



Clinical Audit Guidance

This guidance is an attempt to keep the process of developing a clinical audit simple and satisfy the requirements of revalidation. Clinical audit differs from a survey where data is measured and presented without reference to criteria or standards. As audit is a measure of two points in time for effective quality improvement other quality improvement tools may need to be used.

Title

This should be stated as a heading on your document.

Reason for the audit

Topics chosen can be identified from many sources. There may be a new guideline circulated and you may wish to see how your practice performs against new recommendations. A problem may have been identified from a complaint or significant event review and an audit would establish if there is a more widespread problem. You may be aware from your clinical care that there is scope for improvement in an area of care. The condition or treatment could be one that affects patients in a significant way or affects many patients. It should be your opinion that there should be scope for improvement.

Criteria or criterion to be measured

It is important to keep your audit simple so do not choose too many criteria. The criterion is a statement to which it is easy to answer yes or no as to whether it has been met. Often including the word "should" may help. Where possible it should be derived from a well evidenced guideline or piece of research. This should then be referenced. It is better if it contains only one element so that it is clear which element is not being met. A criterion with two elements would be that "All patients with IHD are on aspirin and have had their blood pressure checked". For some quality improvement work you may wish to bundle all elements together in one indicator to assess your care of patients with a clinical condition for example diabetes.

Standard(s) set

A standard is the level of performance achieved and expressed as a percentage. It can be derived from external sources such as audits that have been done elsewhere or internally decided from discussion with clinicians in the practice. The standard should be realistic and not idealistic and hence a percentage of 100% should usually be avoided.

Preparation and planning

Prior to commencing data collection it is important to plan your audit as a paper exercise to ensure it is achievable and answers the question you wish answered. You need to decide how you identify your patients. This will often be done by a search on your data base of patients. If so can you set up a search or do you need to talk to someone who can and check it can identify who you want? Do you wish to include all the patients or a sample? This will obviously depend on the numbers involved. Most audit projects do not need to be as rigorous as a research project so although there are statistical methods of deciding sample size this is not usually necessary to be used. The number sampled needs to be practicable. Simple randomisation of choosing every second or third patient on

a list may suffice. You also need to decide how you will record your results whether this be using a software package or a simple paper check list which records Yes/ No/ Not applicable. How do you inform members of the practice team you are conducting an audit without this influencing the result?

Results and date of collection one

The date needs to be stated. The collection could be one point in time, retrospective or prospective. The results are usually easiest read in table format e.g.

Criterion	Number sampled	Achievement	Standard

The criterion may need to be abbreviated or numbered to fit in the table.

Description of change(s) implemented

From your results it is easy to see whether your criterion or criteria have been met or not. You then need to decide on changes to be made. This may be following presenting the results to others to gain their opinion especially if the change(s) will affect more than just you. Also it is beneficial to share your audit results with the whole practice team so that the likelihood of sustaining any change is increased. A decision will also need to be taken as to when a further data collection is done. This needs to allow sufficient time for the changes to have an effect.

Results and date of data collection two

This can be presented in an extension of the table previously presented with an additional column for the second data collection.

Criterion	Number sampled (Date one)	Data one achievement	Number sampled (Data two)	Data two achievement	Standard

Reflections

This is where you present the conclusions of your audit project. It would include any lessons learned. Also any further steps required for change and you may wish to state when the audit will be repeated.