



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

<b>DYDDIAD Y CYFARFOD: DATE OF MEETING:</b>	21 June 2022
<b>TEITL YR ADRODDIAD: TITLE OF REPORT:</b>	Clinical Audit Update
<b>CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:</b>	Mandy Rayani, Director of Nursing, Quality & 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)**

Ar Gyfer Trafodaeth/For Discussion

**ADRODDIAD SCAA  
SBAR REPORT**

**Sefyllfa / Situation**

The purpose of this report is:

- To provide the Audit & Risk Assurance Committee with an update on the Health Board's Clinical Audit Function and Programmes;
- To provide an update on plans for 2022/23.

**Cefndir / Background**

The Health Board develops an annual Clinical Audit Programme which is carried out by the 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. This programme also includes all projects mandated by Welsh Government (NCAORP) and other national bodies. National benchmarking is possible through this mechanism.

Due to the response to the COVID-19 pandemic, clinical teams have been less able to engage in audit activity. While many audit projects are being maintained, and new audits are underway, certain projects and audit reporting requirements have presented a challenge. Welsh Government has recognised this and has accepted delays in reporting and audit outcomes, both from the national audit providers and from Health Boards.

**National Clinical Audit**

The National Clinical Audit and Outcome Review Plan (NCAORP) is again underway in Wales. Welsh Government wrote to Health Boards in May 2021. At that time, the Clinical Audit Department (CAD) resumed its usual response to the programme and processes, although discretion has been given to individual Health Boards regarding participation. It has been made very clear by Welsh Government that clinical priorities must take precedence, especially in light of the ongoing and continued development of the pandemic response.

No further correspondence regarding the programme has been provided by Welsh Government and the above stance continues to be upheld.

## **Local Clinical Audit Programmes**

The annual Clinical Audit Programme, delivered by the Services, 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. This programme also includes all projects mandated by Welsh Government (NCAORP) and other national bodies.

The CAD liaised with a number of key groups/meetings to establish a programme for 2021/22. An extended time period was granted, in order to include as many projects as possible. The CAD continued to work with services in order to build a more complete programme.

There were a total of 24 local audits included on the 2021/22 programme, which represents a reduction compared with previous years. NCAORP projects are automatically included in addition, bringing the total to approximately 58 (approximate due to new national “sub” audits becoming available).

## **Asesiad / Assessment**

### **Resource for Clinical Audit**

Available resource for clinical audit within the Health Board remains variable within the specialties. Certain specialties have been significantly impacted by the pandemic and, as a result, have been unable to contribute to all of the national and local audits, although a variety of audits have been initiated and completed.

Resource issues within the CAD have been a concern and the Bronglais Office has remained empty for some time despite repeated recruitment attempts. The CAD has been working with Recruitment and Media teams as well as Hospital Management. A more flexible approach to recruitment is underway for BGH. All other offices are now recruited to.

The impact of the situation at BGH and on the wider Clinical Audit Function is being reflected in the risk register and has been reported to the Effective Clinical Practice Advisory Panel (ECPAP).

The CAD now has access to a new software system. This will enable the organisation to streamline how audits are registered and engaged with. A pilot of the Clinical Audit module will commence with one of the specialties, in coordination with the new Clinical Guidance module and the Clinical Effectiveness Team. This “two pronged” approach is aimed at increasing audit and guidance engagement within the targeted specialty with a future roll out across the whole Health Board.

This software is already in use in a number of Health Boards and Trusts and is being met with positivity and success. The new software offers a high level of traceability and transparency for clinical audit projects, clinical guidance, inspections and a platform for carrying out projects.

### **National Clinical Audit**

The Health Board has contributed to the majority of the national projects, although certain services have been identified as a concern in respect of participation. These have been monitored and reviewed by the Clinical Audit Scrutiny Panel (CASP) and contact made with these services. The aim of the Health Board is to resume all NCAORP projects as soon as is reasonable, given the pressures the Health Board is experiencing. It should be noted that

concerns over compliance are also reported to the relevant senior quality or governance forums.

It is also worth noting that all Services attending CASP have presented robust improvement plans and the panel has received assurance that projects will resume in 2022. Projects will be followed up in upcoming CASP meetings and with the new Clinical Director for Clinical Audit.

More detailed information about the status of each registered audit is available on request. This information will also be compiled and available in report format later in 2022.

### **Clinical Audit Programmes 2021/22 and 2022/23**

The CAD has been working with the Services regarding the above programmes. A reduced number of projects were submitted for the 2021/22 programme and uptake stalled significantly due to clinical pressures.

The CAD will continue to work with the Services to see these projects through to completion, many of which will carry over to 2022/23. Further discussions around the programme will be held at CASP. It is hoped that the use of new technology will make clinical audit resources and engagement more visible and accessible.

The programme was intended to focus on the recovery from COVID-19, reflecting audits that assess care during and after, provide evidence for effective new ways of working, service redesign or areas that have been identified as a risk during the pandemic. It has become clear that this has not been entirely possible, due to the continuation of the pandemic and the impact of new variants. It is hoped that the next programme for 2022-23 will instead be able to focus on these areas.

The CASP can identify projects, through the triangulation of available information that it feels are a particular priority for completion. When this has been the case the CASP has liaised with Service leads encouraging the completion of those projects and the CAD have also raised this at the appropriate quality or governance forum.

The 2022-23 programme is currently being compiled and should be finalised by June 2022. The CAD have written to more groups/committees than in previous years and it is hoped that a more diverse programme will develop as a result. The CAD is also carrying out a number of engagement meetings to bring this about, coordinating with the Quality Improvement and Clinical Effectiveness Teams.

### **Clinical Audit Reporting**

The CASP continues to maintain its schedule of meetings. The Panel has continued with its workplan, which has included discussions on current and future programmes, the risk register, as well as inviting services to attend to discuss concerns over national audit participation.

The CAD and CASP have been monitoring all national audits.

The Clinical Director for Clinical Audit, Dr Angeliki Karatasiou left her position and the Health Board in May 2022. Recruitment of a new Clinical Director is underway. Dr Karatasiou's contributions to Clinical Audit have been noted at ECPAP, where she was thanked for her time in the role.

The ECPAP continues to meet and the CASP has submitted a report to each of the panel meetings.

The Clinical Audit Manager has also provided reports for the Quality, Safety & Experience Committee (QSEC) in 2021/22.

### **Shared Learning**

The CAD resumed its programme of Whole Hospital Audit meetings (WHAM) for 2021 in line with pre COVID plans. Three dates have been successfully delivered and the next session will be held in June 2022.

The CAD now alternates between site based learning and Whole Health Board events. The first whole Health Board event was held in September 2021 and was met with considerable positivity from clinical teams. Three key national projects were presented as well as a Health Board wide audit on social distancing. There was also a presentation from the Chief Medical Examiner for Wales to discuss the recently developed Medical Examiner Service.

### **Building links with other Teams**

The CAD is working more closely with other teams to develop higher quality and higher priority clinical audit activity. A process has been implemented with Legal Services to help prioritise audits identified as a legal requirement. Once the new system has been fully developed and the backlog worked through, a protocol will be developed for a prospective solution. The CAD is also working with the Clinical Effectiveness Team as highlighted above. More Quality Improvement (QI) related projects are also underway, utilising links with the QI team. The CAD is also aligning audits with the Enabling Quality Improvement in Practice (EQIIP) Programme and is working with a number of participating teams to support their goals through audit.

### **Argymhelliad / Recommendation**

The Audit & Risk Assurance Committee is asked to:

- Note the continued reduction in clinical audit activity and plans for improving this;
- Note the new opportunities available to the clinical audit function with the introduction of new software;
- Note the continuation of the majority of mandatory national audits and the processes followed for the escalation of concerns;
- Note the current position of the 2021/22 and 2022/23 programmes;
- Note the continuing shared learning through WHAM.

### **Amcanion: (rhaid cwblhau)**

### **Objectives: (must be completed)**

Committee ToR Reference  
Cyfeirnod Cylch Gorchwyl y Pwyllgor

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>3.10 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>3.22 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>
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Nursing Quality and Patient Experience (NQPE 275) – current score of 12 (modified to reflect the previous non mandatory nature of the programme and decrease in participation during the pandemic).
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	<p>3.1 Safe and Clinically Effective Care</p> <p>3.3 Quality Improvement, Research and Innovation</p> <p>3.5 Record Keeping</p>
Amcanion Strategol y BIP: UHB Strategic Objectives:	All Strategic Objectives are applicable
Amcanion Llesiant BIP: UHB Well-being Objectives: <a href="#">Hyperlink to HDdUHB Well-being Objectives Annual Report 2018-2019</a>	<p>4. Improve Population Health through prevention and early intervention, supporting people to live happy and healthy lives</p> <p>2. Develop a skilled and flexible workforce to meet the changing needs of the modern NHS</p>

<b>Gwybodaeth Ychwanegol: Further Information:</b>	
Ar sail tystiolaeth: Evidence Base:	<p>Palmer Report, July 2014 <a href="http://gov.wales/docs/dhss/publications/140716dataen.pdf">http://gov.wales/docs/dhss/publications/140716dataen.pdf</a></p> <p>National Clinical Audit and Outcome Review Programme 2019/20</p> <p>Hywel Dda UHB Forward Clinical Audit Programme 2019/21, 2021/22</p> <p>Letter from Deputy Chief Medical Officer, 19<sup>th</sup> March 2020 re: National Clinical Audit Programme.</p> <p>Email from Welsh Government May 2021</p>
Rhestr Termiau: Glossary of Terms:	Contained within the body of the report

Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Archwilio a Sicrwydd Risg: Parties / Committees consulted prior to Audit and Risk Assurance Committee:	Clinical Audit Manager Director of Nursing, Quality & Patient Experience Clinical Director of Clinical Audit
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<b>Effaith: (rhaid cwblhau)</b> <b>Impact: (must be completed)</b>	
<b>Ariannol / Gwerth am Arian:</b> <b>Financial / Service:</b>	None
<b>Ansawdd / Gofal Claf:</b> <b>Quality / Patient Care:</b>	Failure to participate in clinical audit and to conduct it effectively could lead to concerns not being identified and subsequent improvements in services not being made. During the COVID-19 pandemic participation in these projects could prove more harmful by diverting resources away from critical services. The aim therefore is to maintain quality albeit at the cost of not collecting data or reporting on it.
<b>Gweithlu:</b> <b>Workforce:</b>	The workforce has been heavily effected during COVID-19. Most available resource for clinical audit has been utilised elsewhere. There are also further staff vacancies in the CAD which will reduce capacity within the team until recruitment is concluded.
<b>Risg:</b> <b>Risk:</b>	Potentially failure to conduct particular audits appropriately will lead to risk and/or legal implications. There is a risk that we cannot be assured of clinical standards or outcomes with the failure to participate fully in audit.
<b>Cyfreithiol:</b> <b>Legal:</b>	See above
<b>Enw Da:</b> <b>Reputational:</b>	Ordinarily there is a reputational impact for the Health Board in non-compliance and participation with the National Clinical Audits which are publicly reported. During COVID-19 the national programme has been suspended so there should not be an impact in this regard.
<b>Gyfrinachedd:</b> <b>Privacy:</b>	Not applicable
<b>Cydraddoldeb:</b> <b>Equality:</b>	There is some variability in participation for National Audit across the organisation which means that practice cannot be compared locally or nationally and inequality of care may not be identified. This does not have a direct impact on equality - only that it is more difficult to measure. The situation is improving.