



**PWYLLGOR ANSAWDD, DIOGELWCH A SICRHAU PROFIOD
QUALITY, SAFETY AND EXPERIENCE ASSURANCE COMMITTEE**

DYDDIAD Y CYFARFOD: DATE OF MEETING:	09 June 2020
TEITL YR ADRODDIAD: TITLE OF REPORT:	Clinical Audit Position Statement
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Mandy Rayani, Executive Director of Nursing, Quality and 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

To provide a position statement to the Quality, Safety and Experience Assurance Committee (QSEAC) on clinical audit activity during the COVID-19 pandemic.

Cefndir / Background

During ordinary circumstances the Health Board would develop and carry out an annual Clinical Audit Programme. This programme would consist of a list of key clinical audit projects that have been prioritised in line with Health Board (Service specific or otherwise) aims and objectives. This programme would also include all projects mandated by Welsh Government (National Clinical Audit and Outcome Review Programme (NCAORP)) and other national bodies, in addition to national benchmarking.

Asesiad / Assessment

During the COVID-19 pandemic there has been a significant reduction in clinical audit activity.

Resource for Clinical Audit

It is important to frame this report in the context of staff deployment during the outbreak. All clinical audits are carried out by the clinical teams. The majority of staff from these teams have been focused on clinical activities or deployed to critical roles. As a result, the majority of clinical audit and quality assurance/improvement activity has been stood down.

The Clinical Audit Department has very limited capacity available to offer support, due to a number of vacancies and staff absences, given that all but one of the remaining staff members have been deployed to other critical areas. The majority of capacity is focused on maintaining the All Wales Mortality Review process. Remaining capacity is being utilised to support audit reports (e.g. monthly Hip Fracture), data entry and data collection for the auditing teams who have chosen to continue with their projects.

National Clinical Audit

On 19th March 2020, the Deputy Chief Medical Officer contacted 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. This has not resulted in an outright ban on audit data collection and those wishing to carry on have been allowed to do so. Individual audit providers have been given discretion regarding what to do with the production of reports for existing data. There is also no expectation that data collection would be completed retrospectively after the crisis has abated.

Welsh Government are in the process of agreeing the best approach to reinstate the national programme. Information is being obtained from Health Boards and other sources however, no further decision has been made to date.

Although there is no mandated expectation to do so, the Health Board has maintained a number of the national projects during this unprecedented time. The list below includes the projects being maintained (in varying ways) that the Clinical Audit Department are aware of:

- Major Trauma Audit
- National Joint Registry
- National Diabetes Foot Care audit
- National Asthma and COPD audit programme
- National Early Inflammatory Arthritis
- National Audit of Inpatient Falls
- National Hip Fracture database
- National Heart Failure
- Myocardial Infarction National Audit Project (MINAP)
- National Paediatric Diabetes
- National Cancer audits would still routinely collect data as part of a normal working pattern and this is likely to be true for other audits e.g. Stroke

There may be other national audits continuing in the background, however this is the information available at the time of reporting.

Local Clinical Audit

Activity fell sharply once preparations for COVID-19 began. Clinical Audit staff were preparing to finalise the 2019/20 programme and in the process of developing the 2020/21 programme. These processes have not been completed due to the clinical teams slowing down or desisting in audit activity. The decision was made not to continue with preparations for the 2020/21 programme so as not to over burden clinical services during this crisis. This decision was made in conjunction with the decision from Welsh Government to suspend audit activity.

The following audits from the 2019/20 programme have been continuing during the crisis though this list will not be exhaustive:

- Care Treatment Plans (Mental Health & Learning Disabilities (MHLD))
- Do Not Attempt Resuscitation (DNACPR)
- A number of other non-programme audits

Impact

Clearly the reduction in clinical audit activity will have an impact both for the Health Board and nationally. A significant number of audits have understandably not been undertaken during this time. The impact of this will be somewhat mitigated by the reduction in the number of patients and consequently insufficient patient samples for effective data collection. This will certainly apply to all elective admission based audits (e.g. National Joint Registry, Audiology, Cardiac Rhythm Management etc.).

Services will have been unable to demonstrate through audit, their ability to meet standards of care. There will also be little or no improvement work being undertaken during this time. Whilst the focus of all clinical services will be on COVID-19, there will be insufficient data available or collected to inform these audits. The advice from Welsh Government is that the burden of retrospective data collection as well recovering from the outbreak would not be tenable.

One of the key goals of the national programme is to bench mark practice against other Health Boards. This will not be an issue at this time as every Health Board and Trust will be in the same position.

Future work

The Clinical Audit Scrutiny Panel will meet on the 28th May.2020 in an attempt to continue some of the core work around assurance for the national programme as well as to discuss the future approach.

The Clinical Director for Clinical Audit and the Clinical Audit Manager are contacting services to assess the capacity for reinstatement of clinical audit activity. This will be balanced against the current deployment of the Clinical Audit Team and other Health Board staff.

It is expected that for the remainder of 2020/21, the clinical audit programme will consist of a smaller number of projects that will be limited to whichever mandatory national projects that are still running as well as a number of other key audits, both new and carried forward from the previous year.

During the recovery period from the current crisis the Clinical Audit Department will focus available resource on the above programme and preparations for a more robust 2021/22 programme.

Although no formal decision has been reached, discussions with relevant Associate Medical Directors (AMDs, Assistant Directors (ADs) and Clinical Audit Leads has resulted in the understanding that it may not be beneficial to audit COVID-19 related practice. Resource to audit effectively during this time would be unavailable and retrospective projects would be of limited value, unless specific learning is required and could be applied quickly and effectively prior to any additional outbreaks.

The work outlined within this report will be subject to the severity and duration of the COVID-19 outbreak, as well as the recovery time.

Argymhelliad / Recommendation

The Quality, Safety and Experience Assurance Committee is asked to:

- Discuss the reduction in clinical audit activity during the COVID-19 outbreak and the impacts highlighted;
- Note the decision from Welsh Government to suspend all audit data collection and the continuing suspension;

- Note the decision from some clinical teams to maintain data collection;
- Note the discussions around future work for the clinical audit function.

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	5.17 Shape and Approve the annual clinical audit plan, ensuring that internally commissioned audits are aligned with strategic priorities.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Nursing Quality and Patient Experience (NQPE 275)
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	3.1 Safe and Clinically Effective Care 3.3 Quality Improvement, Research and Innovation 3.4 Information Governance and Communications Technology 3.5 Record Keeping
Nodau Gwella Ansawdd: Quality Improvement Goal(s):	All Quality Improvement Goals Apply
Amcanion Strategol y BIP: UHB Strategic Objectives:	4. Improve the productivity and quality of our services using the principles of prudent health care and the opportunities to innovate and work with partners.
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2018-2019	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:	Welsh Health Circular 2019 006: National Clinical Audit Annual Plan Letter from DCMO 19.03.2020 Letter from HQIP 20.03.2020
Rhestr Termiau: Glossary of Terms:	Contained within the body of the report
Partion / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Ansawdd, Diogelwch a Sicrhau Profiod: Parties / Committees consulted prior to Quality, Safety and Experience Assurance Committee:	N/A

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	None.
Ansawdd / Gofal Claf: Quality / Patient Care:	<p>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.</p> <p>During the COVID-19 pandemic, participation in audit activity will divert resource away from clinical areas and as a result would negatively impact on the Health Board's ability to respond to the outbreak.</p>
Gweithlu: Workforce:	During the pandemic much of the relevant workforce for clinical audit has been deployed elsewhere or are focusing on clinical priorities.
Risg: Risk:	<p>There is a risk that services cannot provide quality assurance or focus on quality improvement. This is balanced against the need to respond to the current crisis. The impact of this is also limited due to the reduction in patient samples.</p> <p>The risk to clinical services is minimised by not diverting resources to clinical audit projects.</p>
Cyfreithiol: Legal:	None.
Enw Da: Reputational:	There is little risk to reputational impact during this pandemic as Welsh Government has suspended audit data collection and assurance reports.
Gyfrinachedd: Privacy:	N/A
Cydraddoldeb: Equality:	There is 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.