



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

DYDDIAD Y CYFARFOD: DATE OF MEETING:	19 October 2021
TEITL YR ADRODDIAD: TITLE OF REPORT:	Clinical Audit Update
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Mandy Rayani, Director of Nursing, Quality & Patient Experience
SWYDDOG ADRODD: REPORTING OFFICER:	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 2021/22.

Cefndir / Background

During the COVID-19 pandemic, there has been a significant reduction in the demand and available resource for clinical audit activity.

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 challenges. 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

On 19th March 2020, the Deputy Chief Medical Officer wrote to Health Boards indicating that all clinical audit data collection would be suspended. Welsh Government arrived at this decision in consultation with the Healthcare Quality Improvement Partnership (HQIP) who run the National programme.

There is no expectation from Welsh Government that data collection will be completed retrospectively.

Clinical Audit Programmes

The Health Board develops an annual Clinical Audit Programme which is delivered 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 (National Clinical Audit and Outcome Review Plan) and other national bodies.

Due to the COVID-19 pandemic, the decision was made to extend the 2019/20 programme by another year. The 2019/21 programme would be finalised in 2021 and the next annual programme for 2021/22 would be developed.

Asesiad / Assessment

Resource for Clinical Audit

All clinical audits are conducted by the clinical teams. At the present time, the majority of staff from these teams remain focused on clinical activities or are deployed to critical roles.

Available resource for clinical audit within the Health Board remains variable within the specialties. Certain specialities 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.

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 indicating that England wished to resume a formal audit programme and that Wales would be expected to follow suit. At that time the Clinical Audit Department 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.

It is expected that Welsh Government will formally write to Health Boards in late 2021 to indicate a formal restart of the programme.

The Health Board has contributed to the majority of the national projects, although certain services have been identified as a concern regarding 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 still facing.

Approximately 37 mandatory projects have been running over the 2 year period. Certain projects have been suspended completely in 2020/21 and others have experienced delayed reporting or have only been able to offer limited support. This is the responsibility of individual audit providers.

The Health Board has contributed to the vast majority of these projects over this time period, with increasing variability during the pandemic. The below indicates an approximation of those projects based on available information during this time from auditing teams, the Clinical Audit Department (CAD) as well as the latest available reports:

- 26 projects with “significant” compliance (no concerns identified)
- 7 projects with “partial” compliance (some overall or site-specific concerns)
- 4 projects with “poor” compliance (overall low or no participation)

Of the 4 projects with poor compliance, 2 represent historic issues that are acknowledged by the Service Leads and attempts have been made to resolve them. The remaining 2 are due to staffing issues during the pandemic and have now been resolved. The 7 projects with partial compliance are being addressed where possible. All projects are monitored by CASP.

The Risk Register has been adjusted accordingly to reflect the reduced participation in audit and the non-mandatory nature of the programme (NQPE 275). Participation is expected to resume in full once services have returned to pre COVID activity. Once the programme has been reinstated, any continued non-compliance will be addressed through the CASP and reported to the Operational Quality and Safety Forums.

Clinical Audit Programme 2019/21

The extended Clinical Audit programme for 2019/21 consisted of 47 “local” projects and 37 NCAORP projects (detailed above). The local programme has concluded as follows:

- 29 projects have been completed
- 6 are in progress/awaiting reports/action plans
- 4 were not started
- 8 were incomplete

All 6 that are currently still in progress, etc. will be carried over to the new programme for completion. Projects have not been completed for a variety of reasons, including new systems making the audit redundant and insufficient staffing etc.

The relevant Operational groups have been notified of compliance with the programme and given the opportunity to influence the audit status/outcomes.

The local programme concluded with a completion rate of 62%, which is a significant increase from the 2018/19 programme (31%). Incomplete projects accounted for 17% of the programme, which was an increase from the previous programme (14%).

Clinical Audit Programme 2021/22

The CAD has liaised with a number of key groups/meetings to establish a new programme. An extended time period was granted to include as many projects as possible. A number of service areas have chosen not to submit a programme at this time. The CAD will continue to work with these services, as well as services that have not been captured as part of the initial engagement.

There are a total of 24 local audits included on the 2021/22 programme, which reflects a reduced number of projects from previous years. NCAORP projects are automatically included in addition.

Clinical Audit Reporting

The CASP has met 5 times in 2021. The Panel has continued with its work plan, 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 of the previously mandatory national audits.

The Effective Clinical Practice Advisory Panel (ECPAP) has met 3 times in 2021 and the CASP has submitted a report to each of the panel meetings.

The Clinical Audit Manager has also provided two reports for the Quality, Safety & Experience Assurance Committee (QSEAC) in 2021, which included evidence of audit outcomes and improvement plans for a selection of national audits. It is also worth noting that 2 national audits have been presented to this committee in 2021; National Audit of Dementia and National Joint Registry.

The CAD has also extended its support and attendance to more operational groups and will continue to expand on this in the future.

Shared Learning

The CAD has resumed its programme of Whole Hospital Audit Meetings (WHAM) for 2021. Four dates have been agreed for 2021 and WHAMs will be conducted simultaneously on each of the four acute sites to allow for a Health Board wide forum when appropriate, as well as to reduce the impact of these sessions on clinical time.

The first two WHAMs were held in March and June 2021. A digital platform was used, and a total of 36 presentations were delivered across the Health Board, with additional sessions on Governance held at certain sites.

The next session will be held on 29th September 2021, and will be chaired by the Clinical Director for Clinical Audit. It will be a Health Board wide event and will include the following presentations:

- Lead Medical Examiner for Wales to discuss the Medical Examiner Service
- National Joint Registry (Updated)
- National Falls Audit
- Sentinel Stroke National Audit Programme
- Health Board wide COVID-19 Social Distancing Audit

A further event is planned for December 2021 and a programme for 2022 is currently being organised. It is the aim of the Department to hold alternating Health Board wide and site based events, to allow for a mixture of local and wider learning opportunities.

Work Plan for 2021/22

The CAD will continue to liaise with clinical teams and senior committees to support their inclusion with the current clinical audit programme as well as to build a robust programme for 2022/23. Operational groups will receive reports on the programme status. CASP will continue to monitor the programme and national audit activity.

Argymhelliad / Recommendation

The Audit & Risk Assurance Committee is asked to:

- Note the continued reduction in clinical audit activity during the COVID-19 outbreak;
- Note the continued decision from Welsh Government to suspend audit data collection;
- Note the conclusion of the 2019/21 programme and significant increase in completion rates;
- Note the continuing shared learning through WHAM and the development of Health Board wide sessions.

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Committee ToR Reference Cyfeirnod Cylch Gorchwyl y Pwyllgor	<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>3.10 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):	3.1 Safe and Clinically Effective Care 3.3 Quality Improvement, Research and Innovation 3.5 Record Keeping
Amcanion Strategol y BIP: UHB Strategic Objectives:	All Strategic Objectives are applicable
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2018-2019	4. Improve Population Health through prevention and early intervention, supporting people to live happy and healthy lives 2. Develop a skilled and flexible workforce to meet the changing needs of the modern NHS

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	Palmer Report, July 2014 http://gov.wales/docs/dhss/publications/140716dataen.pdf National Clinical Audit and Outcome Review Programme 2019/20 Hywel Dda UHB Forward Clinical Audit Programme 2019/21 Annual Clinical Audit Report 2018-19 Letter from Deputy Chief Medical Officer, 19 th March 2020 re: National Clinical Audit Programme
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 Director of Nursing, Quality & Patient Experience Clinical Director of Clinical Audit

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	None
Ansawdd / Gofal Claf: Quality / Patient Care:	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.
Gweithlu: Workforce:	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.
Risg: Risk:	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.
Cyfreithiol: Legal:	See above
Enw Da: Reputational:	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.
Gyfrinachedd: Privacy:	Not applicable

**Cydraddoldeb:
Equality:**

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.