

## Trust Board Report

<b>Meeting Date:</b>	25 November 2013
<b>Title:</b>	6 month - Clinical Audit Report
<b>Executive Summary:</b>	This report provides with the clinical audit activity in the Trust for the first six months of 2013-14. This information is split by Divisions.
<b>Action Requested:</b>	Assurance to the Trust Board
<b>Report of:</b>	Medical Director
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<b>Resource Implications:</b>	none
<b>Public or Private:</b> (with reasons if private)	Public Session
<b>References:</b> (eg from/to other committees)	none
<b>Appendices</b>	Breakdown of Clinical Audits by Directorate April '13 – October '13
<b>NHS Constitution:</b> (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: 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

## BACKGROUND DETAILS

### **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

Clinical Audit activity across the Trust includes contribution to numerous National Clinical Audits, NICE (National Institute of Clinical Excellence) audits, CQUIN audits, NHS Litigation Authority (NHSLA) audits and many locally driven Trust audits. The numbers of clinical audits taking place in year 2013-14 are 447. The completions of these audits and individual directorate clinical audit plans have been monitored by the Clinical Audit Committee (CAC).

### **2013/14 Clinical Audit Performance for the first 6 months:**

Division 1: Completion rate: **39%**

- Expected completion rate at this point in time, based on proposed completion dates, is **62%**

Division 2: Completion rate: **37%**

- Expected completion rate at this point in time, based on proposed completion dates, is **65%**

Trust Completion rate: **38%**

- Expected completion rate at this point in time, based on proposed completion dates, is **64%**

The breakdown of the type clinical audits done in the Trust and their completion rate is as follows:

	No. of Audits	% of Audits	% in progress	% Completed
National	65	15	76	24
NICE	44	10	52	48
Local	305	68	59	42
Others	33	7	76	24

The recent changes to the Clinical Audit Policy were made taking into account the poor completion of local audits in the Trust in the last financial year. These include:

1. Clinical Audit Lead is a Consultant or Senior member of Clinical Staff

2. Clinical Audit once registered on the Clinical Audit Database has a timeline of 3 months to start the audit and 6 months to complete it, if the above timeline is not adhered to, the audit will be abandoned
  
3. There will be local audits registered in the final quarter of the year. This will facilitate the directorates to complete their outstanding audits in progress.

Individual directorates have been requested to split their Clinical Audit plan for this financial year into 4 quarters and update the database accordingly. This has allowed the governance officers to monitor the progress more effectively. The updates to Clinical Audit Database has enabled individual directorates to actively abandon the audits which were proposed but not started within 3 months of registration and not completed within 6 months. The attached appendix clearly shows the current audit activity through individual directorates. Out of the proposed 193 clinical audits for the first 6 months of this financial year 169 have been completed, but the completed audits include some which have been proposed for completion in the next 6 months. The actual number of audits completed for the proposed 6 months are 73, this gives the 38% completion rate.

Local audits form a majority of the clinical audits being done in our Trust. Currently their completion rate is 42%. At the current rate we should be able to reach a completion rate of 75-80% for local audits by the end of this financial year. The overall completion rate for this financial year including the National, NICE and other audits should be 65-70%. This rate is lower than the local audit rate as the completion of the National Audits is dependent on factors which are controlled and monitored at a central/National level than locally in our Trust.





Dermatology	2	0	0	0	0	0	0	0
Diabetes	6	0	4	0	0	0	0	0
Gastro - Endoscopy	2	0	2	0	0	0	0	0
Gastro -Dietetics	5	3	5	7	3	3	1	0
Gastroenterology	4	0	3	0	0	0	0	0
General Surgery	0	0	4	0	0	0	0	0
Gynaecology	7	2	5	0	0	0	0	0
Head & Neck	7	2	7	4	1	3	0	0
Maltings	4	3	4	16	7	7	2	0
Neurology	4	0	2	0	0	0	0	0
Obstetrics	2	0	5	0	0	0	0	0
Oncology & Haematology	10	10	17	10	2	2	6	0
Ophthalmology	11	1	12	7	4	0	3	0
Pathology	4	2	4	2	1	0	1	0
Pharmacy	4	2	3	29	15	5	9	0
Radiology	9	4	4	6	2	3	1	0
Renal medicine	13	7	11	9	3	2	2	2

Respiratory medicine	4	3	4	10	2	1	7	0
Rheumatology	7	0	4	0	0	0	0	0
SALT	8	3	8	0	0	0	0	0
Sexual Health	7	2	3	5	0	5	0	0
Stroke	0	0	0	0	0	0	0	0
Therapy Services (Acute)	1	0	1	0	0	0	0	0
Therapy Services (Community)	0	0	0	0	0	0	0	0
Trauma & Orthopaedics	13	7	10	11	2	4	5	0
Urology	2	3	9	3	0	1	0	2
<b>Totals</b>	<b>193</b>	<b>73</b>	<b>169</b>	<b>164</b>	<b>56</b>	<b>64</b>	<b>39</b>	<b>5</b>
		38%			34%	39%	24%	3%
					**45%			
**Adjusted figure, not including those actions not due yet								