



eNewsletter - Issue 118 - March 2019

## Is it time to re-define clinical audit?



We have noted that 2019 marks the 30th anniversary of the Working for Patients White Paper. For those of you not familiar with Working for Patients, this was the document that in effect formalised NHS arrangements for what was then termed 'medical audit'

and what we now all know as 'clinical audit'. With this in mind and given what appears to be almost constant debate on social media and at meetings we attend, we thought that 30 years presents the ideal opportunity to reflect on how we define clinical audit. As part of this project we aim to find out if we collectively use the same definition for 'clinical audit'. Further, we hope to work collaboratively with as many stakeholders as possible to consider if a new definition for 'clinical audit' is required and if so, what that definition should be. To kick start this work we have created a three-question survey that asks you for your views in terms of how you currently define 'clinical audit'. This will help us to identify what definitions are being adopted by individuals, teams and organisations. Following this initial stage, we will release another short survey to determine if there is consensus on a singular audit definition and if not, consider how 'clinical audit' should be defined in 2019. Please take a moment to complete this initial survey. It will take you no longer than 3 minutes, click [here](#).

## CASC annual survey update

We are continuing to make progress analysing the high-quality feedback that we received from the clinical audit community via our 9th annual survey. Last month we released the interim report that provides a full account of the numerical data that was attained from 183 respondents in December 2018, click [here](#). We are now starting to review the free-text comments that were submitted to us in relation to three questions focusing exclusively on national clinical audit. Feedback on the first question 'what is the single best attribute of

## Training Courses:

- [Advanced Clinical Audit](#)
- [Train the Trainer in Clinical Audit](#)
- [Audit Distance Learning Course](#)
- [Root Cause Analysis](#)
- [Significant Event Audit](#)
- [Getting started with QI](#)

## See Also:

- [About us](#)
- [Training courses](#)
- [Clinical Audit resources](#)
- [CASC reports](#)
- [Quality improvement](#)
- [Patient safety](#)

## Announcements:

Next e-News will be published on 5 April 2019.

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national clinical audits' is now available and we invite you to take a look at our one-page infographic, [here](#). It must be noted that when identifying the single best attribute of NCAs, respondents repeatedly identified two key words: 'benchmark' and 'compare'. Indeed, the ability to benchmark local care with that of others audit participants was repeatedly noted. A couple of other

supplementary positive attributes of NCAs were also identified via our thematic review and these are featured via the infographic. We hope to feedback in our April e-News on responses to our question 'what one change would you make to improve NCAs'? From early analysis, a broad range of themes are emerging.

## Take part in the NQICAN survey



Many of you will already be aware that the National Quality Improvement (including Clinical Audit) Network are currently inviting those who work in clinical audit and QI to participate in their first-ever survey. The aims of the survey are to: 1) evaluate the work of NQICAN and the constituent regional

networks, 2) assess the current position of local audit, 3) undertake a training needs analysis and 4) consult for ideas and areas for improvement. The online survey closes this coming Friday (8 March) and you can find out more via this [link](#). The NQICAN chairman, Carl Walker, has described the survey as 'the most important evaluation and consultation in regards to local clinical audit and our networks that we or anyone has ever undertaken'. Results will be presented at the national summit on 29 March and subsequently via the NQICAN online forum. We encourage you to spend 10 minutes to take part.

## Join an Improvement Fundamentals course

If you are looking for accessible online training in a range of quality improvement skills, then we highly recommend that you enrol on the four Improvement Fundamentals courses that are available via NHS England during March 2019. All courses are targeted at healthcare professionals and come in bite-sized chunks. The courses allow you to learn at your own pace but also give you the chance to network with



like-minded professionals via easy to use discussion boards and Twitter. Each course runs for one-week and is facilitated by QI experts. Courses offer a blended learning approach and participants will watch

short films, download materials and undertake short reflective tasks. The courses are also CPD certified and you can gain 10 CPD points for completing all four courses. The first course – Quality Improvement Theory - is now available, with further courses each week in March on: Quality Improvement Tools, Measuring for Quality Improvement and Spreading Quality Improvement. To find out more, click [here](#).

## Using SEA to improve patient safety



Over the last three years the CASC team have been working with a variety of healthcare teams to champion the use of Significant Event Audit to help learn lessons from patient safety incidents.

SEA is a much quicker and team-based approach to looking at incidents than Root Cause Analysis and the SEA approach fits in nicely with some of the key findings/themes from the 2018 NHS Improvement review entitled The future of patient safety investigations. We have worked with a number of hospices to set up SEA as their main way for reflecting on incidents and we are now extending this work to care homes (with some very promising initial results). On 28 February we were delighted to be invited by the East Midlands Academic Health Science Network to run a one-hour taster session in SEA to over 60 care home staff. This proved very successful and we plan to develop this work further. We offer accredited training in SEA, so please get in touch if you would like to know more. Click [here](#), to access the course flyer.

## What is coming up?



Places are still available for Health Conferences UK annual National Clinical Audit Summit taking place in London on 29 March 2019. The event will be chaired by Carl Walker

(NQICAN) and speakers include Professor Keenan (HQIP Medical Director) and Celia Ingham Clark (NHS England). As part of the event, Carl Walker will also be running an interactive masterclass entitled ‘Making clinical audit data count’. There will also be an NQICAN panel debate focusing on the results of the current NQICAN survey (see above). The CASC team will be attending the event. To find out more about the day, click [here](#). There is still time to enrol on our accredited

Advanced Clinical Audit course, taking place in Leicester on 11 April 2019. To find out more, click [here](#). We are also running audit training in London on 7 June, click [here](#). As ever, we continue to provide in-house accredited training in clinical audit and patient safety techniques and more details are available [here](#). If you require support for audit, QI and/or patient safety, then please get in touch.

## Tell your friends about our eNews



We first launched the CASC e-Newsletter in February 2007 with the aim of providing those with an interest in clinical audit and QI with a free regular monthly update. Since that time hundreds of subscribers across the world have joined our circulation list. The newsletter provides subscribers with a mixture of CASC-related and other clinical audit, quality improvement and patient safety news to help you keep up-to-date with current events. Don't forget that if you have missed a previous issue of the newsletter then you can visit the [eNews](#) section of our website where all previous issues are archived. If you wish to sign up for your own copy or know others who may be interested then please email:

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