



Stockport  
NHS Foundation Trust

# ANNUAL REPORT

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Clinical Audit Department  
April 2023 - March 2024

**Stockport NHS Foundation Trust is committed to delivering improvements through the systematic use of clinical audit.**

This document was approved by the  
Clinical Effectiveness Group on **14<sup>th</sup> June 2024**.

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## Foreword from the Medical Director

**I am delighted to introduce our clinical audit annual report for the year ending March 2024.**

Clinical audit serves as the cornerstone in providing assurance of best practices and identifying areas for improvement within service delivery. This process is further strengthened by the application of quality improvement methodologies to address identified concerns.

At Stockport NHS Foundation Trust, our commitment to clinical audit excellence remains consistent. This year has seen a notable surge in trust priority clinical audit forward programme registrations identified through our robust risk management processes, reflecting our dedication to improving the quality of clinical audits.

In addition to our clinical audit forward programme activities, we actively participated in the National Clinical Audit and Patient Outcomes Programme (NCAPOP) and the NHS England Quality Accounts mandatory audits.

Each specialty continues to hold their Clinical Audit & Quality Improvement Forums, supported by our dedicated Clinical Audit Team. These forums serve as comprehensive platforms, encompassing not only clinical audit activities but also governance-related topics such as morbidity and mortality, along with ongoing quality improvement projects. Within these forums, in-depth discussions occur, allowing for the thorough assessment and detailed discussion of audit assurance levels and risk levels.

Monthly Clinical Effectiveness Group Meetings take place to bring together clinical and operational leads from all divisions, fostering collaboration and ensuring a comprehensive evaluation of clinical audit activities. On a quarterly basis, a comprehensive breakdown of clinical audit work is presented during these meetings, followed by a thorough and supportive evaluation of clinical audit activity. This platform facilitates the exchange of ideas across divisions and has strengthened our ability to provide assurance to our trust's Quality Committee.

Through the utilisation of our AMaT software, we diligently track audit progress and proactively identify emerging trends. Quarterly updates to the system afford us the opportunity to enhance its functionality and tailor it to the evolving needs of our organisation.

I extend my sincere appreciation to the dedicated staff across all specialties who have contributed their time and expertise to this year's audit activities. Special recognition is due to the members of the Clinical Effectiveness Group and the Clinical Audit Leads for their consistent leadership and unwavering commitment to advancing our clinical audit activity despite the challenges posed by demanding workloads and time constraints.



A handwritten signature in black ink, which appears to read 'Andrew D. Loughney'.

**Andrew D. Loughney**  
Medical Director  
Stockport NHS Foundation Trust

*May 2024*

## Executive Summary

**Stockport NHS Foundation Trust is dedicated to providing high-quality, evidence-based care to its patients, recognising Clinical Audit as a crucial instrument in achieving this objective.**

This summary offers an overview of clinical audit activity conducted at Stockport NHS Foundation Trust during 2023/24. In this period, the trust maintained its focus on the realignment of audit activity initiated in the previous year, prioritising projects registered as part of the annual 'Forward Programme'. These audits are considered a top priority within the Trust.

During 2023/24 there were a total of 171 clinical audit projects registered with the Clinical Audit Department as part of the Forward Programme. This activity spanned across 7 divisional areas and comprised of **65%** local audits and **35%** national audits.

**Table 1: Forward Plan Registrations**

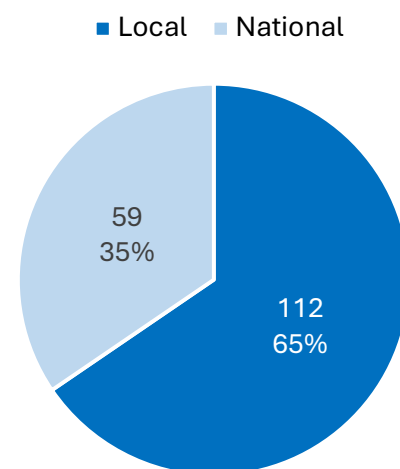
Division	Total Audits	Local Audits	National Audits
Clinical Support Services	12 (7%)	9 (75%)	3 (25%)
Corporate	8 (5%)	6 (75%)	2 (25%)
Emergency Department	8 (5%)	3 (38%)	5 (63%)
Integrated Care	19 (11%)	12 (63%)	7 (37%)
Medicine	36 (21%)	22 (61%)	14 (39%)
Surgery	45 (26%)	30 (67%)	15 (33%)
Women & Children	43 (25%)	30 (70%)	13 (30%)
<b>Total</b>	<b>171</b>	<b>112 (65%)</b>	<b>59 (35%)</b>

A full list of registered projects can be found in **Appendix A** and **Appendix B** of this report.

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.

Throughout the year, specialties from Stockport NHS FT hosted and facilitated Clinical Audit & Quality Forums sessions to exchange findings, conduct risk assessments on clinical audits, support learning and to agree the actions required for recommendations made where appropriate. Topics covered during these sessions extended beyond clinical audits to encompass Quality Improvement projects, Morbidity & Mortality (M&M) reviews, Governance discussions, and presentations by suppliers.

All audits are assigned an assurance level, undergo a risk assessment, and are subsequently presented at the divisional quality group meetings. Following this, they are discussed at the clinical effectiveness meeting and reported to quality committee through the key issues report.



## 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 due to its focus on clinical audit activity only.

Since our last report, the team has undergone a restructure which meant that during 2023/24 the department consisted of **13** members at **11.68 WTE**.

**Table 2: Department Structure** (as of 31 March 2024)

Band	Role	Name	Hours	WTE
8a	Head of Clinical Audit	Janette Hunt	37.50	1.00
6	Clinical Audit Manager	Joanna Rodgers	37.50	1.00
		David Flanagan	37.50	1.00
5	Clinical Audit Facilitator	Dawn Welsford	37.50	1.00
		Gareth Longstaff	37.50	1.00
		Audrey Ritchie	37.50	1.00
4	Clinical Audit Data Officer	Hugh Ayerst	30.00	0.80
		Saman Izadyar	30.00	0.80
		Amanda Mellinson	37.50	1.00
		JoAnn Lowe	37.50	1.00
2	Clinical Audit Admin Assistant	Natalie Waddington	37.50	1.00
		Tracey Cashman	18.00	0.48
		Christine O'Brien	22.50	0.60
			438.00	11.68

## 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 2023/24 are indicated below.

**Tabel 3: Clinical Audit Leads**

Speciality	Audit Lead	Speciality	Audit Lead
<b>Clinical Support Services</b>		<b>Medicine</b>	
Endoscopy	Sharmaine Anker	Cardiology	Helen Goodwin
Pathology	Dr Mugtaba Dafalla	Diabetes	Dr Richard Bell
Radiology	Dr Victoria Jackson	DMOP	Unoccupied
Outpatients	Sarah Newlove	Haematology	Dr Srivasavi Dukka
Pharmacy	Dr Paul Buckley	Ophthalmology	Manhal Gurgia
		Orthoptics	Sara Lea
<b>Corporate</b>		Oral / Max Fax.	Unoccupied
Corporate Services (All)	Natalie Davies	Respiratory	Dr Vandana Gupta
		Rheumatology	Dr Charlotte Filer
<b>Emergency Department</b>		Stroke	Unoccupied
Emergency Medicine	Dr Calum Harker		
<b>Integrated Care</b>		<b>Surgery</b>	
Acute Medicine	Dr Stephen Bonny	Anaesthetics	Dr Hywel Garrard
Neurorehabilitation	Dr Mag Kadies	Critical Care	Dr Stuart Knowles
Palliative Care	Dr Rebecca Singh-Curry	Gastroenterology	Dr Shameena Bharucha
Discharge Services	Melissa Harrison	General Surgery	Mr Edwin Clark
District Nursing	Sharon Plant	ENT	Mr Milan Rudic
Integrated Therapies	Claire Guy	Trauma & Orthopaedics	Mr Sanjay Anand
Specialised Services	Lisa Lainton	Urology	Mr Paul Cleaveland
<b>Women &amp; Children</b>			
Obstetrics & Gynaecology	Dr Madhavi Pureti		
Paediatrics	Dr Alison 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.

In summary, AMaT allows us 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.

National audits can usually take 18-24 months to publish their findings, therefore, unlike local audits, any risk and assurance levels are not available to report within the current reporting period.

### 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

## Activity (by Division)

In recent years the Trust has held a focus on the Forward Plan, highlighting that resources should be prioritised for clinical audits that are deemed of significant importance or benefit to the Trust in favour of those that may be for personal interest.

In 2023/24, **67.06%** of clinical audits registered were deemed as a Trust priority. The table below shows the percentage change in forward plan activity for each Division.

**Table 4: Forward Plan Activity (by Division)**

Division	Year	Total Clinical Audits	Forward Plan Clinical Audits	Forward Plan %	% Change (from previous year)
Clinical Support Services	2021-2022	11	4	36.36%	-
	2022-2023	15	8	53.33%	↑ 46.67%
	2023-2024	26	12	46.15%	↓ 13.46%
Corporate	2021-2022	7	6	85.71%	-
	2022-2023	4	4	100.00%	↑ 16.67%
	2023-2024	10	8	80.00%	↓ 20.00%
Emergency Department	2021-2022	11	4	36.36%	-
	2022-2023	12	10	83.33%	↑ 129.17%
	2023-2024	13	8	61.54%	↓ 26.15%
Integrated Care	2021-2022	15	8	53.33%	-
	2022-2023	18	12	66.67%	↑ 25.00%
	2023-2024	28	19	67.86%	↑ 1.79%
Medicine	2021-2022	24	16	66.67%	-
	2022-2023	26	20	76.92%	↑ 15.38%
	2023-2024	51	36	70.59%	↓ 8.24%
Surgery	2021-2022	45	24	53.33%	-
	2022-2023	55	30	54.55%	↑ 2.27%
	2023-2024	74	45	60.81%	↑ 11.49%
Women & Children	2021-2022	25	14	56.00%	-
	2022-2023	24	18	75.00%	↑ 33.93%
	2023-2024	53	43	81.13%	↑ 8.18%
Trust Total	2021-2022	136	74	54.41%	-
	2022-2023	154	102	66.23%	↑ 21.73%
	2023-2024	255	171	67.06%	↑ 1.25%

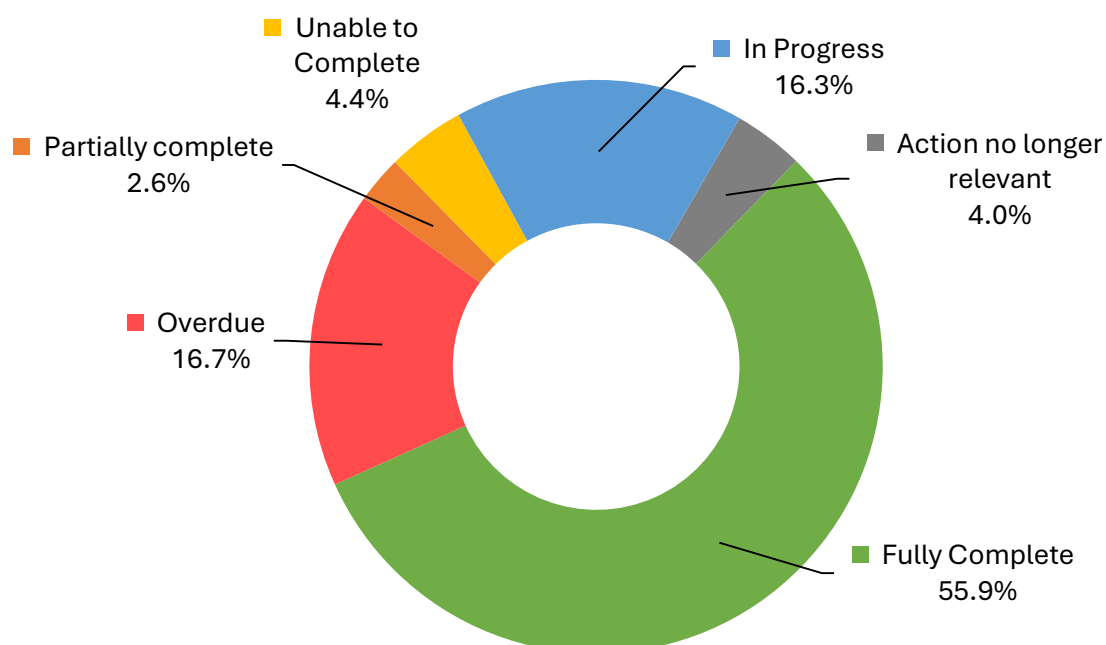
## Actions

Actions are a critical part of any audit as they set out what is required to drive improvement.

During 2023/24, a total of **227** actions had been devised from forward plan audits registered during this period. A breakdown of each action's status as of 31 March 2024 can be found in the table below.

**Table 5: Action Progress**

Division	Actions Raised	In Progress	Partially Complete	Overdue	Fully Complete	No longer relevant	Unable to Complete
Clinical Support Services	26	7 (26.9%)	-	10 (38.5%)	9 (34.6%)	-	-
Corporate	8	3 (37.5%)	-	-	5 (62.5%)	-	-
Emergency Dept.	17	4 (23.5%)	-	-	13 (76.5%)	-	-
Integrated Care	39	3 (7.7%)	-	-	35 (89.7%)	-	1 (2.6%)
Medicine	66	3 (4.5%)	2 (3.0%)	19 (28.8%)	33 (50.0%)	4 (6.1%)	5 (7.6%)
Surgery	36	9 (25.0%)	1 (2.8%)	5 (13.9%)	16 (44.4%)	2 (5.6%)	3 (8.3%)
Women & Children	35	8 (22.9%)	3 (8.6%)	4 (11.4%)	16 (45.7%)	3 (8.6%)	1 (2.9%)
<b>Total</b>	<b>227</b>	<b>37 (16.3%)</b>	<b>6 (4.4%)</b>	<b>38 (16.7%)</b>	<b>127 (55.9%)</b>	<b>9 (4.0%)</b>	<b>10 (16.3%)</b>



## Assurance & Risk

**A key aspect of undertaking a clinical audit is the ability to deliver assurance as to how we are performing and to identify any risks.**

Once an audit has been undertaken it is given an **assurance level** based on the ratio of compliant to non-compliant standards. The assurance level provides an indication of the overall outcomes of the audit. The appropriate level of assurance can be determined (ranging from full to very limited). This should be agreed by all key stakeholders involved in the project. Where there are any discrepancies using this calculation, professional judgement should be used to determine the most appropriate level.

Once the assurance level is assigned the Project Lead will advise on the **risk level**. The risk level provides an indication of what impact any shortfalls may have (if any). By using the Trusts' risk matrix calculation, the appropriate level of risk can be determined. This should be agreed by all key stakeholders involved in the project. The risk level can then form a quantitative basis upon which to determine the urgency of any actions.

Actions are captured in AMaT and monitored via divisional quality group 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.

**Table 6: Assurance Levels** (Local Audit Only)

By 31 March 2024, **21% (23/112)** of audits registered during 2023/24 were deemed to have limited or very limited assurance. At the time of reporting, **17% (19/112)** of the audits had not yet been rated.

Division	Pending	Full	Significant	Limited	Very Limited
Clinical Support Services	11% (1)	22% (2)	67% (6)	0% (0)	0% (0)
Corporate	0% (0)	17% (1)	50% (3)	17% (1)	17% (1)
Emergency Department	0% (0)	0% (0)	33% (1)	33% (1)	33% (1)
Integrated Care	17% (2)	8% (1)	25% (3)	50% (6)	0% (0)
Medicine	0% (0)	18% (4)	59% (13)	14% (3)	9% (2)
Surgery	3% (1)	23% (7)	60% (18)	13% (4)	0% (0)
Women & Children	50% (15)	0% (0)	37% (11)	13% (4)	0% (0)
<b>Total</b>	<b>17% (19)</b>	<b>13% (15)</b>	<b>49% (55)</b>	<b>17% (19)</b>	<b>4% (4)</b>

**Table 7: Risk Levels** (Local Audit Only)

By 31 March 2024, **14% (15/112)** of audits registered during 2023/24 were deemed to have moderate or high risk. At the time of reporting, **21% (24/112)** of the audits had not yet been rated.

Division	Pending	None	Low	Moderate	High
Clinical Support Services	22% (2)	44% (4)	22% (2)	11% (1)	0% (0)
Corporate	0% (0)	83% (5)	0% (0)	17% (1)	0% (0)
Emergency Department	0% (0)	0% (0)	33% (1)	67% (2)	0% (0)
Integrated Care	17% (2)	8% (1)	42% (5)	33% (4)	0% (0)
Medicine	18% (4)	59% (13)	14% (3)	0% (0)	9% (2)
Surgery	3% (1)	40% (12)	47% (14)	10% (3)	0% (0)
Women & Children	50% (5)	17% (5)	27% (8)	7% (2)	0% (0)
<b>Total</b>	<b>21% (24)</b>	<b>36% (40)</b>	<b>29% (33)</b>	<b>12% (13)</b>	<b>2% (2)</b>

The NHS England Quality Accounts List supports the Quality Accounts written report that Trusts must publish each year, which includes information regarding national clinical audit participation.

This list is made available each year, comprising national audits, clinical outcome review programmes and other quality improvement projects that NHS England advises Trusts to prioritise for participation during the forthcoming financial year.

The tables below indicate the workstreams from the Quality Accounts List 2023/24. During this period, Stockport NHS Foundation Trust participated in **94%** of all applicable workstreams.

**Tabel 8: Participated** (47)

#	Programme/Workstream	
1	Adult Respiratory Support Audit	
2	BAUS Nephrostomy Audit	
3	Case Mix Programme (CMP)	
4	Child Health Clinical Outcome Review Programme	
5	Elective Surgery (National PROMs Programme)	
6	Emergency Medicine QIPs:	Care of Older People
7		Mental Health (Self-Harm)
8	Epilepsy12: National Clinical Audit of Seizures and Epilepsies for Children and Young People	
9	Falls and Fragility Fracture Audit Programme (FFFAP):	Fracture Liaison Service Database (FLS-DB)
10		National Audit of Inpatient Falls (NAIF)
11		National Hip Fracture Database (NHFD)
12	Learning from lives and deaths of people with a learning disability and autistic people (LeDeR)	
13	Maternal, Newborn and Infant Clinical Outcome Review Programme	
14	Medical and Surgical Clinical Outcome Review Programme	
15	National Adult Diabetes Audit (NDA):	National Diabetes Footcare Audit (NDFA)
16		National Diabetes Inpatient Safety Audit (NDISA)
17		National Pregnancy in Diabetes Audit (NPID)
18		National Diabetes Core Audit
19	National Asthma and COPD Audit Programme (NACAP):	COPD Secondary Care
20		Pulmonary Rehabilitation
21		Adult Asthma Secondary Care
22		Children and Young People's Asthma Secondary Care
23	National Audit of Cardiac Rehabilitation	
24	National Audit of Care at the End of Life (NACEL)	
25	National Audit of Dementia (NAD)	
26	National Cardiac Arrest Audit (NCAA)	

#	Programme/Workstream	
27	<b>National Cardiac Audit Programme (NCAP):</b>	National Heart Failure Audit (NHFA)
28		National Audit of Cardiac Rhythm Management (CRM)
29		Myocardial Ischaemia National Audit Project (MINAP)
30	<b>National Child Mortality Database (NCMD)</b>	
31	<b>National Comparative Audit of Blood Transfusion:</b>	2023 NICE Quality Standard 138
32		2023 Bedside Transfusion Audit
33	<b>National Early Inflammatory Arthritis Audit (NEIAA)</b>	
34	<b>National Emergency Laparotomy Audit (NELA)</b>	
35	<b>National Gastro- Intestinal Cancer Audit Programme (GICAP):</b>	National Bowel Cancer Audit (NBOCA)
36		National Oesophago-Gastric Cancer Audit (NOGCA)
37	<b>National Joint Registry</b>	
38	<b>National Lung Cancer Audit (NLCA)</b>	
39	<b>National Maternity and Perinatal Audit (NMPA)</b>	
40	<b>National Neonatal Audit Programme (NNAP)</b>	
41	<b>National Paediatric Diabetes Audit (NPDA)</b>	
42	<b>National Prostate Cancer Audit (NPCA)</b>	
43	<b>Perinatal Mortality Review Tool (PMRT)</b>	
44	<b>Perioperative Quality Improvement Programme</b>	
45	<b>Sentinel Stroke National Audit Programme (SSNAP)</b>	
46	<b>Serious Hazards of Transfusion UK National Haemovigilance Scheme</b>	
47	<b>Society for Acute Medicine Benchmarking Audit</b>	

**Table 9: Did Not Participate (3)**

#	Programme/Workstream
1	<b>Improving Quality in Crohn's and Colitis (IQICC)</b> Stockport NHS Foundation Trust were unable to participate in this workstream during 2023/14 due to issues relating to IT compatibility and a lack of available resources. Work is ongoing to resolve the issue.
2	<b>National Ophthalmology Database (NOD): National Cataract Audit</b> Stockport NHS Foundation Trust were unable to participate in this workstream during 2023/14 due to the implementation of the ophthalmology database remaining incomplete. Work is ongoing to resolve the delay.
3	<b>The Trauma Audit &amp; Research Network (TARN)</b> Stockport NHS Foundation Trust were unable to participate in this workstream during 2023/14 due to external issues with the provider relating to security and the data entry portal. This prevented any data collection taking place nationally for the majority of 2023/24. The audit is set to recommence in 2024/25 under a new format.

**Table 10: Not Applicable (24)**

#	Programme/Workstream	
1	Breast and Cosmetic Implant Registry	
2	British Hernia Society Registry	
3	Cleft Registry and Audit NETwork (CRANE) Database	
4	Mental Health Clinical Outcome Review Programme	
5	National Audit of Cardiovascular Disease Prevention in Primary Care (CVDPrevent)	
6	National Audit of Pulmonary Hypertension	
7	National Bariatric Surgery Registry	
8	National Cancer Audit Collaborating Centre:	National Audit of Metastatic Breast Cancer
9		National Audit of Primary Breast Cancer
10	National Cardiac Audit Programme (NCAP):	National Adult Cardiac Surgery Audit (NACSA)
11		National Congenital Heart Disease Audit (NCHDA)
12		National Audit of Percutaneous Coronary Intervention (NAPCI)
13		National Audit of Mitral Valve Leaflet Repairs (MVLR)
14		The UK Transcatheter Aortic Valve Implantation (TAVI) Registry
15	National Clinical Audit of Psychosis (NCAP)	
16	National Obesity Audit (NOA)	
17	National Vascular Registry (NVR)	
18	Out-of-Hospital Cardiac Arrest Outcomes (OHCAO)	
19	Paediatric Intensive Care Audit Network (PICANet)	
20	Prescribing Observatory for Mental Health (POMH):	Use of medicines with anticholinergic (antimuscarinic) properties in older people's mental health services
21		Monitoring of patients prescribed lithium
22	UK Cystic Fibrosis Registry	
23	UK Renal Registry:	Chronic Kidney Disease Audit
24		National Acute Kidney Injury Audit



## Shared Learning

### Clinical Audit & Quality Forums

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

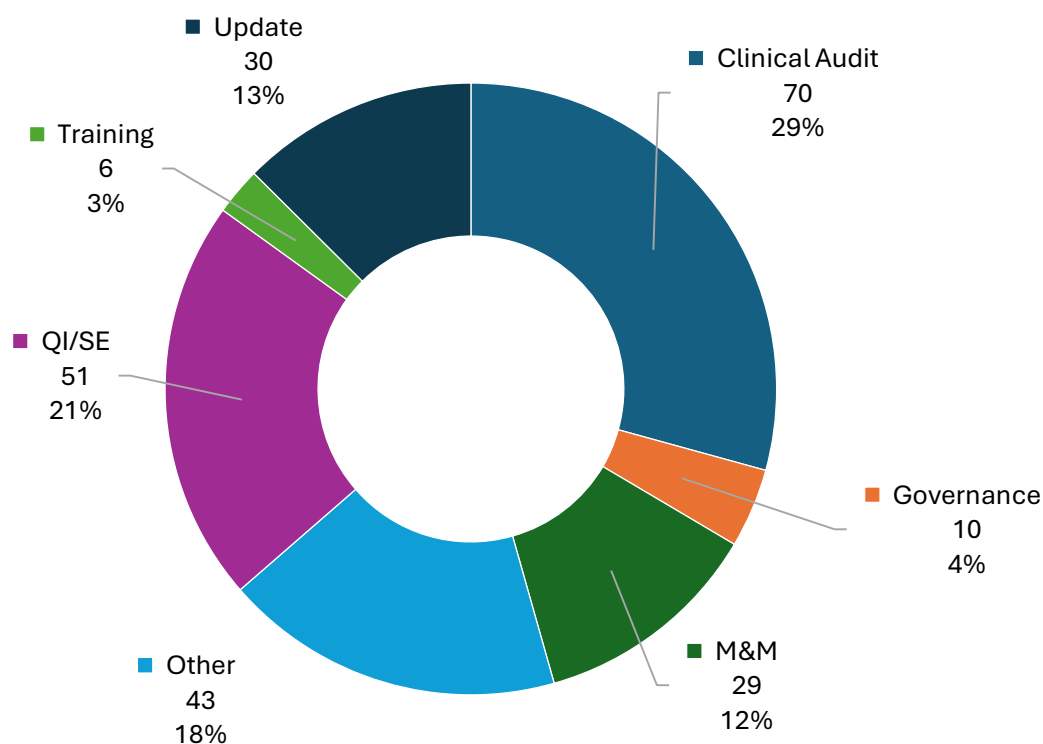
Most of these meetings are held quarterly, although smaller specialties may meet twice a year. These meetings are to enable discussions to take place regarding the findings of an audit, as well as an opportunity for the proposal of recommendations leading to agreed action plans.

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 clinical audit and quality improvement as part of their appraisal and revalidation.

During 2023/24, **29%** of all presentations delivered at Clinical Audit & Quality Forums were clinical audits.



## National Audit Reviews

During 2023/24, a total of **46** national audits were reviewed. National Audits typically take 18-24 months after completion for the publication of results and findings to be made available. When a national report is published, it is circulated to the relevant lead who is then responsible for undertaking a local review. This review aims to provide the Trust with assurance on how we are performing both locally and nationally.

The review highlights key findings, conclusions, and any recommendations/actions to drive improvement. These reviews are presented/approved at the Divisional Quality Group and then validated by the Clinical Effectiveness Group.

**Table 11: National Audit Reviews**

Division	National Reviews
Clinical Support Services	<b>2</b> (4%)
Corporate	<b>1</b> (2%)
Emergency Department	<b>4</b> (9%)
Integrated Care	<b>5</b> (11%)
Medicine	<b>18</b> (39%)
Surgery	<b>9</b> (20%)
Women & Children	<b>7</b> (15%)
<b>Total</b>	<b>46</b>

For a full list of all national audits that were reviewed during this period, please see **Appendix C**.

## News Highlights

### Top in safety for bowel cancer surgery.

New national audit results show that Stepping Hill Hospital is among the safest places in the country for bowel cancer surgery.



**Pictured:** Members of the multi-disciplinary team who help ensure safe bowel surgery.

The new results from National Bowel Cancer Audit (NBOCA) State of the Nation report reveal a 93% survival rate for patients undergoing bowel cancer, compared to the national average of 84%.

That's the best rate in the North of England, and the second best throughout England and Wales.

Bowel cancer is the 4th most common cancer in the UK, accounting for 11% of all new cancer cases. Over 42,000 people in the UK are diagnosed with bowel cancer each year, or around 120 people every day.

Around 200 patients undergo bowel cancer surgery at Stepping Hill Hospital every year, with cases similar to other hospitals in terms of risk and complexity.

The hospital has a specialist bowel cancer team which includes surgeons, oncologists, radiologists, radiographers, cancer nurses and stoma therapists, as well as state-of-the-art critical care facilities. This ensures each patient has the highest quality advice, support and care throughout their time with the hospital.

The bowel survival rates within the NBOCA Audit include all those who have survived for at least two years following the surgery.

The results reflect strong teamwork between all staff within Stockport NHS Foundation Trust who provide care for bowel cancer patients, combining good rates of early diagnosis, the surgery itself, and also follow-up long term care.

Qasim Humayun, Consultant Surgeon at Stockport said "The whole Stockport NHS Foundation Trust Colorectal Cancer Team has worked hard to achieve a 10% better than average survival for our patients in comparison to the whole of England and Wales, and we're all really delighted to see the results. This audit shows that the people of Stockport and the High Peak can have confidence in the surgical care we provide."

## **Commitment to safety in joint replacement surgery confirmed with gold standard status.**

Joint replacement surgery at Stepping Hill Hospital has received confirmation in its commitment to patient safety in joint replacement surgery by receiving a top national rating.

Stockport NHS Foundation Trust, which runs the hospital, has been named as a 'gold standard' National Joint Registry (NJR) Quality Data Provider after passing a series of local data audits.

Only trusts which are 100% compliant receive the gold standard, and Stepping Hill Hospital was one of only four in Greater Manchester to receive the rating.

The NJR monitors the performance of hip, knee, ankle, elbow, and shoulder joint replacement operations to improve clinical outcomes.



**Pictured:** David Johnson, Consultant Orthopaedic Surgeon, and Data Quality Lead.

The registry collects high quality orthopaedic data to provide evidence supporting patient safety, standards in quality of care, and overall cost-effectiveness in joint replacement surgery.

The 'NJR Quality Data Provider' certificate scheme was introduced to offer hospitals a blueprint for reaching high quality standards relating to patient safety and to reward those who have met registry targets.

Stepping Hill Hospital took part in development of the NJR Data Quality Audit when it was first piloted in 2014 and has been confirmed as a Quality Data Provider in each year since then. Data is now entered more quickly than ever before, making the successful competition of audits more challenging.

The NJR Data Quality Audit investigates the accurate number of joint replacement procedures submitted to the registry compared to the number carried out and recorded in the local hospital Patient Administration System. The audit ensures that the NJR is collecting and reporting upon the most complete, accurate data possible across all hospitals performing joint replacement operations, including Stepping Hill Hospital.

NJR targets also include having a high level of patients consenting for their details to be included in the registry and for hospitals to demonstrate timely responses to any alerts issued by the NJR in relation to potential patient safety concerns.

David Johnson, Consultant Orthopaedic Surgeon, and Data Quality Lead at Stepping Hill Hospital said "High safety standards in surgery are of paramount importance to us, and so we're very pleased to receive the NJR gold mark of quality confirming our success with this, which was a real team effort. We're proud to help the NJR accurately inform clinical practice for the future and help to ensure surgical confidence for the public."

## 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 oesophageal 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 A: Forward Plan - Local Audits

The tables below indicate the local clinical audit projects that were registered during 2023/24 for each Division which formed part of the forward plan. Where available, the risk and assurance levels are indicated. During this period, a total of 112 local audits were registered.

### Clinical Support Services: (9)

Speciality	Approved	Reference	Title	Lead	Assurance	Risk
Endoscopy	26/04/2023	ENDO/CA/2023-24/01	LocSSIP 2023/24 - Endoscopy	Louise Rockley	Significant	None
Endoscopy	04/05/2023	ENDO/CA/2023-24/02	Consent Audit 2023 - Endoscopy	Sharmaine Anker	Significant	Low
Endoscopy	17/05/2023	ENDO/CA/2023-24/03	JAG Accreditation Audits - 2023/24	Sharmaine Anker	Pending	Pending
Outpatients	11/10/2023	OUTP/CA/2023-24/01	Audit of patients' documentation to ascertain if care and treatment advice was provided and correctly documented	Sarah Newlove	Significant	Moderate
Pharmacy	24/04/2023	PHAR/CA/2023-24/02	Safe and Secure Handling of Medicines (Duthie) Audit 2023-24	Suman Gupta	Significant	Pending
Pharmacy	04/05/2023	PHAR/CA/2023-24/05	CQUIN 03: Prompt Switching Of Intravenous (IV) Antimicrobial Treatment (2023/24)	Joanne Shatwell	Full	None
Pharmacy	04/05/2023	PHAR/CA/2023-24/06	CQUIN 06: Timely Communication Of Changes To Medicines To Community Pharmacists via the Discharge Medicines Service (2023/24)	James Baker	Full	None
Radiology	24/04/2023	RADI/CA/2023-24/01	Consent Audit 2023 - Radiology	Kristy Williams	Significant	Low



**Corporate: (6)**

Speciality	Approved	Reference	Title	Lead	Assurance	Risk
Corporate Nursing	03/05/2023	NURS/CA/2023-24/01	Mixed Sex Accommodation Annual Audit - 2023	Mamoona Hood	Significant	None
Corporate Nursing	03/05/2023	NURS/CA/2023-24/02	Mattress Audit - 2023/24	Lisa Gough	Full	None
Corporate Nursing	03/05/2023	NURS/CA/2023-24/03	Malnutrition Universal Screening Tool (MUST) Audit - 2023/24 Q2	Orlaith Curran	Limited	Moderate
Occupational Health	03/05/2023	OH/CA/2023-24/01	CQUIN 01: Staff Flu Vaccinations (2023/24)	heather statham	Very Limited	None
Tissue Viability	03/05/2023	TV/CA/2023-24/01	CQUIN 12: Assessment & Documentation Of Pressure Ulcer Risk (2023/24)	Lisa Gough	Significant	None
Tissue Viability	03/05/2023	TV/CA/2023-24/02	CQUIN 13: Assessment, Diagnosis & Treatment Of Lower Leg Wounds (2023/24)	Lisa Gough	Significant	None

**Emergency Department: (3)**

Speciality	Approved	Reference	Title	Lead	Assurance	Risk
Emergency Department	04/05/2023	ED/CA/2023-24/03	Results Governance 2023 - Emergency Department	Calum Harker	Significant	Low
Emergency Department	04/05/2023	ED/CA/2023-24/04	Consent Audit 2023 - Emergency Department	Kieran Beswick	Limited	Moderate
Emergency Department	09/05/2023	ED/CA/2023-24/08	LocSSIP 2023/24 - Emergency Department	Calum Harker	Very Limited	Moderate



## Integrated Care: (12)

Speciality	Approved	Reference	Title	Lead	Assurance	Risk
Acute Frailty	04/05/2023	SSOP/CA/2023-24/01	CQUIN 05: Identification & Response To Frailty In Emergency Departments (2023/24)	Liza McIlvenny	Full	None
Acute Medicine	13/03/2023	ACUT/CA/2022-23/16	DVLA Advice For Patients Presenting With TLOC (Re-Audit)	Amina Rezgui	Limited	Moderate
Acute Medicine	03/05/2023	ACUT/CA/2023-24/03	7 Day Services 2023 - Acute Medicine	Karl Bonnici	Significant	Moderate
Acute Medicine	03/05/2023	ACUT/CA/2023-24/04	Results Governance 2023 - Acute Medicine	Hazim Hamada	Significant	Low
Acute Medicine	03/05/2023	ACUT/CA/2023-24/05	Consent Audit 2023 - Acute Medicine	Andrew Fagan	Limited	Moderate
Acute Medicine	03/05/2023	ACUT/CA/2023-24/06	LocSSIP 2023/24 - Acute Medicine	HAseeb Sadaqat	Limited	Moderate
Acute Medicine	03/05/2023	ACUT/CA/2023-24/07	Record Keeping 2023/24 - Integrated Care	Karl Bonnici	Significant	Low
Acute Medicine	04/05/2023	ACUT/CA/2023-24/08	VTE Patient Information - 2023/24	andy gillett	Limited	Low
Acute Medicine	04/05/2023	ACUT/CA/2023-24/09	Abnormal Calcium Level Results	Arif Ullah	Pending	Pending
Acute Medicine	09/05/2023	ACUT/CA/2023-24/10	VTE Root Cause Analysis - 2023/24	Chaminda Jayawarna	Pending	Pending
Acute Medicine	09/05/2023	ACUT/CA/2023-24/11	VTE Timely Thromboprophylaxis - 2023/24	Chaminda Jayawarna	Limited	Low
Discharge 2 Assess	10/05/2023	D2A/CA/2023-24/01	Purpose-T Documentation For Patients Admitted Onto D2A Caseload	Gabriella Catania	Limited	Low

## Medicine: (22)

Speciality	Approved	Reference	Title	Lead	Assurance	Risk
Cardiology	24/04/2023	CARD/CA/2023-24/01	LocSSIP 2023/24 - Cardiac Pacing Suite	Mark Scott	Significant	None
Cardiology	24/04/2023	CARD/CA/2023-24/02	Results Governance 2023 - Cardiology	Mark Scott	Full	None
Cardiology	26/04/2023	CARD/CA/2023-24/03	Consent Audit 2023 - Cardiology	Helen Goodwin	Significant	Pending
Cardiology	25/01/2024	CARD/CA/2023-24/08	Outpatient Clinic Letter Audit 2023/24 - Cardiology	Helen Goodwin	Limited	Pending
Clinical Cancer Services	04/05/2023	CANC/CA/2023-24/01	CQUIN 04: Compliance With Timed Diagnostic Pathways For Cancer Services (2023/24)	Michelle Davies	Full	None
Clinical Cancer Services	10/05/2023	CANC/CA/2023-24/02	CQUIN 10: Treatment Of Non-Small Cell Lung Cancer (2023/24)	Michelle Davies	Very Limited	High
Diabetes & Endocrinology	24/04/2023	DIAB/CA/2023-24/01	Results Governance 2023 - Diabetes	Ngai Kong	Significant	None
Diabetes & Endocrinology	12/01/2024	DIAB/CA/2023-24/03	Audit of annual thyroid function tests in patients with Type 1 Diabetes	Ekenechukwu Young	Limited	Low
DMOP	24/04/2023	DMOP/CA/2023-24/01	Results Governance 2023 - DMOP	Anjali Prasad	Significant	None
General Medicine	09/05/2023	GMED/CA/2023-24/01	An audit of the practice of re-assessment of VTE risk in clinical circumstances	Roxana-Elena Stanciu	Very Limited	High
Haematology	24/04/2023	HAEM/CA/2023-24/01	Results Governance 2023 - Haematology	Srivasavi Dukka	Significant	None
Haematology	17/10/2023	HAEM/CA/2023-24/02	Consent Audit 2023 - Haematology	Srivasavi Dukka	Significant	Pending

Speciality	Approved	Reference	Title	Lead	Assurance	Risk
Multi-Specialty	24/04/2023	MED/CA/2023-24/01	Record Keeping 2023/24 - Medicine	Ngai Kong	Significant	Low
Ophthalmology	24/04/2023	OPHT/CA/2023-24/02	LocSSIP 2023/24 - Ophthalmology	Khalid Ikram	Full	None
Ophthalmology	26/04/2023	OPHT/CA/2023-24/03	Consent Audit 2023 - Ophthalmology	Imad Wafaie	Significant	None
Oral and Maxillofacial	04/05/2023	ORAL/CA/2023-24/01	LocSSIP 2023/24 - Dental	Sarah Newlove	Limited	Low
Oral and Maxillofacial	04/05/2023	ORAL/CA/2023-24/02	Consent Audit 2023 - Oral & Maxillofacial	Hamza Anwar	Significant	Pending
Respiratory	24/04/2023	RESP/CA/2023-24/01	Results Governance 2023 - Respiratory	Neela Surange	Significant	None
Respiratory	25/01/2024	RESP/CA/2023-24/05	Outpatient Clinic Letter Audit 2023/24 - Chest Medicine	Vandana Gupta	Significant	None
Rheumatology	24/04/2023	RHEU/CA/2023-24/01	Results Governance 2023 - Rheumatology	Abbas Ismail	Full	None
Rheumatology	25/01/2024	RHEU/CA/2023-24/08	Outpatient Clinic Letter Audit 2023/24 - Rheumatology	Charlotte Filer	Significant	None
Stroke	24/04/2023	STRO/CA/2023-24/01	Results Governance 2023 - Stroke	Appu Suman	Significant	None

## Surgery: (30)

Speciality	Approved	Reference	Title	Lead	Assurance	Risk
Anaesthetics	04/05/2023	ANAE/CA/2023-24/01	Consent Audit 2023 - Anaesthesia For Obstetric Procedures	Stuart Knowles	Significant	Low
Anaesthetics	04/05/2023	ANAE/CA/2023-24/02	Consent Audit 2023 - Anaesthesia For Non-Obstetric Procedures	Stuart Knowles	Significant	Low
Anaesthetics	09/06/2023	ANAE/CA/2023-24/04	Compliance with Stop Before You Block (STYB) campaign recommendations in the performance of unilateral regional anaesthesia blocks 2023- re-audit	Stuart Knowles	Full	None
Audiology	26/01/2024	AUDI/CA/2023-24/01	Outpatient Clinic Letter Audit 2023/24 - Audiology	Vivek Kaushik	Full	None
Critical Care	04/05/2023	ICU HDU/CA/2023-24/03	AQ Acute Kidney Injury 2023	Madeleine Barber	Pending	Pending
Critical Care	04/05/2023	ICU HDU/CA/2023-24/01	Results Governance 2023 - Critical Care	Hywel Garrard	Significant	Moderate
Critical Care	04/05/2023	ICU HDU/CA/2023-24/02	CQUIN 07: Recording & Appropriate Response To NEWS2 Score For Unplanned Critical Care Admissions (2023/24)	Hywel Garrard	Full	None
Critical Care	09/05/2023	ICU HDU/CA/2023-24/04	LocSSIP 2023/24 - Critical Care: Prone Ventilation	Matthew Jackson	Significant	None
ENT (Otolaryngology)	04/05/2023	ENT/CA/2023-24/01	Consent Audit 2023 - ENT	Vivek Kaushik	Significant	Low
ENT (Otolaryngology)	04/05/2023	ENT/CA/2023-24/02	Results Governance 2023 - ENT	Shameena Shinaz	Limited	Low
Gastroenterology	04/05/2023	GAST/CA/2023-24/01	Results Governance 2023 - Gastroenterology	Wisam Jafar	Significant	None
Gastroenterology	09/05/2023	GAST/CA/2023-24/02	LocSSIP 2023/24 - Medical Day Case Unit	Wisam Jafar	Full	None

Speciality	Approved	Reference	Title	Lead	Assurance	Risk
General Surgery	04/05/2023	GSUR/CA/2023-24/03	Consent Audit 2023 - General Surgery	Sajid Mehmood	Significant	Low
General Surgery	04/05/2023	GSUR/CA/2023-24/04	Results Governance 2023 - General Surgery	Edwin Clark	Significant	Low
General Surgery	22/01/2024	GSUR/CA/2023-24/11	Outpatient Clinic Letter Audit 2023/24 - General Surgery	Aleksandar Vucicevic	Significant	Low
Multi-Specialty	04/05/2023	SIG&CC/CA/2023-24/01	7 Day Services - Surgery	Apurv Gupta	Significant	Moderate
Multi-Specialty	04/05/2023	MS-SURG/CA/2023-24/01	CQUIN 02: Supporting Patients To Drink, Eat & Mobilise After Surgery (2023/24)	Chris O'Loughlin	Full	None
Multi-Specialty	09/05/2023	SIG&CC/CA/2023-24/02	Record Keeping 2023/24 - Surgery	Natasha Henley	Significant	Low
Pain	04/05/2023	Pain/CA/2023-24/01	Consent Audit 2023 - Pain	Thomas Walton	Full	None
Pain	26/01/2024	PAIN/CA/2023-24/02	Outpatient Clinic Letter Audit 2023/24 - Pain Management	Thomas Walton	Limited	Low
Spine	04/05/2023	Spine/CA/2023-24/01	CQUIN 11: Achieving High Quality Shared Decision Making Conversations (2023/24)	devi Tokala	Full	None
Theatres	09/05/2023	THEA/CA/2023-24/01	LocSSIP 2023/24 - General Theatres	Bob Unwin	Significant	None
Theatres	09/05/2023	THEA/CA/2023-24/02	LocSSIP 2023/24 - General Theatres: Observational Audit	Bob Unwin	Significant	Low
Theatres	10/05/2023	THEA/CA/2023-24/03	LocSSIP 2023/24 - Critical Care	Matthew Jackson	Significant	Low
Trauma & Orthopaedics	04/05/2023	T&O/CA/2023-24/02	Consent Audit 2023 - Trauma & Orthopaedics	arun watts	Significant	Low

Speciality	Approved	Reference	Title	Lead	Assurance	Risk
Trauma & Orthopaedics	04/05/2023	T&O/CA/2023-24/01	Results Governance 2023 - Trauma & Orthopaedics	john Hirst	Limited	Low
Trauma & Orthopaedics	15/05/2023	T&O/CA/2023-24/04	Audit of Spine surgery consent forms	Jon Ford	Significant	None
Urology	04/05/2023	UROL/CA/2023-24/02	Consent Audit 2023 - Urology	Chris Richards	Limited	Moderate
Urology	04/05/2023	UROL/CA/2023-24/03	Results Governance 2023 - Urology	Adedeji Fatuga	Significant	None
Urology	09/05/2023	UROL/CA/2023-24/04	LocSSIP 2023/24 - Urology	Magda Kujawa	Significant	Low

## Women & Children: (30)

Speciality	Approved	Reference	Title	Lead	Assurance	Risk
Gynaecology	05/05/2023	GYNA/CA/2023-24/02	Consent Audit 2023 - Gynaecology	Ahmed Sheta	Pending	Pending
Gynaecology	09/05/2023	GYNA/CA/2023-24/03	Results Governance 2023 - Gynaecology	Audrey Ritchie	Significant	Low
Gynaecology	09/05/2023	GYNA/CA/2023-24/04	LocSSIP 2023/24 - Gynaecology Outpatients	Janette Hunt	Limited	None
Gynaecology	26/01/2024	GYNA/CA/2023-24/07	Outpatient Clinic Letter Audit 2023/24 - Gynaecology	Anastasia Lynn	Pending	Pending
Multi-Specialty	09/05/2023	MS-W&C/CA/2023-24/01	Record Keeping 2023/24 - Women & Children	Alison Jobling	Significant	Low
Neonatal Care	12/10/2022	NEO/CA/2022-23/04	CNST Pathway of neonatal care into transitional care	simone mason	Pending	Pending
Obstetrics and Midwifery	14/04/2022	OBST/CA/2022-23/11	Ockendon CTG review and fresh eyes in line with guidance	Samantha O'Brien	Pending	Pending
Obstetrics and Midwifery	05/05/2023	OBST/CA/2023-24/04	Ockendon Personalised Care & Support Plan	Audrey Ritchie	Pending	Pending
Obstetrics and Midwifery	05/05/2023	OBST/CA/2023-24/05	Ockendon Antenatal Risk Assessment	Audrey Ritchie	Pending	Pending
Obstetrics and Midwifery	05/05/2023	OBST/CA/2023-24/06	Ockendon Consultant Led Ward Rounds	Dawn Welsford	Significant	None
Obstetrics and Midwifery	05/05/2023	OBST/CA/2023-24/07	Ockendon Management of Complex Pregnancy	Dawn Welsford	Pending	Pending
Obstetrics and Midwifery	05/05/2023	OBST/CA/2023-24/08	CNST Women with a CO measurement of 4PPM at booking(Smoking Cessation)	Danielle Gahan	Significant	Low

Speciality	Approved	Reference	Title	Lead	Assurance	Risk
Obstetrics and Midwifery	05/05/2023	OBST/CA/2023-24/11	CNST Women that are assessed at booking for the risk pre-term birth	Karen Coombes	Pending	Pending
Obstetrics and Midwifery	09/05/2023	OBST/CA/2023-24/12	Results Governance 2023 - Obstetrics	Audrey Ritchie	Significant	Low
Obstetrics and Midwifery	09/05/2023	OBST/CA/2023-24/13	LocSSIP 2023/24 - Delivery Room	Kapilmeet Kaur	Limited	Moderate
Obstetrics and Midwifery	30/05/2023	OBST/CA/2023-24/14	CNST Avoiding term admissions to the neonatal unit	Stacey Longworth	Pending	Pending
Obstetrics and Midwifery	18/08/2023	OBST/CA/2023-24/15	CNST and SBL V3 Compliance of Reduced Fetal Movement (RFM) in Pregnancy Guidelines (Annual)	Sally Meats	Significant	None
Obstetrics and Midwifery	25/09/2023	OBST/CA/2023-24/16	Consent Audit 2023 - Obstetrics	Madhavi Pureti	Significant	Low
Obstetrics and Midwifery	09/10/2023	OBST/CA/2023-24/17	CNST RFM in pregnancy guidelines (Monthly)	Sally Meats	Pending	Pending
Obstetrics and Midwifery	15/03/2024	OBST/CA/2023-24/19	Role of PLGF/ sFlt:PLGF ratio in prediction or diagnosis of pre-eclampsia (PET) and prevention of feto-maternal complications	Urooj Mahboob	Pending	Pending
Paediatrics (Acute)	02/10/2020	PAED/CA/2020-21/10	Paediatric Assessment Unit and compliance with RCPCH standards for short stay - Re-audit	Alshaimaa Eldeeb	Limited	Moderate
Paediatrics (Acute)	09/05/2023	PAED/CA/2023-24/03	Results Governance 2023 - Paediatrics	Alison Simmonett	Limited	Low
Paediatrics (Acute)	09/05/2023	PAED/CA/2023-24/05	LocSSIP 2023/24 - Neonatal Unit	Janette Hunt	Significant	Low
Paediatrics (Acute)	09/05/2023	PAED/CA/2023-24/04	LocSSIP 2023/24 - Paediatrics	Jayden Lee	Significant	None
Paediatrics (Acute)	17/07/2023	PAED/CA/2023-24/10	Oxygen prescription for inpatients requiring oxygen on Treehouse Ward Re-audit	Alison Simmonett	Pending	Pending



Speciality	Approved	Reference	Title	Lead	Assurance	Risk
Paediatrics (Acute)	03/08/2023	PAED/CA/2023-24/12	Sepsis pathway compliance audit	Alison Simmonett	Pending	Pending
Paediatrics (Acute)	26/01/2024	PAED/CA/2023-24/15	Outpatient Clinic Letter Audit 2023/24 - Paediatric Diabetic Medicine	Alison Simmonett	Pending	Pending
Paediatrics (Acute)	26/01/2024	PAED/CA/2023-24/14	Outpatient Clinic Letter Audit 2023/24 - Paediatrics	Alison Simmonett	Pending	Pending
Theatres (Maternity)	09/05/2023	THEATRE-MAT/CA/2023-24/01	LocSSIP 2023/24 - Maternity Theatres	Kapilmeet Kaur	Significant	None
Theatres (Maternity)	09/05/2023	THEATRE-MAT/CA/2023-24/02	LocSSIP 2023/24 - Maternity Theatres: Immediate Risks To Fetal & Maternal Life	Kapilmeet Kaur	Significant	Low

## Appendix B: Forward Plan - National Audits

The tables below indicate the national clinical audit projects that were registered during 2023/24 for each Division which formed part of the forward plan. During this period, a total of **59** national audits were registered.

### Clinical Support Services: (2)

Speciality	Approved	Reference	Title	Lead
Pathology	23/06/2023	PATH/ CA/ National/ BTA	National Comparative Audit of Blood Transfusion: Bedside Transfusion - 2024	Brendan Devine
Pathology	23/06/2023	PATH/ CA/ National/ NCABT	National Comparative Audit of Blood Transfusion: NICE Quality Standard QS138 - 2023	Brendan Devine
Pathology	23/06/2023	PATH/ CA/ National/ SHOT	Serious Hazards of Transfusion (SHOT) - 2023	Brendan Devine

### Corporate: (2)

Speciality	Approved	Reference	Title	Lead
Multi-Specialty	03/07/2023	MS-CORP/ CA/ National/ NCAA	National Cardiac Arrest Audit (NCAA) - 2023/24	Ian Blakeley
Safeguarding (Adults)	16/06/2023	ASAFE/ CA/ National/ LeDeR	Learning From Lives & Deaths: People With A Learning Disability & Autistic People (LeDeR) - 2023/24	Thomas ParkerEvans

### Emergency Department: (5)

Speciality	Approved	Reference	Title	Lead
Emergency Department	28/06/2023	ED/ CA/ National/ CoOPQIPs	RCEM: Care of Older People - 2023/24	Souvik Das

Speciality	Approved	Reference	Title	Lead
Emergency Department	28/06/2023	ED/ CA/ National/ IPC	RCEM: Infection Prevention and Control	Anas Mohamed
Emergency Department	28/06/2023	ED/ CA/ National/ RCEM (MH)	RCEM: Mental Health (Self-Harm)	Sivanthi Sivanadarajah
Emergency Department	03/07/2023	ED/ CA/ National/ TCM	RCEM: Time Critical Medications - 2023/24	Mahu Reddy
Emergency Department	03/07/2023	ED/ CA/ National/ TARN	Trauma Audit & Research Network (TARN) - 2023/24	Rebecca Ford

### Integrated Care: (7)

Speciality	Approved	Reference	Title	Lead
Acute Medicine	28/06/2023	ACUTEMED/ CA/ National/ NCEPOD-CAP	NCEPOD: Community Acquired Pneumonia	Stephen Bonny
Acute Medicine	19/06/2023	ACUTEMED/ CA/ National/ SAMBA	Society for Acute Medicine Benchmarking Audit (SAMBA) - 2023	Stephen Bonny
COPD & Pulmonary Rehabilitation	03/07/2023	COPD_PR/ CA/ National/ PR	Pulmonary Rehabilitation Audit (NRAP) - 2023/24	Karen Brown
Diabetes (Community)	03/07/2023	COMM_DIAB/ CA/ National/ NDFA	National Diabetes Footcare Audit (NDFA) - 2023/24	Laura Seddon
Palliative Care & Respite	27/11/2023	SPCN/ CA/ National/ NACEL	National Audit of Care at the End of Life (NACEL) - Round 5: 2024	Elaine Watson
Palliative Care & Respite	28/06/2023	SPCN/ CA/ National/ NCEPOD-EoLC	NCEPOD: End of Life Care	Rebecca Singh Curry
Therapy - Adult Community	03/07/2023	THERAPY_ADULT_COMM/ CA/ National/ FFFAP	Fracture Liaison Service Database (FLS-DB) - 2023	Sophie Bussey

## Medicine: (14)

Speciality	Approved	Reference	Title	Lead
Cardiology	30/06/2023	CARD/ CA/ National/ MINAP	Myocardial Ischaemia National Audit Project (MINAP) - 2023/24	Rajavarma Viswesvaraiah
Cardiology	30/06/2023	CARD/ CA/ National/ NACR	National Audit of Cardiac Rehabilitation (NACR) - 2023	Natalie Graham
Cardiology	30/06/2023	CARD/ CA/ National/ NCAP - CRM	National Audit of Cardiac Rhythm Management (CRM) - 2023/24	Ruth O'Rourke
Cardiology	26/06/2023	CARD/ CA/ National/ NCMD: NHFA	National Heart Failure Audit (NHFA) - 2023/24	Mark Scott
Diabetes & Endocrinology	27/06/2023	DIAB/ CA/ National/ NCDA	National Diabetes Core Audit - 2023/24	Richard Bell
Diabetes & Endocrinology	30/06/2023	DIAB/ CA/ National/ NADIA (harms)	National Diabetes Inpatient Safety Audit (NDISA) - 2023/24	Richard Bell
DMOP	30/06/2023	DMOP/ CA/ National/ CiGH	National Audit of Dementia (NAD) - Round 6: 2023/24	Peter Ngoma
DMOP	23/06/2023	DMOP/ CA/ National/ NAIF	National Audit of Inpatient Falls (NAIF) - 2023	Anjali Prasad
Respiratory	08/06/2023	RESP/ CA/ National/ AASC	National Adult Asthma Secondary Care - 2023/24	Alex Tempowski
Respiratory	23/06/2023	RESP/ CA/ National/ COPDSC	National COPD Secondary Care Audit - 2023/24	Pauline Holmes
Respiratory	26/06/2023	RESP/ CA/ National/ NLCA	National Lung Cancer Audit (NLCA) - 2023	Suman Das
Rheumatology	23/06/2023	RHEU/ CA/ National/ NEIAA	National Early Inflammatory Arthritis Audit (NEIAA) - 2023/24	Charlotte Filer

Speciality	Approved	Reference	Title	Lead
Rheumatology	28/06/2023	RHEU/ CA/ National/ NCEPOD (JIA)	NCEPOD: Juvenile Idiopathic Arthritis (JIA)	Charlotte Filer
Stroke	23/06/2023	STRO/ CA/ National/ SSNAP	Sentinel Stroke National Audit Programme (SSNAP) - 2023/24	Shivakumar Krishnamoorthy

## Surgery: (15)

Speciality	Approved	Reference	Title	Lead
Anaesthetics	16/06/2023	ANAE/ CA/ National/ NELA	National Emergency Laparotomy Audit (NELA) - Year 10: 2023/24	Katie Gott
Anaesthetics	16/06/2023	ANAE/ CA/ National/ PQIP	Perioperative Quality Improvement Programme (PQIP) - 2023/24	Matthew Jackson
Critical Care	19/06/2023	ICU HDU/ CA/ National/ CMP	Adult Critical Care Case Mix Programme (CMP) - 2023/24	Matthew Jackson
Critical Care	03/07/2023	ICU HDU/ CA/ National/ NCEPOD- RFCI	NCEPOD: Rehabilitation Following Critical Illness	Vera Juhasz
Gastroenterology	16/06/2023	GAST/ CA/ National/ IBD	Improving Quality in Crohn's and Colitis (IQICC)	James Morgan
General Surgery	16/06/2023	GSUR/ CA/ National/ NBOCA	National Bowel Cancer Audit (NBOCA) - 2023/24	Qasim Humayun
General Surgery	16/06/2023	GSUR/ CA/ National/ NOGAC	National Oesophago-Gastric Cancer Audit (NOGCA) - 2023/24	Ashok Menon
Trauma & Orthopaedics	19/06/2023	T&O/ CA/ 2023-24/ 09	Mandatory Surveillance Of Surgical Site Infection (SSI) In Orthopaedic Surgery - 2023/24	Simon Ghalayini
Trauma & Orthopaedics	16/06/2023	T&O/ CA/ National/ FFFAP (NHFD)	National Hip Fracture Database (NHFD) - 2023	Simon Ghalayini

Speciality	Approved	Reference	Title	Lead
Trauma & Orthopaedics	16/06/2023	T&O/ CA/ National/ NJR	National Joint Registry (NJR) - 2023	David Sands Johnson
Trauma & Orthopaedics	22/02/2024	T&O/ CA/ 2023-24/ 16	National Joint Registry (NJR): Shoulder Data Quality Audit - 2024	Kelly Sanderson
Trauma & Orthopaedics	19/06/2023	T&O/ CA/ National/ PROMS	Patient Reported Outcome Measures (PROMs) - 2023/24	David Sands Johnson
Urology	15/06/2023	UROL/ CA/ National/ BAUSNephAudit	BAUS: Nephrostomy Audit - 2023	Zara Gall
Urology	16/06/2023	UROL/ CA/ National/ NPCA	National Prostate Cancer Audit (NPCA) - 2023/24	James Dyer
Urology	03/07/2023	UROL/ CA/ National/ NCEPOD (TT)	NCEPOD: Testicular Torsion	Paul Cleaveland

## Women & Children: (13)

Speciality	Approved	Reference	Title	Lead
Gynaecology	28/06/2023	GYNA/ CA/ National/ NCEPOD-E	NCEPOD: Endometriosis	Suku George
Neonatal Care	06/07/2023	NEO/ CA/ National/ NNAP	National Neonatal Audit Programme (NNAP) - 2023	Carrie Heal
Obstetrics and Midwifery	19/06/2023	OBST/ CA/ National/ MBRRACE (MMCE-ATSM)	Maternal morbidity confidential enquiry - annual topic based serious maternal morbidity	Alison Jobling
Obstetrics and Midwifery	19/07/2023	OBST/ CA/ National/ MBRRACE (MMCE)	Maternal mortality confidential enquiries	Carrie Heal
Obstetrics and Midwifery	04/07/2023	OBST/ CA/ National/ MBRRACE (MMS)	Maternal mortality surveillance	Sonia Chachan

Speciality	Approved	Reference	Title	Lead
Obstetrics and Midwifery	19/07/2023	OBST/ CA/ National/ PMaSMCE	MBRRACE: Perinatal Confidential Enquiries - 2023	Alison Jobling
Obstetrics and Midwifery	19/07/2023	OBST/ CA/ National/ PMRT	MBRRACE: Perinatal Mortality Review Tool (PMRT) - 2023/24	Carrie Heal
Obstetrics and Midwifery	21/07/2023	OBST/ CA/ National/ PME	MBRRACE: Perinatal Mortality Surveillance - 2023	Sonia Chachan
Obstetrics and Midwifery	07/07/2023	OBST/ CA/ National/ NMPA	National Maternity and Perinatal Audit (NMPA) - 2023/24	Sonia Chachan
Obstetrics and Midwifery	19/06/2023	OBST/ CA/ National/ NPID	National Pregnancy in Diabetes (NPID) - 2023	Jane O'Brien
Paediatrics (Acute)	26/07/2023	PAED/ CA/ National/ PASC	Children and Young People's Asthma - 2023/24	Alison Simmonett
Paediatrics (Acute)	07/07/2023	PAED/ CA/ National/ NCMD	National Child Mortality Database (NCMD) Programme - 2023/24	Carrie Heal
Paediatrics (Acute)	19/06/2023	PAED/ CA/ National/ NPDA	National Paediatric Diabetes Audit (NPDA) - 2023/24	Chris Cooper

## Appendix C: National Audit Reviews

National audit reviews are an integral part of our facilitation process. They allow us to highlight key findings from the audit so that we can provide assurance to the Trust as to how we are performing, both nationally and locally. During 2023/24, a total of **46** national audit reports were reviewed.

The tables below indicate the national audits that had a report published and were subsequently reviewed by the lead specialty and approved by the Divisional Quality Group during 2023/24. National audit reports are typically published between 12-18 months after data collection ends, therefore the audits listed in these tables may have been registered in previous years and may not necessarily be part of forward plan for this reporting period.

### Clinical Support Services: (2)

Speciality	Reference	Title	Approved
Pathology	PATH/CA/2022-23/03	National Comparative Audit of Blood Transfusion: Blood Sample Collection & Labelling - 2022	01/10/2023
Pathology	PATH/CA/2021-22/02	Serious Hazards of Transfusion (SHOT) - 2021	22/11/2023

### Corporate: (1)

Speciality	Reference	Title	Approved
Safeguarding (Adults)	ASAFE/CA/2022-23/01	Learning From Lives & Deaths: People With A Learning Disability & Autistic People (LeDeR) - 2022/23	01/03/2024

### Emergency Department: (4)

Speciality	Reference	Title	Approved
Emergency Department	ED/CA/2020-21/04	Fractured Neck of Femur (care in emergency departments) 2020-21	01/04/2023



Speciality	Reference	Title	Approved
Emergency Department	ED/CA/2021-22/13	RCEM Infection Prevention and Control 2021-22 (Cycle 2)	01/09/2023
Emergency Department	ED/CA/2021-22/06	RCEM Pain in Children 2021-22 (Cycle 2)	01/09/2023
Emergency Department	ED/CA/2021-22/03	RCEM Consultant sign off 2022	01/09/2023

### Integrated Care: (5)

Speciality	Reference	Title	Approved
Adult Therapies	CA-DIAB-31	National Diabetes Footcare Audit (NDFA) - 2020/21	01/06/2023
Adult Therapies	ATHER/CA/2022-23/02	UK Parkinson's Audit (Neurology) - 2022	13/03/2024
Neighbourhood Services	COMM/CA/2021-22/02	Pulmonary Rehabilitation (NACAP) - 2021/22	01/06/2023
Palliative Care	COMM/CA/2021-22/02	National Audit of Care at the End of Life (NACEL) - Round 4: 2022	11/10/2023
Specialist Services	ACUT/CA/2021-22/05	Fracture Liaison Service Database (FLS-DB) - 2021	14/07/2023

### Medicine: (18)

Speciality	Reference	Title	Approved
Cardiology	CA-CARD-32	Myocardial Ischaemia National Audit Project (MINAP) - 2020/21	01/06/2023

Speciality	Reference	Title	Approved
Cardiology	CA-CARD-31	National Audit of Cardiac Rhythm Management (CRM) - 2020/21	10/08/2023
Cardiology	CARD/CA/2021-22/03	National Audit of Cardiac Rhythm Management (CRM) - 2021/22	10/08/2023
Cardiology	CA-CARD-34	National Audit of Cardiac Rehabilitation (NACR) - 2021	14/09/2023
Cardiology	CARD/CA/2022-23/02	National Audit of Cardiac Rehabilitation (NACR) - 2022	01/11/2023
Cardiology	CARD/CA/2021-22/02	Myocardial Ischaemia National Audit Project (MINAP) - 2021/22	14/03/2024
Diabetes & Endocrinology	DIAB/CA/2021-22/01	National Diabetes Inpatient Safety Audit (NDISA) - 2021/22	12/10/2023
Diabetes & Endocrinology	DIAB/CA/2021-22/02	National Diabetes Core Audit - 2021/22	01/02/2024
DMOP	CA-DMOP-37	National Audit of Inpatient Falls (NAIF) - 2020	10/08/2023
DMOP	DMOP/CA/2021-22/01	National Audit of Inpatient Falls (NAIF) - 2021	10/08/2023
DMOP	DMOP/CA/2022-23/03	National Audit of Dementia (NAD) - Round 5: 2022	11/04/2024
Respiratory	RESP/CA/2021-22/01	Adult Asthma Secondary Care (NACAP) - 2021/22	01/04/2023
Respiratory	RESP/CA/2021-22/02	National COPD Secondary Care Audit - 2021/22	11/05/2023
Respiratory	RESP/CA/2021-22/06	National Outpatient Management of Pulmonary Embolism Audit - 2021	10/08/2023

Speciality	Reference	Title	Approved
Rheumatology	RHEU/CA/2021-22/01	National Early Inflammatory Arthritis Audit (NEIAA) - 2021/22	01/04/2023
Rheumatology	RHEU/CA/2022-23/01	National Early Inflammatory Arthritis Audit (NEIAA) - 2022/23	01/02/2024
Stroke	STRO/CA/2021-22/01	Sentinel Stroke National Audit Programme (SSNAP) - 2021/22	10/08/2023
Stroke	STRO/CA/2022-23/01	Sentinel Stroke National Audit Programme (SSNAP) - 2022/23	14/03/2024

## Surgery: (18)

Speciality	Reference	Title	Approved
Anaesthetics	ANAE/CA/2020-21/14	National Emergency Laparotomy Audit (NELA) - Year 08: 2020/21	01/04/2023
Gastroenterology	GAST/CA/2022-23/03	Inflammatory Bowel Disease (IBD) Registry - 2022	01/04/2023
Gastroenterology	GAST/CA/2021-22/09	NCEPOD - Crohn's Disease	01/10/2023
General Surgery	CA-GSUR-48	National Bowel Cancer Audit (NBOCA) - 2020/21	01/05/2023
Trauma & Orthopaedics	T&O/CA/2021-22/05	British Spine Registry (BSR) - 2021/22	01/04/2023
Trauma & Orthopaedics	T&O/CA/2021-22/01	Mandatory Surveillance Of Surgical Site Infection (SSI) In Orthopaedic Surgery - 2021/22	01/04/2023
Trauma & Orthopaedics	T&O/CA/2021-22/02	National Joint Registry (NJR)	01/10/2023

Trauma & Orthopaedics	T&O/CA/2022-23/01	National Hip Fracture Database (NHFD) - 2022	01/01/2024
Urology	CA-UROL-41	National Prostate Cancer Audit (NPCA) - 2020/21	01/05/2023

## Women & Children: (6)

Speciality	Reference	Title	Approved
Neonatal Care	NEO/CA/2021-22/01	NNAP National Neonatal Audit Programme - Neonatal Intensive and Special Care 2020 data	01/04/2023
Neonatal Care	NEO/CA/2022-23/01	NNAP National Neonatal Audit Programme - Summary report on 2021 data	01/04/2023
Obstetrics and Midwifery	OBST/CA/2021-22/11	Perinatal Mortality Surveillance (MBRRACE) - Jan 2021- Dec 21 Births	01/01/2024
Obstetrics and Midwifery	OBST/CA/2022-23/01	NPID National Pregnancy in Diabetes	01/03/2024
Paediatrics (Acute)	PAED/SE/2022-23/11	NPDA National Paediatric Diabetes Care & Outcomes	01/05/2023
Paediatrics (Acute)	PAED/CA/2022-23/10	NRAP National Respiratory Audit Programme	01/05/2023
Paediatrics (Acute)	PAED/CA/2021-22/04	Epilepsy 12 National Audit of Seizures and Epilepsies for Children and Young People (Epilepsy 12) - 2021/22	01/03/2024



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