

# Clinical Audit

## Protocols for use of the Clinical Audit Template



### CLINICAL AUDIT

Undertaking this activity contributes to the requirement for Section 3: Practice Development, Quality Improvement and Review activities.

This protocol should be used in conjunction with:

- Clinical Audit Template

A Clinical Audit is:

- a quality improvement cyclical activity that comprises of measurement and action
- clinically led and has multiple uses
- a reliable source of objective data about both process compliance and outcomes
- a professional responsibility
- ongoing and requires monitoring and development

Clinical audits (much in the same way as many other Quality Improvement activities) have three core aspects which need to be considered throughout the audit process:

- Measurement: Identifying and measuring a component of clinical practice
- Comparison: Comparing practice and results against recognized standards
- Evaluation: Evaluation and implementation of audit outcomes

The audit process should utilize the PDSA (Plan, Do, Study, Act) approach.

The benefit of a clinical audit allows for a measurement of whether the current practice meets or exceeds best practice standards, is relevant, is utilizing current knowledge and is being effectively applied.

### Background and Aim

Background and Aim provides a firm grounding for considering what the topic will be and where to commence the audit. The group undertaking the clinical audit should identify a topic and once decided, a set of objectives should be developed to ensure that the outcome is guided and feasible. It is important for those undertaking the audit to ensure that the area they are auditing is viable, relevant, measurable and will assist in the improvement of quality outcomes.

The aim of the audit undertaken should show that the practice and service delivery are improved as a direct outcome and that efficiency is increased. Supplementary outcomes of the audit may be enhanced working relationships and communication within a service or with other staff and may also highlight the need for additional education or training. The group undertaking the audit may contain both clinical and non-clinical members. Developing a statement or question to assist in guiding the aim of the audit may provide an appropriate approach to identifying and improving the outcome from a practice perspective.

Choosing a topic that is feasible is of utmost importance, if it is not possible to implement the changes identified as part of the audit this is not a beneficial use of time or resources. The audit should be related to improving clinical practice against established standards. The audit should determine if the current practice meets or exceeds best practice standards and whether current knowledge and resources are being applied to the practice.

### Topic

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practice against established standards. The audit should determine if the current practice meets or exceeds best practice standards and whether current knowledge and resources are being applied to the practice. The choice of topic should be based on an area of practice that is relevant to the quality of care provided.

### **Standard**

Defining ideal standards requires discussion with appropriate staff about specific aspects of care that can be evaluated through comparison of best practice against current practice. This may require some reading of relevant literature to develop an understanding of best practice in the appropriate area. Utilising guidelines provided by professional bodies will provide a credible standard for comparison. Standards should be SMART focused: Specific, Measurable, Achievable, Realistic and Time Bound.

### **Methodology**

Developing a plan for how the audit will be completed provides an appropriate base for commencing the audit. This should include information on why the audit was undertaken, the standard, core group, collection of data and how it intends to be measured. This stage should include the data collection component, you may need to develop a template to record the data you wish to collect, these can be duplicated to ensure that the result is consistent. The data collection should also be identified as being a sample or an audit of all available cases. If a sample is used it needs to be large enough to be representative of the group. The collection of data should be time bound, but should allow appropriate time for collection to take place, it is worth noting that data collection can be undertaken either retrospectively or prospectively. Try to ensure that the data collected is not too onerous or asks any unnecessary questions

### **Results**

Writing a summary or evaluation of the audit and its outcomes provides a clear overview of what is working well and what requires additional consideration or improvement. The evaluation should provide a comparison between current standards and best practice standards, why any differences exist and suggestions for how the standard may be improved. Analysis of the results allows the opportunity to consider the questions to ask regarding how the information can be interpreted and implemented. The questions and outcomes identified should be used as a comparison of the results against the selected standard. This will allow for any corrective measures that may need to be included.

Does the analysis highlight any issues / or assist with the implementation in the following areas?

- Representation of the care provided
- Any deviations from the standard
- Full participation in data collection
- Data represents the opportunity to implement change

### **Implementing the outcomes of the audit**

How the results are implemented is the most important aspect of the audit and should reflect change to current processes and care if done correctly. This element of the audit requires appropriate leadership and management to ensure that the outcomes identified in the audit are fulfilled. Developing a change plan in consultation with identified members and colleagues will assist to develop relationships and responsibility for delivery of the planned changes.

### **Sustaining the changes identified**

To ensure that continuous quality improvement is implemented it will be necessary to review the changes at various intervals. This may be undertaken as a smaller scale audit or if required a full audit if standards change. Focusing on one aspect of the changes that have been made on a periodic basis can ensure that the changes made continue to provide results.

### **Learnit Module:**

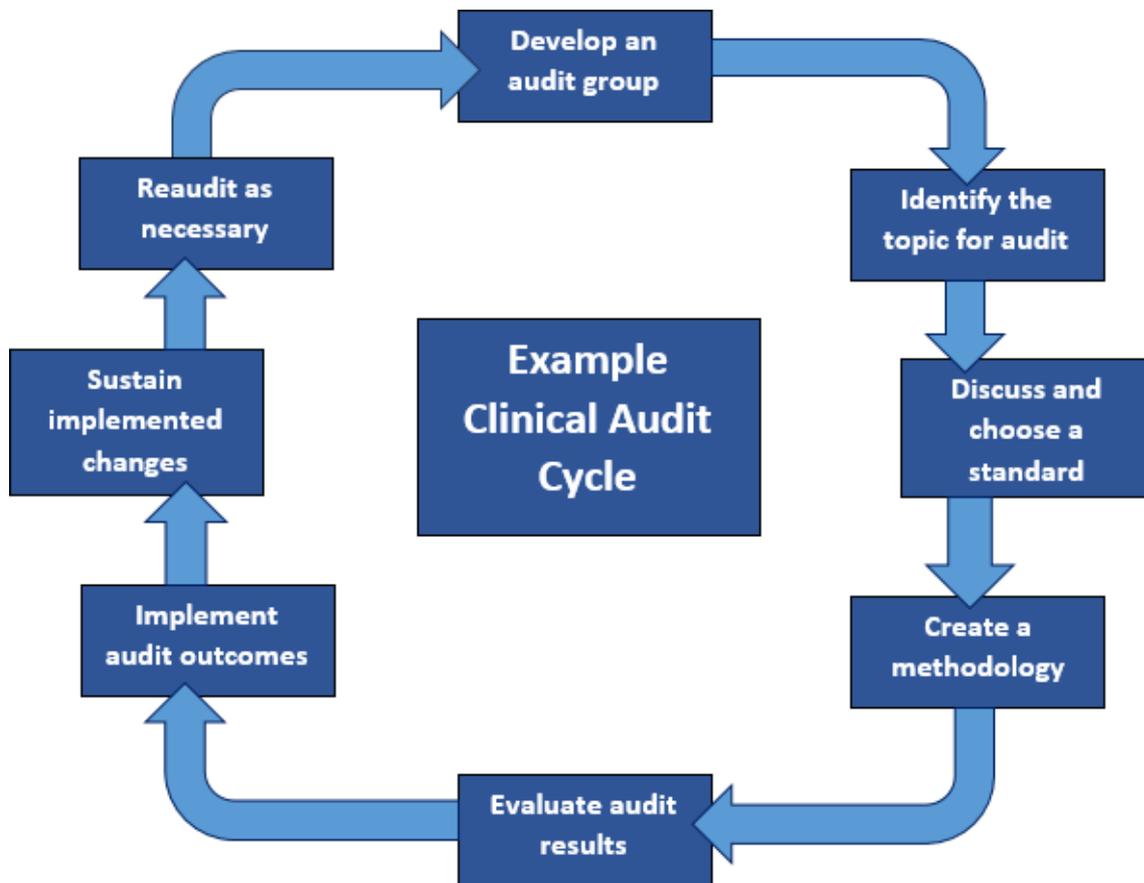
Clinical audit in mental health practice: CCQI module 1

### **Additional resources:**

[Clinical \(Practice\) Audit Guidelines – The College of Psychiatrists of Ireland \(irishpsychiatry.ie\)](http://irishpsychiatry.ie)

[CPD Handbook for the Irish College of Psychiatrists \(Clinical Practice Audit\) \(irishpsychiatry.ie\)](http://irishpsychiatry.ie)

**Example Clinical Audit Cycle:**



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