NHS
Stockport
NHS Foundation Trust

ANNUAL REPORT

Clinical Audit Department
April 2022 - March 2023

Stockport NHS Foundation Trust is committed to improving services through systematic clinical audit.

This document was approved by the
Clinical Effectiveness Group on 9th June 2023

Contents

Foreword from the Medical Director

I am delighted to introduce our clinical audit annual report for the year ending March 2023.

Clinical audit is often used to provide assurance of good practice; or to identify areas of practice or service delivery where improvements need to be made. In these circumstances, quality improvement methodologies can be used to address areas of concern.

At Stockport FT we have a good level of clinical audit activity. Figures indicate that this year we have had a reduction in clinical audit registrations compared to previous years. We have strived to improve quality over quantity and this year we have focused on the priorities of the trust identified through our risk management processes and articulated in our clinical audit forward plan. This work included the national mandatory audits.

Each specialty continues to hold their Clinical Audit & Quality Improvement Forums supported by our Clinical Audit Team. These forums incorporate not only clinical audit activity but governance related topics, morbidity and mortality and quality improvement projects. Clinical audits are risk assessed and discussed in detail at these forums.

We continue to hold monthly Clinical Effectiveness Group Meetings which are attended by clinical and operational leads from each of our Divisions. On a quarterly basis, a detailed analysis of clinical audit work is received at this meeting from right across the trust and a supportive scrutiny of that activity is applied. This allows for the cross fertilization of ideas between Divisions. It has also greatly enhanced our ability to provide assurance against this activity to our trust's Quality Committee.

In November The Clinical Audit Department hosted its 6th "Clinical Audit & Quality Improvement Event" which provided the opportunity to recognise some of the excellent

projects undertaken; examples are included in this report.

This year the Clinical Audit Department was delighted to be awarded "Clinical Audit Team of The Year" by the Clinical Audit Support Centre (CASC) as part of their inaugural awards to celebrate the work carried out by local/national clinical audit staff and teams.

The trust continues to use its AMaT software to log its clinical audit activity. This allows us to monitor the progress of our audit activity systematically and to identify trends that may be arising. Quarterly updates are made to the AMaT system, allowing us the opportunity to improve its functionality and to tailor that functionality to the needs of the organisation.

I would like to take this opportunity to thank our staff in each specialty who have taken the time to participate in this years audit activity and in particular, I would like to thank all the members of the Clinical Effectiveness Group and the Clinical Audit Leads for all of their time and effort spent in supervising, promoting and improving clinical audit activity despite their numerous work commitments and time constraints.

Andrew D. Loughney
Medical Director
Stockport NHS Foundation Trust

June 2023

Executive Summary

Stockport NHS Foundation Trust is committed to delivering high quality, evidence-based care to its patients, and views Clinical Audit as a valuable tool in achieving this.

This report provides an overview of clinical audit activity at Stockport NHS Foundation Trust for the period indicated. Further details on any aspects referred to in this report are available upon request.

This year, the Trust began a realignment of the focus for clinical audit activity to only those projects registered as part of the annual 'Forward Plan'. These audits are established as a priority of the Trust.

During 2022/23 there were a total of **115** clinical audit projects registered with the Clinical Audit Department via the AMaT system as part of the Forward Plan.

These registrations spanned across **7** divisions and comprised of **64** national and **51** local audits.

Forward Plan Registrations 2022/23:			
Division	**Total**	**Local**	**National**
Clinical Support Services	9	7	2
Corporate	5	3	2
Emergency Department	11	5	6
Integrated Care	15	6	9
Medicine	21	5	16
Surgery	32	17	15
Women & Children	21	7	14
Total	**115**	**51**	**64**

In addition to local and national audit activity, monthly ward audits were also undertaken via AMaT. This is where quality metrics, infection prevention and other monthly activity is captured undertaken by the wards. Results from these are reported via their appropriate forums.

Clinical Audit & Quality Forums are held quarterly to share findings, support learning and to agree the actions required for recommendations made where appropriate. The forum is also used by some specialties to provide key updates such as Morbidity & Mortality (M&M) reviews.

Introduction

Clinical audit forms an integral part of the clinical governance framework and provides the Trust Board and stakeholders with assurance.

At Stockport NHS Foundation Trust, if a clinical audit compliance level is not achieved to give that assurance, then a consultant will provide a risk level based on professional judgement.

An outcomes report is submitted to Divisional Quality Groups monthly and to the Clinical Effectiveness Group (CEG) quarterly. This report will advise the CEG if the division can address the issue by the recommendations and actions put in place to address or if the CEG are being asked to take any actions.

The Healthcare Quality Improvement Partnership (HQIP) defines clinical audit as:

"a quality improvement cycle that involves measurement of the effectiveness of healthcare against agreed and proven standards of high quality and taking action to bring practice in line with these standards so as to improve the quality of care and health outcomes".

Healthcare Quality Improvement Partnership (HQIP),
New Principles of Best Practice in Clinical Audit, 2011

When conducted well, clinical audit enables the quality of care to be reviewed objectively within an approach which is focused on improvement. Benefits of clinical audit include:

- Promoting and enabling expected practice
- Providing opportunities for training and education
- Building relationships between clinicians, clinical teams, managers, and patients
- Improving service delivery and patient outcomes

Clinical audit is used as a quality improvement tool in the NHS, it involves an array of healthcare professionals agreeing the best way to treat patients and then collecting data (usually from patients' health care records) to find out whether they are doing the things they said they would do. If results show that there is room for improvement, actions will be agreed.

Clinical audits may be undertaken locally and the Trust also participates in national clinical audits. The National Clinical Audit and Patient Outcomes Programme (NCAPOP) audits are commissioned and managed on behalf of NHS England by the Healthcare Quality Improvement Partnership (HQIP). These audits relate to some of the most commonly occurring conditions. These collect and analyse data supplied by our local clinicians to provide a national picture of care standards for that specific condition. On a local level, the majority of NCAPOP audits provide local trusts with individual benchmarked reports on their compliance and performance, feeding back comparative findings to help participants identify necessary improvements for patients.

Clinical audit is often described as a cycle. Within this cycle there are stages that follow the systematic process of establishing best practice; measuring against criteria; taking action to improve care and monitoring to sustain improvement. As the process continues, each cycle aspires to a higher level of quality.

Clinical audit has been proven to provide assurance and to support continuous improvement in patient care and outcomes against evidence-based standards.

Department Overview

Clinical audit activity at Stockport NHS Foundation Trust is supported by a designated team of facilitators, and administrative support staff situated in Ash House at the main hospital site; Stepping Hill.
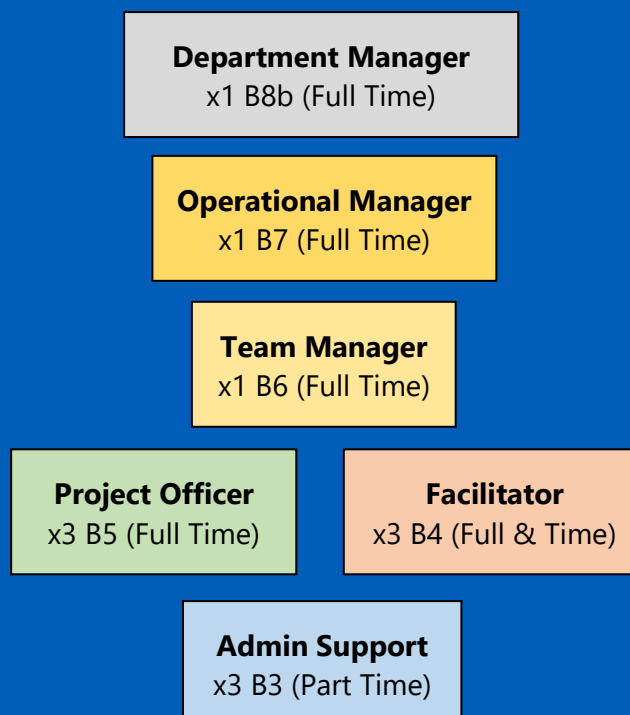
The department offers practical support, advice and guidance, training, and a case records management service to all staff within the Trust who wish to undertake clinical audit with a view to improving the quality of the care they offer patients.

The clinical audit team is proactive. Facilitators are engaged with the governance leads in divisions and attend the divisional quality governance board meetings. This is to support consistency and continuity of approach to clinical audit and identify areas that could benefit from clinical audit.

The team has good affiliations with clinical audit leads within specialties and encourages the use of the full audit cycle to make the most efficient use of resources. The clinical audit department also supports other workstreams related to clinical effectiveness; however, this is not reflected in this report as its focus is on clinical audit activity.

The Clinical Audit Team is committed to working with partners, including other NHS organisations, to share learning in relation to clinical audit, where this can be facilitated. In 2022/23 this has included clinical audit team members from Stockport NHS FT and Tameside and Glossop ICFT sharing learning from clinical audit and effectiveness committee meetings, and a shared commitment to work together in future. This will be further explored within 2023/24 through the review of learning forums to understand how ongoing improvement work can be shared more widely across both organisations.

During 2022/23 the department consisted of **12** members of staff (**8** full time and **4** part time).

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              ┌─────────────────────────┐
              │   Department Manager     │
              │    x1 B8b (Full Time)    │
              └─────────────────────────┘
               ┌─────────────────────────┐
               │   Operational Manager    │
               │     x1 B7 (Full Time)    │
               └─────────────────────────┘
                ┌──────────────────────┐
                │     Team Manager     │
                │   x1 B6 (Full Time)  │
                └──────────────────────┘
    ┌──────────────────────┐    ┌──────────────────────┐
    │   Project Officer    │    │     Facilitator      │
    │   x3 B5 (Full Time)  │    │  x3 B4 (Full & Time) │
    └──────────────────────┘    └──────────────────────┘
         ┌──────────────────────┐
         │    Admin Support     │
         │   x3 B3 (Part Time)  │
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Clinical Audit Leads

Clinical Audit leads have a vital role in ensuring that clinical audit delivers improvements. Each clinician within their respected area has a responsibility to ensure compliance with our audit policies and processes with support from their respective governance lead. In their role they manage audits by signing-off any programme of audit activity, approving clinical audits prior to registration and taking an active role in promoting audit activity.

Each audit lead, along with their designated clinical audit facilitator will produce and approve agendas for the Clinical Audit & Quality Forums for their respective specialty. The lead will also chair these forums ensuring appropriate discussion, agreement on actions and completion of action plans after each presentation.

The Clinical Audit Leads in post for the year commencing 2022/23 were:

Speciality	Audit Lead
Corporate	
Corporate Services (All)	*Natalie Davies*
Emergency Department	
Emergency Medicine	*Dr C Harker*
Integrated Care	
Acute Medicine	*Dr S Arangelova*
Borough-wide Therapist Services	*Liza McIlvenny*
Adult Therapies	*Liza McIlvenny*
Borough-wide Specialists	*Lisa Lainton*
Crisis Response	*Kay Bottrell*
District Nursing	*Jane Ankrett*
Transfer To Assess Unit	*Jane Ankrett*
Intermediate Tier Care & Rehab	*Jane Ankrett*
Intermediate Tier Hub	*Carina Schofield*
Neighbourhood Services	*Jane Ankrett*
Neurorehabilitation	*Dr S Mannemela*
Specialist Palliative Care Nursing	*Dr R Singh-Curry*
Therapies	*Liza McIlvenny*
Clinical Support Services	
Endoscopy	*Sharmaine Anker*
Pathology	*Dr M Dafalla*
Radiology	*Dr V Jackson*
Outpatients	*Sarah Newlove*
Pharmacy	*Dr P Buckley*

Speciality	Audit Lead
Medicine	
Cardiology	*Helen Goodwin*
Diabetes	*Dr R Bell*
DMOP	*Vacant*
Haematology	*Dr S Dukka*
Ophthalmology	*Katarzyna Pinnington*
Orthoptics	*Sara Lea*
Oral / Max Fax.	*Vacant*
Respiratory	*Vacant*
Rheumatology	*Dr C Filer*
Stroke	*Dr J Vassallo*
Surgery	
Anaesthetics	*Dr H Garrard*
Critical Care	*Dr S Knowles*
Gastroenterology	*Dr S. Bharucha*
General Surgery	*Mr E Clark*
Otolaryngology (ENT)	*Mr M Rudic*
Trauma & Orthopaedics	*Mr S Anand*
Urology	*Mr P Cleaveland*
Women & Children	
Obs & Gynae (Incl. Breast)	*Dr M Pureti*
Paediatrics	*Dr A Simmonett*

Monitoring Activity

Since 2017, the clinical audit department has used a software system; AMaT (Audit Management and Tracking), which has been specifically designed for the purpose of monitoring clinical audit activity.

The system developers provide quarterly updates based on user requirements. A great number of changes have been made in the development of the system to continuously improve the user experience and the monitoring of activity.

AMaT enables nursing and clinical staff to engage in such activity more easily across multiple areas of care.
AMaT is used to support monthly ward-based quality assessments.

With AMaT, ward audits can be managed, monitored, and scheduled. Teams are guided through the process of checking across key areas such as hand hygiene, medication, falls assessment, and pain management.

Nursing teams can see in real-time how compliant they are with standards of quality as soon as they enter the data. They can then use the intuitive AMaT interface to record the actions they intend to take and assign ownership and due dates against those tasks. Dashboards can be printed out and displayed outside each ward, indicating positive achievements and areas for improvement.

By making the audit process easier to perform for nursing teams, AMaT has helped to increase the quality of ward audits and the clear visualisation of results.

AMaT helps to:

➢ Underpin quality improvement programmes from ward to board
➢ Prepare for and respond to Care Quality Commission inspection
➢ Provide a searchable, holistic view of organisation's quality activity
➢ Measure quality progress over time
➢ Actions are recorded, and progress is monitored
➢ Provide ownership and accountability
➢ Provide system driven prompts
➢ Empower staff to be a driving force in quality improvement
➢ Improve compliance with NICE standards
➢ Support national and local audits, Quality Improvement projects and service evaluations
➢ Provide simple access to supporting documentation
➢ Reduce reliance on paper chasing for audit progress
➢ Reduce issues arising from version control of emailed word documents
➢ Save money by providing a flexible platform for improvement activity
➢ Save time by providing activity reports across multiple departments

National vs. Local Audit

Throughout the course of each year (April to March) there will be numerous clinical audit projects being undertaken within the Trust.

National audits are a Trust priority and local audits are identified by clinical specialties according to identified risks, complaints, legal cases, mortality data or their own service needs.

National Audit

The purpose of national clinical audit is to engage healthcare professionals across England and Wales in evaluating their clinical practice against standards and to facilitate improvement in the quality of treatment and care. As a result, it is intended that this will improve patient outcomes across a wide range of health-related conditions.

National audits are largely financed by the Department of Health and Social Care (DHSC) and commissioned by the Healthcare Quality Improvement Partnership (HQIP) which manages the National Clinical Audit and Patients Outcome Programme (NCAPOP). NCAPOP covers two main sub-programmes: the National Clinical Audit Programme and the Clinical Outcome Review Programmes. Most other national audits are funded from subscriptions paid by the NHS provider. Stockport FT pays subscription fees for national audits and registries of circa £40,000 per annum.

Stockport NHS Foundation Trust is committed to its participation in national audits, this enables us to demonstrate that we monitor quality, benchmark similar organisations and report compliance through the governance structure. Participation provides a level of assurance that our organisation takes quality seriously and that clinical teams and individual clinicians monitor and improve their practice.

The value of national clinical audits comes not only from our participation but also from our willingness to use the information obtained to take action to make improvements.

Upon the publishing of a National audit report, a review is undertaken by the specialty to consider our performance and any necessary actions. This review is submitted to the Divisional Quality Governance Board for approval and the Patient Safety & Quality Group for assurance. Actions included in the review are added to the AMaT system for monitoring. Overdue actions are included in a report to the groups named above.

It is worth noting that national audits may take 1-2 years to publish their findings, thus, AMaT may register a high percentage of these audits under the 'date pending' banner.

Local Audit

Most clinical audit activity undertaken within NHS trusts will involve healthcare professionals assessing aspects of care that they have selected as being important to them and/or their colleagues; these are defined as a 'local' clinical audit.

In addition to the national programmes that are set out each year as priorities, each specialty area will have an opportunity to register local clinical audits which they consider to be a local priority.

These audits can be identified in several ways as follows:

➢ those audits which were on the clinical audit programme for the previous financial year which had not been started
➢ potential re-audits
➢ risk management issues and/ or incidents
➢ service priorities
➢ local guidelines
➢ identified deficiencies in care
➢ topics of clinician interest

Assurance Levels

A key aspect of undertaking a clinical audit is the ability to deliver assurance as to how we are performing. Monthly outcome reports are shared with each division for discussion at their Quality Governance Board meetings. Here the group can agree any risks that require escalation to the Clinical Effectiveness Group, to which an amalgamated quarterly report is then included on the agenda.

National audit report reviews are included on the agenda of the Clinical Effectiveness Group once approved by the Division. Local audit findings are shared at an appropriate forum, many at our Clinical Audit and Quality Forums. This is where outcomes are considered by the Project Lead and where a risk is identified, it is shared with the Divisional Quality Governance Board who will decide if the risk can be addressed within the group or needs escalation to the Clinical Effectiveness Group.

Once an audit has been undertaken it is given a level of assurance by calculating the individual ratings against its standards. An overall level of assurance for the audit project is then determined using a define matrix (see table below).

| GREEN | ≥95% | AMBER | 75-94% | RED | ≤74% |

FULL	SIGNIFICANT
To be used when each standard has achieved a score of 95% or above and is rated Green.	To be used when there are only Green and Amber rated findings.
LIMITED	**VERY LIMITED**
To be used when there is a small ratio of Red and Amber to Green rated findings.	To be used when the ratio of Red rated findings are greater than the Amber and Green.

During 2022/23 the outcome for **38** local clinical audits were submitted to the Divisional Quality Boards.

Division	Full	Significant	Limited	Very Limited	Total
Clinical Support Services	-	4 (80%)	1 (20%)	-	5
Corporate	1 (50%)	-	1 (50%)	-	2
Emergency Department	-	1 (33%)	-	2 (67%)	3
Integrated Care	-	1 (20%)	3 (60%)	1 (20%)	5
Medicine	1 (20%)	2 (40%)	2 (40%)	-	5
Surgery	1 (7%)	4 (50%)	7 (29%)	2 (14%)	14
Women & Children	-	2 (50%)	2 (50%)	-	4
Total	3 (8%)	14 (37%)	16 (42%)	5 (13%)	38

Most audits undertaken are where it is perceived that there is room for improvement, therefore it is anticipated that the levels of assurance will often be limited or very limited. Once the assurance level is assigned the Project Lead will advise on the risk level (not all failed measures present a risk). Actions are allocated for audits with limited assurance. The actions are captured in AMaT and monitored via division quality board meetings to ensure timely completion. Risks are monitored via the Datix risk register and risk process. Once actions are complete consideration is given as to whether a re-audit is appropriate to demonstrate improvements and assurance levels.

Sharing & Learning

Outcomes of audits that have been undertaken within the Trust are shared at specialty audit meetings called "Clinical Audit & Quality Forums" (CA&QF), which are attended by a range of staff groups.

Most of these meetings are held quarterly, although smaller specialties may meet twice a year. These meetings are to enable discussions to take place regarding the findings of an audit, as well as an opportunity for the proposal of recommendations leading to agreed action plans.

Each specialty will utilise a dedicated part of the agenda for sharing other outcomes or learning discussions such as quality improvement projects, morbidity and mortality and general service updates. Although clinical audit remains the focal point of these meetings, it has provided specialties with a forum to discuss other key items.

Agendas are circulated within the relevant specialties but are also disseminated to a wider audience to reach maximum engagement. Each agenda is made available from the clinical audit department and is also published on our

dedicated internal microsite along with copies of presentations following each meeting. Attendance records are also kept which is often used by clinicians for their revalidation.
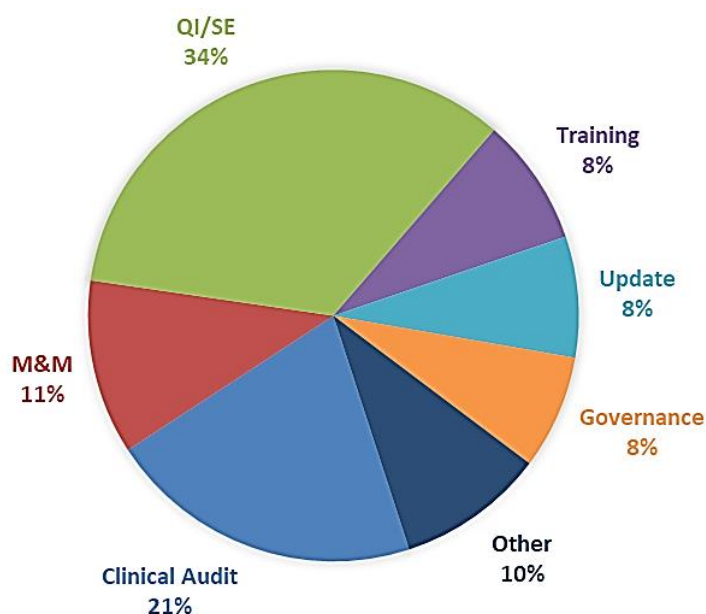
Details of presentations are stored within the project on AMaT; a copy is also available on the local computer drives for access to staff, and they are uploaded to the Clinical Audit microsite following the event.

At each meeting an attendance sheet is in use and attendees can use attendance to support their engagement in CA&QI as part of their appraisal and revalidation.

During 2022/23 forums were held mainly online to ensure activity could still be shared and discussed whilst social distancing guidance was adhered to.

In total, **47 (21%)** clinical audits were presented across all Clinical Audit & Quality Forums during 2022/23. Findings from Service Evaluations, Quality Improvements and Mortality & Morbidity reviews were also discussed at this forum.

Graph 1: Percentage of items presented during 2022/23

Events

Clinical Audit & Quality Improvement Event 2022

The Clinical Audit Department hosted its 6th "Clinical Audit & Quality Improvement Event" on 8 November 2022 at Pinewood Education Centre, Stepping Hill Hospital.

These events aim to celebrate the clinical audit and quality improvement work carried out by colleagues across the Trust. During the event there is a programme of presentations from a variety of speakers. There is also a poster display and competition. Staff are encouraged to vote for the best posters and prizes are awarded. The event is open to all Trust staff.

This year's event was hosted by Dr Andrew Loughney (Medical Director) and co-chaired by Audit Leads; Miss Natasha Henley and Dr Charlotte Filer.

Projects presented included Hydration Monitoring, Falls Prevention, Pregnancy in Diabetes, National Audits in T&O, VTE Prevention and Smoking Cessation.

Winners of the poster competition were;

➢ **1st Place** "The Treehouse Children's Unit - Food and Nutrition Project" *by Jessie Dhaliwal*

➢ **2nd Place** "Evaluating Patient Satisfaction of the Laurel Suite Pharmacy Service" *by Laura Hulse, Louise Abedin & Rawan Kouzali*

➢ **3rd Place (Joint)** "Improving Communication: Distanced not Distant" *by Chris Cooper, Jane Connell, Katie Beddows, Francine Lewis, Melissa Diggle, Emma Bowden, Jane Collings, Shelly Johnson & Natalie Kilroy*

➢ **3rd Place (Joint)** "Patient Related Experience Measure 2021 Results" *by Katie Beddows & Chris Cooper*

Thank you to everyone who participated.

Pictured: Dr Andrew Loughney with 1st Place Winner; Jessie Dhaliwal

Awards

Over the years, the Clinical Audit Support Centre (CASC) have organised a wide range of awards and competitions to acknowledge those individuals and teams that do such a great job to promote clinical audit and improvement in the NHS.

This year we were delighted to be awarded "Clinical Audit Team of The Year" as part of their inaugural awards to celebrate the work carried out by local/national clinical audit staff and teams.

Our team was recognised for a prominence on Twitter (@SFTAudit) and for organising our internal event to promote clinical audit and quality improvement. Operational Manager Janette Hunt was also commended for her work in chairing our regional clinical audit network in a voluntary capacity.

The Team was officially presented with the award at the AMaT Clinical Audit Conference on 18 May 2023.

Clinical Audit Team of the Year 2022

Abbreviations and Glossary

AMaT – Audit Management and Tracking
Electronic system used at Stockport NHS Foundation Trust to register and monitor clinical audit activity.

AMU – Acute Medical Unit
The first point of entry for patients who are referred to hospital as emergencies by their GP or who require admission from the emergency department.

Audit Lead
Leading on the approval and overall management/escalation of clinical audit activity within their respected area

CA - Clinical Audit
A process that has been defined as "a quality improvement process that seeks to improve patient care and outcomes through systematic review of care against explicit criteria and the implementation of change".

CA&QF - Clinical Audit & Quality Forums
Quarterly meetings held by Stockport NHS Foundation Trust for most core specialty areas to enable the opportunity to present and discuss clinical audit results.

CA&QI – Clinical Audit and Quality Improvement
A regular event held by the clinical audit department aimed to celebrated both quality audit and quality improvement work at Stockport NHS FT.

CAAW – Clinical Audit Awareness Week
Organised by HQIP to enable Trusts, health boards, audit staff, clinicians, and others to celebrate the best in clinical audit and encourage collaboration in improving patient care.

CEG - Clinical Effectiveness Group
A monthly meeting held by Stockport NHS Foundation to provide information and assurance that the Trust is safety managing all issues relating to quality governance and risk management.

DoH – Department of Health
A department of Her Majesty's Government, responsible for government policy on health and adult social care matters in England

ECM – Enhanced Care Management
Provided when someone has clinically or socially complex needs.

ED – Emergency Department
A department which deals with genuine life-threatening emergencies

ePMA – Electronic Prescribing and Medicines Administration
A system aimed to improve patient safety by reducing prescribing and administration errors.

GI – Gastrointestinal
Referring collectively to the stomach and the small and large intestine

Governance Lead
Leading on the development of a robust integrated governance framework for their respected area

HQIP - Healthcare Quality Improvement Partnership
Established in April 2008 to promote quality in healthcare, and to increase the impact that clinical audit has on healthcare quality improvement.

Local Audit
A clinical audit which is undertaken based on local standards.

MUST - Malnutrition Universal Screening Tool
A screening tool to identify adults, who are malnourished, at risk of malnutrition (undernutrition), or obese. It also includes management guidelines which can be used to develop a care plan.

National Audit
A clinical audit which is undertaken based on national standards.

NatSSIPs - National safety standards for Invasive procedures
Published by NHS England in September 2015, to help NHS organisations provide safer care and to reduce the number of patient safety incidents related to invasive procedures in which surgical Never Events can occur.

NBOCA - National Bowel Cancer Audit
The National Bowel Cancer Audit (NBOCA) aims to measure the quality and outcomes of care for patients diagnosed for the first time with bowel cancer in NHS hospitals in England and Wales, and so support colorectal units in the UK to improve the quality of the care received by patients.

NCAPOP - National Clinical Audit Programme
A national healthcare quality improvement programme covering two main sub-programmes: the National Clinical Audit Programme and the Clinical Outcome Review Programmes

NCEPOD - National Confidential Enquiry into Patient Outcome and Death
A registered charity: that assists in maintaining and improving standards of medical and surgical care for the benefit of the public.

NEIAA - National Early Inflammatory Arthritis Audit
The NEIA audit aims to improve the quality of care for people living with inflammatory arthritis, collecting information on all new patients over the age of 16 in specialist rheumatology departments in England and Wales.

NICE – National Institute for Health and Care Excellence
Provider of evidence-based recommendations developed by independent committees, including professionals and lay members, and consulted on by stakeholders.

NHS – National Health Service
Publicly funded national healthcare system for England

NOGCA - National Oesophago-Gastric Cancer Audit
The aim of the National Oesophago-Gastric Cancer Audit (NOGCA) is to measure the quality and outcomes of care for patients diagnosed for the first time with oesopahageal or gastric cancer in NHS hospitals in England and Wales, and so support OG cancer units in the UK to improve the quality of the care received by patients.

QI – Quality Improvement
The continual actions to improve outcomes for service users and to develop the workforce that supports them using systematic methods.

RCEM - Royal College of Emergency Medicine
A professional membership organisation and registered charity representing A&E and emergency medicine.

Re-Audit
The undertaking of a successive clinical audit to review compliance with the previous results.

SFT – Stockport Foundation Trust
NHS Foundation Trust which runs Stepping Hill Hospital and other specialist centres, as well as community health services for Stockport.

WHO – World Health Organisation
Established in 1948 the World Health Organisation is a specialised agency of the United Nations that is concerned with international public health.

WTE – Whole Time Equivalent
This refers to a unit that indicates the workload of an employed person. For example, a WTE of 1.00 is equivalent to a full-time worker.

Appendix 1: Forward Plan Audits

The tables below indicate the local and national clinical audit projects that were registered during 2022/23 which formed part of the forward plan. Where available, the risk and assurance levels are indicated.

National audits will usually appear as 'pending' as they tend to be received back from the national teams more than 12 months after data collection.

Clinical Support Services: Local Audits (7)

Speciality	Approved	Reference	Title	Lead	Assurance	Risk
Various	13/01/2023	CSS/CA/2022-23/01	NatSSIPs: Division of Clinical Support Services - 2022/23	Gordon Yuill	Significant	Low
Endoscopy	27/05/2022	ENDO/CA/2022-23/02	Endoscopy Consent Audit - 2022	Sharmaine Anker	Significant	Low
Endoscopy	05/05/2022	ENDO/CA/2022-23/01	JAG Accreditation Audits - 2022/23	Sharmaine Anker	Pending	Pending
Pharmacy	31/05/2022	PHAR/CA/2022-23/05	Antimicrobial Point Prevalence Re-audit 2022	Joanne Shatwell	Limited	Moderate
Pharmacy	20/12/2017	CA-PHAR-01	Safe and Secure Handling of Medicines (Duthie) Audit	Suman Gupta	Significant	Low
Radiology	13/10/2022	RADI/CA/2022-23/03	2-week rule CT scans ordered by GP to assess for pancreatic cancer- are they meeting the criteria for referral?	Amr Helal	Pending	Pending
Radiology	11/05/2022	RADI/CA/2022-23/01	Radiology Consent Audit - 2022	Kristy Williams	Significant	Low

Clinical Support Services: National Audits (2)

Speciality	Approved	Reference	Title	Lead	Assurance	Risk
Pathology	08/07/2022	PATH/CA/2022-23/03	National Comparative Audit of Blood Sample Collection & Labelling (NCABT) - 2022	Brendan Devine	Pending	Pending
Pathology	08/04/2022	PATH/CA/2022-23/01	Serious Hazards of Transfusion (SHOT) - 2022	raisa zaman	Pending	Pending

Corporate: Local Audits (4)

Speciality	Approved	Reference	Title	Lead	Assurance	Risk
Corporate Nursing	27/05/2022	NURS/CA/2022-23/05	Mattress Audit - 2022/23	Lisa Gough	Pending	Pending
Corporate Nursing	22/11/2021	NURS/CA/2022-23/04	Mixed Sex Accommodation Annual Audit - 2022	Emma Rogers	Pending	Pending
Corporate Nursing	27/05/2022	NURS/CA/2022-23/06	MUST Audit 2022/2023 (Q2 & Q4)	Adrienne Quirk	Limited	Moderate
Various	25/08/2022	MULTI/CA/2022-23/01	HSMR alert for UTI	Natasha Henley	Full	None

Corporate: National Audits (2)

Speciality	Approved	Reference	Title	Lead	Assurance	Risk
Infection Prevention	13/04/2022	IP/CA/2022-23/01	Mandatory Surveillance of Healthcare Associated Infection (HCAI) - 2022/23	Nesta Featherstone	Pending	Pending
Safeguarding (Adults)	13/04/2022	ASAFE/CA/2022-23/01	Learning from Lives and Deaths: People with a Learning Disability and Autistic People (LeDeR) - 2022	Thomas ParkerEvans	Pending	Pending

Emergency Department: Local Audits (5)

Speciality	Approved	Reference	Title	Lead	Assurance	Risk
Emergency Department	27/05/2022	ED/CA/2022-23/11	ED Consent Audit - 2022	Calum Harker	Very Limited	Moderate
Emergency Department	08/08/2022	ED/CA/2022-23/12	Management of raised ketones in the ED	Thulasi Kumar Katta	Pending	Pending
Emergency Department	06/05/2022	ED/CA/2022-23/08	NatSSIPs: Division of Emergency Medicine - 2022/23	Gordon Yuill	Very Limited	Low
Emergency Department	22/04/2022	ED/CA/2022-23/05	Results Governance Audit 2022 - Emergency Department	Andrew Loughney	Significant	Low
Emergency Department	16/05/2022	ED/CA/2022-23/09	Sepsis identification and treatment for Service Users presenting as emergencies 2022-23	Lucy Grimwade	Pending	Pending

Emergency Department: National Audits (6)

Speciality	Approved	Reference	Title	Lead	Assurance	Risk
Emergency Department	04/05/2022	ED/CA/2022-23/07	Assessing for Cognitive Impairment in Older People (RCEM) - 2022/23	Souvik Das	Pending	Pending
Emergency Department	27/04/2021	ED/CA/2021-22/03	Consultant Sign Off (RCEM) - 2021/22	Callum Haig	Pending	Pending
Emergency Department	23/07/2021	ED/CA/2021-22/13	Infection Prevention and Control (RCEM) - 2021/22	Anas Mohamed	Pending	Pending
Emergency Department	04/05/2022	ED/CA/2022-23/06	Mental Health: Self Harm (RCEM) - 2022/23	Sivanthi Sivanadarajah	Pending	Pending
Emergency Department	10/06/2021	ED/CA/2021-22/06	Pain In Children (RCEM) - 2021/22	Mahu Reddy	Pending	Pending
Emergency Department	13/04/2022	ED/CA/2022-23/04	Trauma Audit and Research Network (TARN) - 2022/23	Mahu Reddy	Pending	Pending

Integrated Care: Local Audits (6)

Speciality	Approved	Reference	Title	Lead	Assurance	Risk
Acute Medicine	27/05/2022	ACUT/CA/2022-23/08	Acute Medicine Consent Audit - 2022	Stephen Bonny	Significant	Moderate
Acute Medicine	27/03/2022	ACUT/CA/2022-23/02	Ambulatory Management of Hypertension on MSDEC	Denise Conyard	Limited	Low
Acute Medicine	13/03/2023	ACUT/CA/2022-23/16	DVLA Advice For Patients Presenting With TLOC (Re-Audit)	Rezgui Amina	Very Limited	Moderate
Acute Medicine	16/05/2022	ACUT/CA/2022-23/07	VTE Root Cause Analysis 2022-23	Chaminda Jayawarna	Pending	Pending
Various	22/04/2022	IC/CA/2022-23/03	NatSSIPs: Division of Integrated Care - 2022/23	Gordon Yuill	Limited	Moderate
Various	22/04/2022	IC/CA/2022-23/02	Results Governance Audit 2022 - Integrated Care	Sabina Luszczak	Limited	Moderate

Integrated Care: National Audits (9)

Speciality	Approved	Reference	Title	Lead	Assurance	Risk
Acute Medicine	21/07/2021	ACUT/CA/2021-22/12	Community Acquired Pneumonia (NCEPOD Study)	Svetlana Arangelova	Pending	Pending
Acute Medicine	20/07/2021	ACUT/CA/2021-22/05	Epilepsy (NCEPOD Study)	Stephen Bonny	Pending	Pending
Acute Medicine	13/04/2022	ACUT/CA/2022-23/05	Society for Acute Medicine Benchmarking Audit (SAMBA) - 2022	Svetlana Arangelova	Full	None
Adult Therapies	13/04/2022	ATHER/CA/2022-23/01	National Diabetes Foot Care Audit (NDFA) - 2022/23	Aaron Smith	Pending	Pending
Adult Therapies	20/06/2022	ATHER/CA/2022-23/02	UK Parkinson's Audit 2022 (Community Neuro Rehabilitation Service)	Christine Hyde	Pending	Pending
Neighbourhood Services	13/04/2022	COMM/CA/2022-23/01	Pulmonary Rehabilitation Audit (NACAP) - 2022/23	Karen Brown	Pending	Pending
Specialist Palliative Care Nursing	04/05/2022	SPCN/CA/2022-23/03	End of Life Care (NCEPOD Study)	Rebecca Singh Curry	Pending	Pending
Specialist Palliative Care Nursing	04/05/2022	SPCN/CA/2022-23/02	National Audit of Care at the End of Life (NACEL) Round 4 - 2022	Elaine Watson	Pending	Pending
Specialist Services	13/04/2022	SS/CA/2022-23/01	Fracture Liaison Service Database (FLS-DB) - 2022	Charlotte Lindsay	Pending	Pending

Medicine: Local Audits (5)

Speciality	Approved	Reference	Title	Lead	Assurance	Risk
Cardiology	30/05/2022	CARD/CA/2022-23/05	Cardiology Consent Audit - 2022	Helen Goodwin	Limited	Moderate
Various	22/04/2022	M&CS/CA/2022-23/02	NatSSIPs: Division of Medicine & Clinical Support - 2022/23	Gordon Yuill	Significant	Low
Various	22/04/2022	M&CS/CA/2022-23/01	Results Governance Audit 2022 - Medicine & Clinical Support	Andrew Loughney	Limited	Moderate
Ophthalmology	30/05/2022	OPHT/CA/2022-23/03	Ophthalmology Consent Audit - 2022	Imad Wafaie	Significant	Low
Oral and Maxillofacial	30/05/2022	ORAL/CA/2022-23/01	Oral & Maxillofacial Consent Audit - 2022	Sara Atia	Full	None

Medicine: National Audits (16)

Speciality	Approved	Reference	Title	Lead	Assurance	Risk
Cardiology	01/04/2022	CARD/CA/2022-23/03	Myocardial Ischaemia National Audit Project (MINAP) - 2022/23	Rajavarma Viswesvaraiah	Pending	Pending
Cardiology	09/04/2021	CARD/CA/2022-23/02	National Audit of Cardiac Rehabilitation (NACR) - 2022	Sue McLellan	Pending	Pending
Cardiology	30/03/2022	CARD/CA/2022-23/01	National Audit of Cardiac Rhythm Management (CRM) - 2022/23	Ruth O'Rourke	Pending	Pending
Cardiology	01/04/2022	CARD/CA/2022-23/04	National Heart Failure Audit (NHFA) - 2022/23	Mark Scott	Pending	Pending
Diabetes & Endocrinology	01/04/2022	DIAB/CA/2022-23/01	National Diabetes Audit (NDA Core) - 2022/23	Richard Bell	Pending	Pending
Diabetes & Endocrinology	01/04/2022	DIAB/CA/2022-23/02	National Diabetes Inpatient Safety Audit (NDISA) - 2022/23	Richard Bell	Pending	Pending
DMOP	04/05/2022	DMOP/CA/2022-23/03	National Audit Of Dementia (NAD) - 2022	Peter Ngoma	Pending	Pending
DMOP	01/04/2022	DMOP/CA/2022-23/01	National Audit of Inpatient Falls (NAIF) - 2022	Anjali Prasad	Pending	Pending
DMOP	20/04/2022	DMOP/CA/2022-23/02	UK Parkinson's Audit - 2022	Deeksha Sangars	Pending	Pending
General Medicine	01/04/2022	GMED/CA/2022-23/01	National Cardiac Arrest Audit (NCAA) - 2022/23	Ian Blakeley	Pending	Pending

Respiratory	01/04/2022	RESP/CA/2022-23/01	Adult Asthma Secondary Care (NACAP) - 2022/23	Alex Tempowski	Pending	Pending
Respiratory	01/04/2022	RESP/CA/2022-23/02	National COPD Secondary Care Audit (NACAP) - 2022/23	Pauline Holmes	Pending	Pending
Respiratory	01/04/2022	RESP/CA/2022-23/03	National Lung Cancer Audit (NLCA) - 2022	Suman Das	Pending	Pending
Respiratory	03/01/2023	RESP/CA/2022-23/04	National Respiratory Support Audit	Neela Surange	Pending	Pending
Rheumatology	01/04/2022	RHEU/CA/2022-23/01	National Early Inflammatory Arthritis Audit (NEIAA) - 2022/23	Charlotte Filer	Pending	Pending
Stroke	01/04/2022	STRO/CA/2022-23/01	Sentinel Stroke National Audit Programme (SSNAP) - 2022/23	Shivakumar Krishnamoorthy	Pending	Pending

Surgery: Local Audits (17)

Speciality	Approved	Reference	Title	Lead	Assurance	Risk
Anaesthetics	27/05/2022	ANAE/CA/2022-23/07	Anaesthesia For Non-Obstetric Procedures Consent Audit - 2022	Stuart Knowles	Limited	Low
Anaesthetics	27/05/2022	ANAE/CA/2022-23/06	Anaesthesia For Obstetric Procedures Consent Audit - 2022	Stuart Knowles	Significant	Low
Anaesthetics	27/05/2022	ANAE/CA/2022-23/08	Compliance with Stop Before You Block (STYB) campaign recommendations in the performance of unilateral regional anaesthesia blocks - re-audit	Stuart Knowles	Very Limited	Moderate
Audiology	28/07/2022	AUDI/CA/2022-23/01	Audiology Hearing Test Audit	Lucy Hughes	Full	None
Critical Care	24/02/2022	ICU HDU/CA/2022-23/01	CCG03 - Recording of NEWS2 for Unplanned Critical Care Admissions (CQUIN 2022/23)	Matthew Jackson	Limited	Low
Critical Care	06/05/2022	ICU HDU/CA/2022-23/05	Trust AKI Audit	Madeleine Barber	Very Limited	High
Various	22/04/2022	SGI&CC/CA/2022-23/02	NatSSIPs: Division of Surgery - 2022/23	Gordon Yuill	Significant	None
Various	22/04/2022	SGI&CC/CA/2022-23/01	Results Governance Audit 2022 - Surgery	Andrew Loughney	Limited	Moderate
ENT	27/05/2022	ENT/CA/2022-23/03	ENT Consent Audit - 2022	Milan Rudic	Significant	Low
General Surgery	27/05/2022	GSUR/CA/2022-23/06	General Surgery Consent Audit - 2022	Stacie Hodge	Limited	Moderate
General Surgery	27/05/2022	GSUR/CA/2022-23/07	Post-operative Surgical Site Infections Audit 2022	Madan Mohan Palliyil	Pending	Pending
General Surgery	09/06/2022	GSUR/CA/2022-23/08	Surgical Site Infection in ERAS Colorectal Patients	Rebecca Edwards	Pending	Pending
Pain	27/05/2022	Pain/CA/2022-23/01	Pain Consent Audit - 2022	Thomas Walton	Significant	Low
Spine	24/02/2022	Spine/CA/2022-23/01	PSS02 - High Quality Shared Decision Making Conversations In Specific Specialised Pathways To Support Recovery (CQUIN 2022/23)	Vik Kapoor	Pending	Pending
Trauma & Orthopaedics	09/12/2022	T&O/CA/2022-23/22	Deaths following fractured NOF Audit	Simon Ghalayini	Limited	Moderate
Trauma & Orthopaedics	30/05/2022	T&O/CA/2022-23/07	Trauma & Orthopaedics Consent Audit - 2022	Jack Turnbull	Limited	None
Urology	27/05/2022	UROL/CA/2022-23/04	Urology Consent Audit - 2022	Chris Richards	Limited	Low

Surgery: National Audits (15)

Speciality	Approved	Reference	Title	Lead	Assurance	Risk
Anaesthetics	07/12/2021	ANAE/CA/2021-22/19	National Emergency Laparotomy Audit (NELA) - (Dec 21 - Nov 22)	Katie Gott	Pending	Pending
Anaesthetics	07/04/2022	ANAE/CA/2022-23/03	Perioperative Quality Improvement Programme (PQIP) - 2022/23	Matthew Jackson	Pending	Pending
Critical Care	07/04/2022	ICU HDU/CA/2022-23/02	Adult Critical Care Case Mix Programme (CMP) - 2022/23	Hywel Garrard	Pending	Pending
Gastroenterology	21/07/2021	GAST/CA/2021-22/09	Crohn's Disease (NCEPOD Study)	Mohsin Gangi	Pending	Pending
Gastroenterology	07/04/2022	GAST/CA/2022-23/03	Inflammatory Bowel Disease (IBD) Registry - (Jan - Dec 2022)	James Morgan	Pending	Pending
General Surgery	07/04/2022	GSUR/CA/2022-23/03	National Bowel Cancer Audit (NBOCA) - 2022/23	Qasim Humayun	Pending	Pending
General Surgery	07/04/2022	GSUR/CA/2022-23/04	National Oesophago-Gastric Cancer Audit (NOGCA) - 2022/23	Ashok Menon	Pending	Pending
Trauma & Orthopaedics	07/04/2022	T&O/CA/2022-23/02	British Spine Registry (BSR) - 2022/23	Prabhakar Rao	Pending	Pending
Trauma & Orthopaedics	07/04/2022	T&O/CA/2022-23/03	Elective Surgery: Patient Reported Outcome Measures (PROMs) - 2022/23	David Sands Johnson	Pending	Pending
Trauma & Orthopaedics	07/04/2022	T&O/CA/2022-23/04	Mandatory Surveillance Of Surgical Site Infection (SSI) In Orthopaedic Surgery - 2022/23	Simon Ghalayini	Pending	Pending
Trauma & Orthopaedics	01/04/2022	T&O/CA/2022-23/01	National Hip Fracture Database (NHFD) - 2022	Simon Ghalayini	Pending	Pending
Trauma & Orthopaedics	07/04/2022	T&O/CA/2022-23/05	National Joint Registry (NJR) - 2023	David Sands Johnson	Pending	Pending
Urology	26/03/2022	UROL/CA/2022-23/01	Muscle Invasive Bladder Cancer at Transurethral REsection of Bladder Audit (MITRE) - 2022	Ijeoma Chibuzo	Pending	Pending
Urology	07/04/2022	UROL/CA/2022-23/02	National Prostate Cancer Audit (NPCA) - 2022/23	Richard Brough	Pending	Pending
Urology	06/05/2022	UROL/CA/2022-23/08	Testicular Torsion (NCEPOD Study)	Paul Cleaveland	Pending	Pending
Anaesthetics	07/04/2022	ANAE/CA/2022-23/03	Perioperative Quality Improvement Programme (PQIP) - 2022/23	Matthew Jackson	Pending	Pending

Women & Children: Local Audits (7)

Speciality	Approved	Reference	Title	Lead	Assurance	Risk
Various	22/04/2022	WC&DS/CA/2022-23/02	NatSSIPs: Division of Women, Children & Diagnostic Services - 2022/23	Gordon Yuill	Limited	Low
Various	22/04/2022	WC&DS/CA/2022-23/01	Results Governance Audit 2022 - Women, Children & Diagnostics	Andrew Loughney	Limited	Moderate
Gynaecology	11/05/2022	GYNA/CA/2022-23/03	Obstetrics & Gynaecology Consent Audit - 2022	Shivani Batra	Significant	Moderate
Obstetrics and Midwifery	01/06/2022	OBST/CA/2022-23/09	Caesarean sections at full dilatation Re-audit	Rachel Owen	Pending	Pending
Obstetrics and Midwifery	11/05/2021	OBST/CA/2021-22/04	Safeguarding Management Plans and Communication Re-audit	Heather Millward	Pending	Pending
Obstetrics and Midwifery	30/03/2022	OBST/CA/2022-23/07	Twin Pregnancy audit	Kruthi Ramanna	Significant	Moderate
Paediatrics (Acute)	11/07/2022	PAED/CA/2022-23/08	Standards for Short-Stay Paediatric Assessment Unit (RCPCH)	Emily Coup	Pending	Pending

Women & Children: National Audits (14)

Speciality	Approved	Reference	Title	Lead	Assurance	Risk
Gynaecology	06/05/2022	GYNA/CA/2022-23/01	Endometriosis (NCEPOD Study)	Suku George	Pending	Pending
Neonatal Care	28/04/2022	NEO/CA/2022-23/01	National Neonatal Audit Programme (NNAP) - 2022/23	Carrie Heal	Pending	Pending
Obstetrics and Midwifery	08/04/2022	OBST/CA/2022-23/06	Maternal Mortality Surveillance and Confidential Enquiry (MBRRACE) - 2022/23	Sonia Chachan	Pending	Pending
Obstetrics and Midwifery	08/04/2022	OBST/CA/2022-23/02	National Maternity and Perinatal Audit (NMPA) 2018-19 - 2022/23	Sonia Chachan	Pending	Pending
Obstetrics and Midwifery	08/04/2022	OBST/CA/2022-23/05	National Perinatal Mortality Review Tool (MBRRACE) - 2022/23 - Fourth annual report	Lucy Tomlinson	Pending	Pending
Obstetrics and Midwifery	08/04/2022	OBST/CA/2022-23/01	National Pregnancy in Diabetes (NPID) - 2022/23	Jane O'Brien	Pending	Pending
Obstetrics and Midwifery	08/04/2022	OBST/CA/2022-23/04	Perinatal Confidential Enquiries (MBRRACE) - 2022/23	Sonia Chachan	Pending	Pending
Obstetrics and Midwifery	08/04/2022	OBST/CA/2022-23/03	Perinatal Mortality Surveillance (MBRRACE) - 2022/23	Sonia Chachan	Pending	Pending

Paediatrics (Acute)	09/02/2023	PAED/CA/2022-23/10	National Asthma and COPD Audit Programme (NACAP) - Children and Young People Asthma 2019-2020	Alison Simmonett	Pending	Pending
Paediatrics (Acute)	08/04/2022	PAED/CA/2022-23/02	National Audit of Seizures and Epilepsies for Children and Young People (Epilepsy 12) - 2022/23	Simon Nicol	Pending	Pending
Paediatrics (Acute)	02/05/2023	PAED/CA/2022-23/14	National Paediatric Diabetes Audit (NPDA) - 2019-20	Dawn Welsford	Pending	Pending
Paediatrics (Acute)	08/04/2022	PAED/CA/2022-23/03	National Paediatric Diabetes Audit (NPDA) - 2022/23	Chris Cooper	Pending	Pending
Paediatrics (Acute)	15/03/2023	PAED/SE/2022-23/11	National Paediatric Diabetes Audit (NPDA) - 2022/23 (2021-22 data)	Chris Cooper	Pending	Pending
Paediatrics (Acute)	08/04/2022	PAED/CA/2022-23/05	Transition from Child to Adult Services (NCEPOD Study)	Elizabeth Newby	Pending	Pending

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