

Completed clinical audit forms example

Clinical audit proposal for an audit on timeliness and effectiveness of assessments by the breast care team

Example

(back of form)

POPULATION DESCRIPTION (patients, service users, events or situations)	
Include these <i>All people referred to the breast care team in July</i>	
Exclude these	
Patient or service user ages	☒ All ages ☐ Only between and years of age
Number in a year	or 6 months or 1 month 160 or 1 week 40
POPULATION OR SAMPLE AND TIME PERIOD FOR THE CLINICAL AUDIT	
☒ Population <i>All</i> cases from <i>1 July</i> to <i>31 July</i>	date
☐ Sample Type size number	Size
DATA COLLECTION STRATEGY	
☒ Retrospective ☐ Concurrent ☐ Other (specify)	
DATA SOURCES TO BE USED	
☒ Patient or service user records ☐ Other (specify)	
CLINICAL AUDIT MEASURES (see form)	
Source of clinical audit measures	
☒ National standard or guideline ☐ Research studies ☐ Other (specify)	
☒ Systematic review or meta-analysis ☐ Group consensus	
☐ Local protocol or guideline	
Additional data to be collected for information only	
WORK PLAN	
Planned date(s)	Planned date(s)
Start by <i>31 Aug</i>	Problems and causes analysed by <i>15 Oct</i>
Data collected by <i>10 Sep</i>	Action plan implemented by <i>1 Dec</i>
'Flagged' cases reviewed by <i>30 Sep</i>	Repeat measurement completed by <i>31 Mar</i>
Findings reviewed by <i>10 Oct</i>	Report submitted by* <i>1 Jan</i>
*The report may be updated if more than one measure – act – measure cycle is needed to achieve any desired improvements.	
HELP NEEDED	
Is help or support from any other department or service needed to complete the audit? ☐ Yes ☒ No	
If yes, describe whose help is needed and the nature of the help	
COPY — Send a copy of the signed proposal, including the clinical audit measures to the following: <i>Clinical Governance Department</i>	

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(front of form)

CLINICAL AUDIT PROPOSAL	
DIRECTORATE, SERVICE OR TEAM <i>Breast care team</i>	
CLINICAL AUDIT TITLE <i>Timeliness and effectiveness of assessments by the breast care team</i>	
CLINICAL AUDIT OBJECTIVE(S)	
<i>Ensure that assessments carried out by the breast care team are timely and effective</i>	
BACKGROUND TO THE CLINICAL AUDIT (recently subject and objective(s) were selected)	
<i>The team wants to have evidence of its performance in comparison with national guidelines</i>	
STAKEHOLDERS AND THEIR INVOLVEMENT (those involved in or affected by the clinical audit and how they will be involved)	
	Implementation (tick as many as apply)
	Design Data Review Plan Other
<i>Breast care team</i>	☒ ☒ ☒ ☒ ☒
<i>Manager of the service</i>	☐ ☐ ☐ ☐ ☐
<i>General practitioner(s)</i>	☐ ☐ ☐ ☐ ☐
<i>Patients</i>	☐ ☐ ☐ ☐ ☐
ETHICS SCREENING LIST — Does the clinical audit ... Any yes response requires ethics review	
• infringe on any patient's rights or risk breaching any patient's confidentiality or privacy? ☐ Yes ☒ No	
• pose any risk for or burden on a patient beyond those of his or her routine care? ☐ Yes ☒ No	
• have someone carrying out the audit who does not normally have access to patient records or information? ☐ Yes ☒ No	
• involve the use of any untested clinical or systems intervention? ☐ Yes ☒ No	
• involve any information about a patient beyond that collected in routine patient care? ☐ Yes ☒ No	
• collect data directly from any patient or carer, and if so, could the audit subject a patient or carer to more than minimal burdens or risks, such as time consuming or requires sensitive information? ☐ Yes ☒ No	
COMMITMENT AND SUPPORT	
I will ensure that the team undertaking this clinical audit is supported to achieve improvement in the quality of care or service or to refer recommendations for improvement to those responsible and accountable for the service.	
Clinical Director/Service Manager/Team Leader	Clinical Audit Lead
signature <i>[Signature]</i> date <i>29 Aug</i>	signature <i>[Signature]</i> date <i>29 Aug</i>

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(inside of form)

SUBJECT		DATE	
Timeliness and effectiveness of assessments by breast care team		22 August	
CLINICAL AUDIT MEASURES			
Measure no.	Evidence of quality of care or service (criterion)	Standard (% compliance)	Exception(s)
1.	The outpatient appointment is <10 working days after the referral is received	100%	A. Patient choice
2.	In a single visit, the patient has: (a) Clinical examination and (b) Ultrasound or mammography and (c) Core biopsy or fine needle aspiration	100%	A. Patient declines for (b) or (c)
3.	Test results are given to the patient <5 working days following investigations	100%	A. Patient choice
4.	The breast care nurse is present when test results are given	100%	A. Patient choice

Example

SUBJECT *Timeliness and effectiveness of assessments by the breast care team* **DATE** *1 September*

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SUBJECT *Timeliness and effectiveness of assessments by breast care team* **CASE CODE**

OTHER INFORMATION ITEMS DATE

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EV = met EVIDENCE, EX = met an EXCEPTION, R = requires REVIEW, CM = met CRITICAL MANAGEMENT (for a complication only)

CLINICAL AUDIT CASE ABSTRACT

SUBJECT *Timeliness and effectiveness of assessments by breast care team* CASE CODE *488*OTHER INFORMATION ITEMS DATE *1 September*

Decision (EV, EX/CM or R)	Measure number	Evidence of quality (and exceptions or critical management)	Data collector notes
EX	1.	<i>The outpatient appointment is ≤10 working days after the referral is received</i> A. Patient choice	<i>100% Patient requested 12 days</i>
EV	2.	<i>In a single visit, the patient has:</i> (a) Clinical examination <i>and</i> (b) Ultrasound or mammography <i>and</i> (c) Core biopsy or fine needle aspiration A. Patient declines for (b) or (c)	<i>100%</i>
R	3.	<i>Test results are given to the patient ≤5 working days following investigations</i> A. Patient choice	<i>100% The fine needle aspiration was delayed and wasn't available when the test results were given to the patient. The patient was told the consultant would telephone when the result was available.</i>
R	4.	<i>The breast care nurse is present when test results are given</i> A. Patient choice	<i>100% There is no note in the record of the consultant telephoning the patient</i>

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EV = met EVIDENCE, EX = met an EXCEPTION, R = requires REVIEW, CM = met CRITICAL MANAGEMENT (for a complication only)

ANALYSIS OF FINDINGS

SUBJECT

FINDINGS FROM DATA COLLECTION				
Measure number	Evidence of quality (and exceptions or critical management)	% Expected	% Actual	Data collector notes (include case code numbers)
1	The outpatient appointment is <10 working days after the referral is received A. Patient choice	100	91.9	13 cases as follows: 8 cases had an appointment in 12 days 4 cases had an appointment in 14 or 15 days 1 case had an appointment in 20 days. There is no explanation for the delays in patients' records or appointment files.
2	In a single visit, the patient has: (a) Clinical examination and (b) Ultrasound or mammography and (c) Core biopsy or fine needle aspiration A. Patient declines (b) or (c)	100	95.0	8 cases; for 4 there is no record of an imaging exam, for 2, FNA was requested but there is no report in the patient's record; for 2 cases there are no imaging and no pathology reports in the patient's record.
3	Test results are given to the patient <5 working days following investigations A. Patient choice	100	87.5	20 cases; for 16 cases, there is no way to know that the test results were given to patients in 5 days. These patients did not have follow-up appointments in the 5 days after test results available, 2 patients became inpatients for other problems and were given the results within 24 hours of their availability. There is a note in 1 patient record that the patient's GP was telephoned with the result but it is unknown when the patient was informed. The fine needle aspiration was delayed and the report wasn't available when the test results were given to the patient. The patient was told the consultant would telephone when the result was available. There is no note in the record of the consultant telephoning the patient
4	The breast care nurse is present when test results are given A. Patient choice	100	80.0	32 cases; for 26 cases, there was no reference to who saw the patient except the doctor. For 4 cases, it was noted that the specialist nurse was not available due to illness.

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NUMBER OF CASES 160

DATE 10 October

[illegible]