d Audits	Total audits minus authorise d abandone d audits	National Audit	Local Audit	NICE Audit	Service Evaluatio n & Other Audit	Total Audits Complete d	National Audit	Local Audit	NICE Audit									Service Evaluatio n & Other Audit
Accident & Emergency	11	2	0	13	5	5	2	1	7	3	3	1	0	6	0	54%	60%	60%	50%	0%	50%
Acute medicine	5	2	0	7	2	3	0	2	3	2	0	0	1	4	0	43%	100%	0%	-	50%	20%
Adult Community Services	6	2	0	8	0	5	2	1	5	0	3	2	0	3	0	63%	-	60%	100%	0%	63%
Care of the elderly	7	0	0	7	1	4	1	1	4	0	3	1	0	3	0	57%	0%	75%	100%	0%	67%
Dermatology	11	1	1	11	1	5	4	1	9	0	5	4	0	2	0	82%	0%	100%	100%	0%	90%
Diabetes	11	7	2	16	4	9	2	1	5	0	4	1	0	8	3	31%	0%	44%	50%	0%	42%
Dietetics	4	0	0	4	0	3	0	1	2	0	1	0	1	2	0	50%	-	33%	-	100%	50%
Endoscopy	17	3	0	20	12	4	4	0	12	9	3	0	0	8	0	60%	75%	75%	0%	-	38%
Gastroenterology	16	0	4	12	2	3	6	1	5	1	3	1	0	7	0	42%	50%	100%	17%	0%	40%
Maltings	3	0	0	3	0	1	0	2	1	0	0	0	1	2	0	33%	-	0%	-	50%	33%
Neurology	10	2	1	11	2	6	1	2	3	1	1	0	1	8	0	27%	50%	17%	0%	50%	22%
Oncology & Haematology	16	6	1	21	4	11	3	3	9	0	7	1	1	11	1	43%	0%	64%	33%	33%	53%
Pharmacy	5	2	1	6	0	3	2	1	3	0	1	1	1	2	1	50%	-	33%	50%	100%	50%
Renal medicine	15	8	1	22	2	16	2	2	12	1	8	2	1	7	3	55%	50%	50%	100%	50%	55%
Respiratory medicine	17	4	4	17	6	5	5	1	8	4	3	1	0	9	0	47%	67%	60%	20%	0%	36%
Rheumatology	10	4	3	11	1	5	3	2	4	0	2	1	1	7	0	36%	0%	40%	33%	50%	40%
Sexual Health	8	1	0	9	0	6	2	1	2	0	2	0	0	7	0	22%	-	33%	0%	0%	22%
Stroke	3	3	0	6	4	0	1	1	0	0	0	0	0	6	0	0%	0%	-	0%	0%	0%
Therapy Services	6	1	1	6	0	2	2	2	3	0	1	2	0	3	0	50%	-	50%	100%	0%	50%
Acute																					
Total	181	48	19	210	46	96	42	26	97	21	50	18	8	105	8	46%	46%	52%	43%	31%	46%

Appendix 2a: Divisional Progress Against Plan - Division 1

Directorate/ Specialty	Audits due for completion In Apr-Jun	Number of proposed Audits actually completed in Apr-Jun	Audits due for completion In Jul-Sept	Number of proposed Audits actually completed in Jul-Sept	Audits due for completion In Oct-Dec	Number of proposed Audits actually completed in Oct-Dec	Audits due for completion In Jan-Mar	Number of proposed Audits actually completed in Jan-Mar	Audits completed in an EARLIER quarter than proposed	Audits completed in a LATER quarter than proposed	Total Audits Due	Audits completed with time frame	Total completed inc. those completed outside timeframes
Audiology	1	1	1	1	3	0	1	0	0	0	6	2	2
Cardiology	2	2	1	0	3	3	10	0	3	1	16	5	9
Cardiothoracic Surgery	2	1	1	1	1	0	9	0	0	1	13	2	3
Childrens Services Group - Acute	1	1	5	5	5	5	12	0	4	0	23	11	15
Childrens Services Group - Community	3	1	0	0	1	0	5	0	0	1	9	1	2
Critical Care	8	2	5	1	6	1	6	0	1	5	25	4	10
Dental	4	4	1	1	3	2	6	0	0	0	14	7	7
General surgery	3	1	5	2	4	1	11	0	0	3	23	4	7
Gynaecology	2	0	2	0	2	1	4	0	1	3	10	1	5
Head & Neck	3	0	4	0	2	0	5	0	1	6	14	0	7
Obstetrics	3	1	4	3	4	1	5	0	2	1	16	5	8
Ophthalmology	6	0	7	1	4	0	4	0	0	7	21	1	8
Pathology	0	0	3	0	2	0	2	0	0	1	7	0	1
Radiology	0	0	3	1	0	0	8	0	4	1	11	1	6
Speech & Language Therapy	1	1	1	1	2	0	2	0	0	0	6	2	2
Trauma & Othopaedics	1	1	7	5	10	2	14	0	0	1	32	8	9
Urology	3	1	1	0	2	0	5	0	0	1	11	1	2
Total	43	17	51	22	54	16	109	0	16	32	257	55	103

Appendix 2b: Divisional Progress Against Plan - Division 2

Directorate / Specialty	Audits due for completion In Apr-Jun	Number of proposed Audits actually completed in Apr-Jun	Audits due for completion In Jul-Sept	Number of proposed Audits actually completed in Jul-Sept	Audits due for completion In Oct-Dec	Number of proposed Audits actually completed in Oct-Dec	Audits due for completion In Jan-Mar	Number of proposed Audits actually completed in Jan-Mar	Audits completed in an EARLIER quarter than proposed	Audits completed in a LATER quarter than proposed	Total Audits Due	Audits completed withintime frame	Total completed inc. those completed outside timeframes
Accident & Emergency	6	4	1	1	0	0	6	0	0	2	13	5	7
Acute medicine	0	0	0	0	3	0	4	0	3	0	7	0	3
Adult Community Services	2	2	0	0	2	1	4	0	2	0	8	3	5
Care of the elderly	3	1	1	0	1	0	2	0	0	3	7	1	4
Dermatology	3	3	4	3	2	2	2	0	0	1	11	8	9
Diabetes	2	1	3	2	2	0	9	1	0	1	16	4	5
Dietetics	1	1	1	1	0	0	2	0	0	0	4	2	2
Endoscopy	3	3	5	2	3	0	9	0	7	0	20	5	12
Gastroenterology	0	0	2	2	7	3	3	0	0	0	12	5	5
Maltings	1	1	0	0	0	0	2	0	0	0	3	1	1
Neurology	1	0	1	1	3	1	6	0	0	1	11	2	3
Oncology & Haematology	3	2	2	0	10	3	6	0	2	2	21	5	9
Pharmacy	0	0	2	2	1	0	3	0	1	0	6	2	3
Renal medicine	4	3	2	2	5	4	11	0	3	0	22	9	12
Respiratory medicine	2	2	3	2	5	2	7	0	1	1	17	6	8
Rheumatology	0	0	2	1	4	2	5	0	1	0	11	3	4
Sexual Health	0	0	0	0	4	2	5	0	0	0	9	2	2
Stroke	1	0	0	0	3	0	2	0	0	0	6	0	0
Therapy Services Acute	0	0	2	2	0	0	4	0	1	0	6	2	3
Total	32	23	31	21	55	20	92	1	21	11	210	65	97

Appendix 3: Split by Audit Type Report – Trust wide

Division	Audits on original 2015/16 Plan	Additional Audits added in year	Authorised Abandoned Audits	Total Audits Minus any authorised abandoned audits	Type of Audits Been Undertaken				Total Audits Completed	Types Of Audits Completed				Total Audit in Progress	Total Audit in Pending	Total Completion Rate
					National Audit	Local Audit	NICE Audit	Service Evaluation & Other Audit		National Audit	Local Audit	NICE Audit	Service Evaluation & Other Audit			
Division 1	224	74	41	257	37	151	46	23	103	10	68	21	4	129	25	40%
Division 2	181	48	19	210	46	96	42	26	97	21	50	18	8	105	8	46%
Total	405	122	60	467	83	247	88	49	200	31	118	39	12	234	33	43%

Division	National Audits				Local Audits				NICE Audits									
	No. of Audits	% of Audits	No. in Progress	% in Progress	No. Completed	% Completed	No. of Audits	% of Audits	No. in Progress	% in Progress	No. Completed	% Completed	No. of Audits	% of Audits	No. in Progress	% in Progress	No. Completed	% Completed
Division 1	37	14%	27	73%	10	27%	151	59%	83	55%	68	45%	46	18%	25	54%	21	46%
Division 2	46	22%	25	54%	21	46%	96	46%	46	48%	50	52%	42	20%	24	57%	18	43%
Total	83	18%	52	63%	31	37%	247	53%	129	52%	118	48%	88	19%	49	56%	39	44%

Division	Service Evaluation & Other				Adjusted Completion Rate (Combined Local, NICE and Other - Excludes)							
	No. of Audits	% of Audits	No. in Progress	% in Progress	No. Completed	% Completed	No. of Audits	% of Audits	No. in Progress	% in Progress	No. Completed	% Completed
Division 1	23	9%	19	83%	4	17%	220	86%	127	58%	93	42%
Division 2	26	12%	18	69%	8	31%	164	78%	88	54%	76	46%
Total	49	10%	37	76%	12	24%	384	82%	215	56%	169	44%

Appendix 4: NCAPOP Participation 2015/16

The National Clinical Audit and Patient Outcomes Programme (NCAPOP) 2015/2016 - Updated December 2015						
Current Programme	Directorate	Applicable	Participation	If participating status of audit	Anticipated completion of data collection and submission	Included in Quality Accounts 2015/16
Clinical Outcomes Review Programme						
Child Death Review Database Development Project	Paediatrics	Yes	No	Child Death Overview Panel (CDOP) Co-ordinators were not invited by Audit Provider to consultation meetings or to participate in this project.	N/A	No
Child Health Clinical Outcome Review Programme	Paediatrics	Yes	TBC	This three year programme is delivered by National Confidential Enquiry into Patient Outcome and Death (NCEPOD) in collaboration with The University of Cardiff. Split in to two topics, Neurodisability and Adolescent Mental Health. Programme is in early stages of development, awaiting further information from the Audit Provider.	To be confirmed	Yes
Learning Disability Mortality Review Programme	Safeguarding	Yes	TBC	This programme is currently under procurement and it is anticipated that a service provider will be in place by Spring 2015.	To be confirmed	No
Maternal, Newborn and Infant Clinical Outcome Review Programme	Obstetrics & Gynaecology	Yes	Yes	In progress	Mar-16	Yes
Medical and Surgical Clinical Outcome Review Programme	General Surgery and Gastroenterology	Yes	Yes	In progress	Mar-16	Yes
Retrospective Case Record Review Programme	To be confirmed	TBC	TBC	This programme is currently under procurement. Information not yet published by HQIP.	To be confirmed	No
National Clinical Audits						

Acute coronary syndrome or Acute myocardial infarction (MINAP)	Cardiothoracic Services	Yes	Yes	In progress	May-16	Yes
Adult cardiac surgery audit (ACS)	Cardiothoracic Services	Yes	Yes	In progress	Jun-16	Yes
Bowel cancer audit	Oncology & Haematology	Yes	Yes	In progress	Mar-16	Yes
Cardiac arrhythmia (HRM)	Cardiothoracic Services	Yes	Yes	In progress	Mar-16	Yes
Chronic Obstructive Pulmonary Disease (COPD)	Respiratory	Yes	Yes	Completed	Jul-15	Yes
Coronary angioplasty / percutaneous coronary interventions (PCI)	Cardiothoracic Services	Yes	Yes	In progress	Mar-16	Yes
Diabetes Audit (Adult) (NDA)	Diabetes	Yes	Yes	In progress	Mar-16	Yes
Falls and Fragility Fractures Audit Programme (includes the hip fracture database) (FFFAP)	Trauma & Orthopaedics (National Hip Fracture) and Care of the Elderly (Inpatient Falls)	Yes	Yes	In Progress	Dec-16	Yes
Head and Neck Oncology Audit (DAHNO)	Oncology & Haematology	Yes	Yes	In progress	Mar-16	No
Heart failure (HF)	Cardiothoracic Services	Yes	Yes	In progress	Jun-16	Yes
Inflammatory Bowel Disease (IBD)	Gastroenterology	Yes	No	Abandoned. National funding of audit by RCP has not yet been approved. Update due end of January 2016. If funding becomes available the audit it will be re-registered 2016/17.	Sep-15	Yes

Lung cancer audit (NLCA)	Oncology & Haematology	Yes	Yes	In progress	Mar-16	Yes
National Emergency Laparotomy Audit (NELA)	Critical Care	Yes	Yes	Completed	Jul-15	Yes
National Joint Registry (NJR)	Trauma & Orthopaedics	Yes	Yes	In progress	Mar-16	Yes
Neonatal intensive and special care (NNAP)	Paediatrics	Yes	Yes	In progress	Mar-16	Yes
Oesophago-gastric cancer (NAOGC)	Oncology & Haematology	Yes	Yes	In progress	Mar-16	Yes
Ophthalmology	Ophthalmology	Yes	Yes	In progress	Mar-16	Yes
Prostate cancer	Oncology & Haematology and Urology	Yes	Yes	In progress	Mar-16	Yes
Rheumatoid and early inflammatory arthritis	Rheumatology	Yes	Yes	In progress	Jan-17	Yes
Sentinel Stroke National Audit Programme (SSNAP)	Stroke	Yes	Yes	In progress	Mar-16	Yes
Specialist Rehab for Patients with Complex Needs	Neurology / Trauma & Orthopaedics	TBC	TBC	This audit project has not yet been launched by the provider and whether the Trust will be invited to participate as a Trauma Unit has not yet been confirmed.	To be confirmed	Yes
National Dementia Audit (NAD)	Care of the Elderly	Yes	No	2015/16 is a pilot project. The directorate have submitted an application to participate in the 2016/17 Third Round.	N/A	No
Not applicable to The Royal Wolverhampton Hospitals NHS Trust						
Chronic Kidney Disease in primary care (CKD)	Renal - N/A - Primary Care	No	N/A	N/A	N/A	Yes
HIV/STD (feas)	Sexual Health	No	N/A	N/A	N/A	No
Congenital heart disease (Paediatric cardiac	Cardiothoracic Services - N/A -	No	N/A	N/A	N/A	Yes

surgery) (CHD)	Paediatric cardiac surgery is not carried out at RWT					
Mental Health Clinical Outcome Review Programme	Mental Health - N/A	No	N/A	N/A	N/A	Yes
National Vascular Registry (NVR)	N/A - Do not undertake Vascular Surgery in the Trust	No	N/A	N/A	N/A	Yes
Paediatric Intensive Care (PICANet)	Paediatrics. N/A - No paediatric intensive care at RWT	No	N/A	N/A	N/A	Yes