

CASC tip sheet #9

Writing your clinical audit action plan

BACKGROUND

As we discovered in tip sheet 7, if your clinical audit results identify sub-standard care, we must take steps to remedy and improve. HQIP are unequivocal in their view that action plans are an essential part of the change process. In their *Best Practice in Clinical Audit* guide from 2016, HQIP state 'once the underlying causes have been established, an action plan MUST be developed to address them'. The same HQIP document states: 'the action plan must be implemented and the effects monitored'. Below we identify some key action plan essentials.

4 essential elements of a high quality clinical audit action plan

Clear, precise, concise and logical

What is an action plan? The Institute for Innovation and Improvement adopt the following definition: 'action plans are a key component of successful project management, helping you summarise how you will achieve your objectives and by when'. To succeed, action plans must be clear, precise and short documents that inform their readership of the planned logical sequencing of events. No confusion.

Must be visible: communicate your action plan

A key failing of many action plans is that they frequently live in drawers and are not known by the wider workforce/community relevant to the audit. Indeed, the Care Quality Commission often find that the results and actions from audit and QI projects are not shared with key stakeholders. We appreciate that teams may be working on a number of action plans simultaneously but these need to be visible and communicated effectively and extensively. Indeed HQIP expect that 'results and the following action plan are communicated and distributed widely and effectively'. See CASC tip sheet 10 for details of how to share key outputs from audit projects.

SMART

We are all probably familiar with George Doran's SMART acronym. This is based on his paper from 1981 where he first stated that goals and objectives need to be **S**pecific, **M**easurable, **A**chievable, **R**elevant and **T**ime-bound. The problem with many action plans is they are vague/unspecific and do not follow the SMART rules. For example, you will often see actions such as "action to be implemented by Autumn 2021" [Autumn is a non-specific date], or 'action B to be implemented by all' [all is unclear, hard to measure and not realistic], etc.

Agreed, owned and monitored

If an action plan is to succeed, it must be agreed by the stakeholders that carried out the audit. This point is clear in NHS Improvement's excellent *An Overview of Action Planning* document. It goes without saying that to be effective an action plan must clearly identify who is responsible for taking which actions and there must also be a way of closely monitoring the plan to check actions are implemented.

