

**PWYLLGOR ARCHWILIO A SICRWYDD RISG  
AUDIT AND RISK ASSURANCE COMMITTEE**

<b>DYDDIAD Y CYFARFOD: DATE OF MEETING:</b>	15 April 2025
<b>TEITL YR ADRODDIAD: TITLE OF REPORT:</b>	Clinical Audit Update
<b>CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:</b>	Sharon Daniel, Interim Director of Nursing, Quality and Patient Experience
<b>SWYDDOG ADRODD: REPORTING OFFICER:</b>	Ian Bebb, Clinical Audit Manager

**Pwrpas yr Adroddiad (dewiswch fel yn addas)**

**Purpose of the Report (select as appropriate)**

Er Sicrwydd/For Assurance

**ADRODDIAD SCAA**

**SBAR REPORT**

**Sefyllfa / Situation**

The purpose of this report is to provide the Audit and Risk Assurance Committee with an update on the Health Board's Clinical Audit Function and Programmes.

**Cefndir / Background**

The Health Board develops an annual Clinical Audit Programme (CAP) which is carried out by the Operational Services. This programme consists of a list of key clinical audit projects which have been prioritised in line with Health Board (service specific or otherwise) aims and objectives. The programme also includes all projects mandated by Welsh Government (NCAORP) and other national bodies. National benchmarking is possible through this mechanism.

**National Clinical Audit**

The National Clinical Audit and Outcome Review Plan (NCAORP) is a mandatory audit programme in Wales.

The risk associated with non-participation is the inability to benchmark our practice with other sites and Health Boards. This does not directly indicate that there are issue with clinical care; only that we do not have sufficient data to assess Health Board compliance with key guidelines and professional standards. There are other ways to demonstrate the "health" or quality within a service through other Quality Improvement (QI) work, Safety Dashboard, performance targets, clinical effectiveness process e.g. National Institute for Health and Care Excellence (NICE), service evaluation, etc.

The programme of audits is mandatory; therefore, there is always the potential for reputational damage with non-participation, or clinical standards not being met. Potentially, Welsh Government may write to Health Boards for a response. National audit reports are also in the public domain, so there is the potential for negative feedback from patients and other service users etc. As national clinical audits are used as a benchmarking tool, they could impact on recruitment and retention, where higher performing Trusts/Health Boards could attract the interest of new staff.

Full participation with each mandatory audit is considered by some specialties as not possible without further investment. In these cases, we would expect the risk to be addressed by the appropriate services where they can factor compliance with an audit into their other risks, business cases and key objectives.

A large number of new audits were added to the programme in 2024-25 and the Clinical Audit Department was determining whether or not they were applicable to the Health Board. This has now been completed.

### **Local Clinical Audit Programmes**

The Clinical Audit Department (CAD) liaise with a number of services to establish a local programme each financial year. A total of 32 local projects were submitted to the 2024/25 programme. NCAORP projects are automatically included, bringing the total to 77. The 2024/25 programme is currently being finalised, in line with development of next year's programme.

### **Audit Management and Tracking (AMAT) Software**

The CAD are implementing the AMAT software within the Health Board. All clinical audit projects are now registered via the system. Outputs are also monitored through this system. The system is being used as a data collection platform. The transparency and ease of access of the system is proving very beneficial, as it can be widely accessed by all users. The roll out of the system requires training of various staff, and ad hoc training is also provided.

## **Asesiad / Assessment**

### **Audit Management and Tracking (AMAT) Software**

The CAD are now implementing an additional module within the AMAT software. The Ward & Area module will support audits to be carried out across multiple areas of the Health Board on a regular basis. The software will act as a data collection platform and audit results and actions can be tracked through dashboard displays.

The new module will primarily be used for nurse-led audits, which will be carried out on all applicable wards throughout the hospital sites and include community areas. A total of 7 audits will have been launched by the time of this meeting, with additional audits expected to be added within the next 3 months. This represents a significant change in the way nurse-led audits are carried out, and will offer increases to transparency, tracking, improvements and ease of access. This software is now available to use within the Health Board.

### **National Clinical Audit**

The Health Board is contributing to all of the mandatory national projects. A full list of national audits can be found in the accompanying attachment. In the previous ARAC report on 10 December 2024, a number of these areas were classed as "TBC" and these are all now resolved. A small number of audits have been identified as having low participation levels but there is an element of participation for all audits.

Any exceptions to expected participation have been:

- Escalated to senior management within the respective services
- Reported to the relevant senior quality and governance forums
- Reviewed at the Clinical Audit Scrutiny Panel (CASP)
- Expected to complete a Quality Impact Assessment (Pilot stage)
- Continually monitored

Discussions with audit and service leads are underway for all areas where low participation has been identified. Where participation shortfalls are identified and not mitigated, services are asked to complete a risk assessment, include details within the relevant risk register and provide an improvement plan.

In January 2025, the CAD has included an additional element to the audit process. Any audits with insufficient participation will now require a Quality Impact Assessment. This is currently being piloted with a number of audits/services, with both positive and negative impacts/outcomes being identified.

Previously, two areas were flagged as outliers by the audit providers: Epilepsy 12 and National Joint Registry. Both of these issues were resolved, although both projects will continue to be monitored. It is worth noting that Withybush General Hospital was flagged as a “Gold standard” data quality reporter in recent correspondence for the National Joint Registry and the Health Board has received a number of letters like this for various audits in the past.

Three audits were flagged in the previous report to ARAC: National Hip Fracture, Major Trauma Audit and National Joint Registry. The services involved are providing Quality Impact Assessments and the National Hip Fracture Audit is currently being piloted through the system. All audits are being contributed to, but as participation remains at low levels, they have been escalated through the system.

Decisions will be made by Senior Health Board staff, as all QIA Panels are chaired by a Clinical Executive who will consult with the Service/Audit Leads. Decisions at panel are escalated as appropriate to the Board. The outcomes of this will be monitored carefully and reported to Quality, Safety and Experience Committee and the Clinical Audit Scrutiny Panel.

More detailed information about the status of each registered audit is available on request.

### **Clinical Audit Programme 2024/25**

Letters were sent to owning groups regarding the 2025/26 CAP and the deadline for submission is 30 April 2025. The new programme is expected to contain a number of re-audits, which is excellent for continuous improvement. There will also be a large number of nurse-led whole Health Board audits featuring on the programme. A total of 45 National audits will be included. The programme is being split into a bi-annual programme to encourage timely participation and provide more opportunities for the planning of these projects.

### **Shared Learning**

The CAD are continuing to hold Whole Hospital and Whole Health Board Audit meetings. An additional two events have been held since last reporting. Four more have been planned for 2025/26.

The CAD continues to support the Enabling Quality Improvement in Practice (EQliP) programme by attending event days and giving presentations on the links between QI and Clinical Audit and how they can complement each other. The most recent event was held on 11 February 2025, at which a talk on the links between Quality Improvement and Clinical Audit was given.

The CAD regularly meets with the Clinical Effectiveness team, Quality Assurance and Assurance and Risk teams to discuss work on the AMAT system and other activity.

## Argymhelliad / Recommendation

The Audit and Risk Assurance Committee is asked to:

- **NOTE** the expansion of the use of AMAT software within the Health Board
- **TAKE ASSURANCE** from the continuation of the majority of mandatory national audits and the processes followed for escalation
- **TAKE ASSURANCE** from the resolution of all of the projects that were awaiting confirmation of participation
- **NOTE** the increased monitoring of some projects and the new assessment process that is being piloted
- **NOTE** the development of the 2025/26 programme and new approach
- **TAKE ASSURANCE** from the continued shared learning through the Whole Hospital Audit Meetings (WHAM)

### Amcanion: (rhaid cwblhau)

#### Objectives: (must be completed)

<p>Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:</p>	<p>3.3 In carrying out this work, the Committee will primarily utilise the work of Internal Audit, Clinical Audit, External Audit and other assurance functions, but will not be limited to these audit functions. It will also seek reports and assurances from directors and managers as appropriate, concentrating on the overarching systems of good governance, risk management and internal control, together with indicators of their effectiveness.</p> <p>3.9 Provide assurance with regard to the systems and processes in place for clinical audit, and consider recommendations from the Effective Clinical Practice Working Group on suggested areas of activity for review by internal audit.</p> <p>3.20 The Audit and Risk Assurance Committee and the Quality, Safety and Experience Committee both have a role in seeking and providing assurance on Clinical Audit in the organisation. The Audit and Risk Assurance Committee will seek assurance on the overall plan, its fitness for purpose and its delivery. The Quality, Safety and Experience Committee will seek more detail on the clinical outcomes and improvements made as a result of clinical audit. The internal audit function will also have a role in providing assurance on the Annual Clinical Audit Plan.</p>
<p>Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:</p>	<p>Audit specific risks are included and owned by the Services and will feature on other risk registers.</p>
<p>Parthau Ansawdd: Domains of Quality <a href="https://sharepoint.com">Quality and Engagement Act (sharepoint.com)</a></p>	<ol style="list-style-type: none"> <li>1. Safe</li> <li>2. Timely</li> <li>3. Effective</li> </ol>
<p>Galluogwyr Ansawdd: Enablers of Quality:</p>	<ol style="list-style-type: none"> <li>3. Data to knowledge</li> <li>4. Learning, improvement and research</li> </ol>

<a href="#">Quality and Engagement Act (sharepoint.com)</a>	
Amcanion Strategol y BIP: UHB Strategic Objectives:	3. Striving to deliver and develop excellent services
Amcanion Cynllunio Planning Objectives	Not Applicable
Amcanion Llesiant BIP: UHB Well-being Objectives: <a href="#">Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022</a>	2. Develop a skilled and flexible workforce to meet the changing needs of the modern NHS

<b>Gwybodaeth Ychwanegol: Further Information:</b>	
Ar sail tystiolaeth: Evidence Base:	National Clinical Audit and Outcome Review Programme 2023/24 Hywel Dda UHB Forward Clinical Audit Programme 2023/24, 2024/25 (draft)
Rhestr Termiau: Glossary of Terms:	Contained within the body of the report
Partion / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Archwilio a Sicrwydd Risg Parties / Committees consulted prior to Audit and Risk Assurance Committee:	Clinical Audit Manager Interim Director of Nursing, Quality and Patient Experience

<b>Effaith: (rhaid cwblhau) Impact: (must be completed)</b>	
<b>Ariannol / Gwerth am Arian: Financial / Service:</b>	Not applicable
<b>Ansawdd / Gofal Claf: Quality / Patient Care:</b>	The principals of audit imply that quality/patient care will be impacted. However, no specific audit results are called out within this report.
<b>Gweithlu: Workforce:</b>	Workforce engagement in Clinical Audit provides an understanding of the impact of quality of service and clinical care delivery, and is a key driver for appraisal for medical staff and professional practice development in all clinical disciplines.
<b>Risg: Risk:</b>	Audit specific risks are contained within service/specialty specific risk registers. This includes non-participation with mandatory national audits.
<b>Cyfreithiol: Legal:</b>	Not applicable
<b>Enw Da: Reputational:</b>	There is the potential for reputational impact when the Health Board does not participate in mandatory audit

	projects. None of the criteria in the impact assessment apply.
<b>Gyfrinachedd: Privacy:</b>	Not applicable
<b>Cydraddoldeb: Equality:</b>	Not applicable

## Mandatory National Clinical Audits 2024-25

National Audit Title	Expected Participation 2025-26
National Joint Registry	Yes
National Laparotomy Audit (NELA)	Yes
Case Mix Programme (ICNARC)	Yes
Major Trauma Audit (TARN)	Yes
Renal Registry	n/a
National Early Inflammatory Arthritis Audit (NEIAA)	Yes
National Diabetes Paediatric Audit	Yes
National Adult Diabetes Audit (NDA)	Yes
National Diabetes Core Audit (PC)	
NDA: Diabetes Prevention Programme Audit (DPP)	n/a
NDA: National Diabetes Footcare	Yes
NDA: National Diabetes Inpatient Safety Audit (NDISA)	Yes
NDA: Gestational Diabetes Audit	n/a
NDA: National Pregnancy in Diabetes Audit (NPID)	Yes
NDA: National Integrated Specialist Survey	Yes
NDA: Transition and Young Type 2 Audit	Yes
National Respiratory Audit Programme (NRAP)	Yes
COPD Secondary Care	
NRAP: Adult Asthma Secondary Care	Yes
NRAP: Paediatric Asthma Secondary Care	Yes
NRAP: Pulmonary Rehabilitation	Yes
NRAP: Wales Primary Care Audit	Yes
National Audit of Chronic Obstructive Pulmonary Disease (PC)	Yes
All Wales Audiology Audit	Yes
Stroke Audit (SSNAP)	Yes
National Audit of Inpatient Falls	Yes
National Hip Fracture Database	Yes
Fracture Liaison Service Database	Yes
National Audit of Dementia	Yes
National Audit of Cardiac Rehabilitation	Yes
National Vascular Registry	n/a
National Cardiac Audit Programme (NCAP)	Yes

Myocardial Ischaemia National Audit Project (MINAP)	
NCAP: National Adult Cardiac Surgery Audit	n/a
NCAP: National Audit of Cardiac Rhythm Management (CRM)	Yes
NCAP: National Audit of Percutaneous Coronary Interventions (PCI)	n/a
NCAP: National Congenital Heart Disease Audit (NCHDA)	n/a
National Heart Failure Audit	Yes
National Audit of Mitral Valve Leaflet Repairs (MVLN)	n/a
The UK Transcatheter Aortic Valve Implantation Registry (TAVI)	n/a
National Clinical Audit of Psychosis	Yes
National Audit of Metastatic Breast Cancer	Yes
National Audit of Primary Breast Cancer	Yes
National Bowel Cancer Audit (NBOCA)	Yes
National Oesophago-Gastric Cancer Audit (NOGCA)	Yes
National Lung Cancer Audit	Yes
National Prostate Cancer Audit	Yes
National Ovarian Cancer Audit	Yes
National Pancreatic Cancer Audit	Yes
National Non-Hodgkin Lymphoma Audit	Yes
National Kidney Cancer Audit	Yes
National Clinical Audit of Seizures and Epilepsies for Children and Young People (Epilepsy 12)	Yes
National Maternity and Perinatal Audit	Yes
National Neonatal Audit Programme	Yes
Paediatric Intensive Care Network (PICANet)	n/a
National Perinatal Mortality Review Tool (PMRT)	Yes
National Audit for the Care at the End of Life (NACEL)	Yes
Epilepsy 12 Children and Young People National Clinical Audit	Yes

*n/a – not relevant to this Health Board or Wales*