



# Clinical Audit Annual Report

2009/10

**Report by:** Stuart Metcalfe, Clinical Audit Manager.

**Date:** May 2010.

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## Public summary

Clinical Audit is a quality improvement tool used widely in the National Health Service. It involves doctors, nurses and other healthcare professionals agreeing the best way to treat patients (e.g. the most appropriate choice of treatment; the way it should be given; the right time for it to be given; and so on), and then collecting data - usually from patients' medical records, or sometimes from electronic databases - to find out whether or not they are doing the things they said they would do. If the clinical audit results show that there is room for improvement, an action plan will be agreed. Please be assured that when clinical audits are carried out, the data is anonymised, i.e. individual patients are not identified on data collection tools or in project reports.

During the financial year 2009/10, around 530 clinical audit projects took place in our hospitals. These projects represent a mixture of national work which the Care Quality Commission asks us to participate in, and a range of other audits agreed within our Trust. For example, when the National Institute for Clinical Excellence (NICE) publishes its recommendations about which drugs and treatments should be available on the NHS, we usually set up clinical audits to check that we are following those recommendations properly.

Some Clinical Audits simply confirm that we are doing the right things; but others reveal a need for us to make improvements. The Clinical Audit Annual Report for 2009/10 includes a number of pages (arranged by Clinical Division) listing changes and benefits brought about by our clinical audit activity within the past year.

If this report raises any points of interest that you would like to pursue, please feel free to contact Stuart Metcalfe at: UHBristol Headquarters, Marlborough Street, Bristol BS2 8HW or email [stuart.metcalfe@uhbristol.nhs.uk](mailto:stuart.metcalfe@uhbristol.nhs.uk)

## **1. Introduction from the Chair of Clinical Audit Committee**

Clinical Audit is a valuable tool to assess the standards of care that we deliver. Used skilfully, it brings together professionals from a many disciplines to improve clinical services.

The report shows a very active clinical audit programme throughout the Trust again this year with a balance of projects initiated in response to guidance issued by the National Institute for Health and Clinical Excellence (NICE), the National Patient Safety Agency (NPSA), the Medical Royal Colleges, and projects initiated in response to local priorities. A total of 229 projects were completed in 2009/2010 and there are proposals to undertake over 160 projects on the 2010/2011 forward plan. The forward plan was developed after an extensive consultation process throughout the Trust and also involving our commissioners.

For the first time this year, summary reports of completed audit projects have been produced at the request of the Governance and Risk Management Committee. These reports have been made available to Divisional governance groups via the audit convenors and facilitators. This has placed a welcome emphasis on action planning following completed projects. However it is important to recognise that the full report may be needed for proper interpretation of a project's results and conclusions as the information contained in the summaries is necessarily brief. I would like to thank Stuart Metcalfe and the Clinical Audit Team for all their work in producing these reports and for their dedication to the successful running of the clinical audit programme. You will see many examples in the report of positive outcomes of audit projects and we will continue to build on this in the future.

There have been a number of changes to the membership of the Clinical Audit Committee again this year. I would like to thank all those convenors who are stepping down and I would like to welcome all those who are taking up the challenge and replacing them. I am always grateful for the support of the Convenors as we work to deliver the clinical audit programme. I would particularly like to thank Dr Mark Scrutton for taking the lead on securing closer working between the Information Management & Technology Department and Clinical Audit and Dr Robert Marshall for leading a project to improve patient and public involvement in the audit programme. On behalf of the committee I would also like to thank Chris Swonnell for his invaluable support.

The role of Clinical Audit will become increasingly important as we are asked to deliver care in financially constrained times. In the coming year the Clinical Audit Committee have planned closer working with the Internal Audit department; an internal audit project examining the work of the Clinical Audit Committee and the Clinical Audit Team is in development. This will inform future development of the clinical audit programme and help us to ensure that clinical audit remains a platform for improvement in clinical services and makes a valuable contribution to the Trust's Quality Accounts.

**Carol Inward**

Chair, Clinical Audit Committee

## **2. Report from the Clinical Audit Manager**

### **2.1 Clinical Audit Team**

Clinical audit at the University Hospitals Bristol NHS Foundation Trust is currently supported by a team of 8.65 whole time equivalent staff employed by the Trust Services Division, and based mostly in the Clinical Divisions. Further support is provided by a number of other staff employed by the Clinical Divisions with a specific remit for clinical audit (in Radiology and Homeopathy). Full details of the team and the Divisions/specialties that they support can be found at Appendix A.

### **2.2 Clinical Audit Committee**

The Clinical Audit Committee met five times in 2009/10. Meetings enabled discussion of core business, i.e. Annual Forward Plans, quarterly key performance indicators and project progress reports, the Clinical Audit Annual Report and the Healthcare Standards Declaration (in particular for Core Standard C5d and upward reporting of appropriate key performance indicators).

The following members joined the Committee in 2009/10:

- Kevin Gibbs - Pharmacy
- Huw Roach - Radiology
- Emma Redfern - Emergency Services
- Mandie Townsend - Cardiology
- Mark Scrutton - Anaesthesia
- Adrian Weale - Trauma & Orthopaedics
- Claire Langton-Hewer - Adult ENT
- Selena Williams - Mental Health Liaison Services

Thanks must go to outgoing Convenors; Sally-Ann Hall; Angus Nightingale; and Graham Porter for their contribution to the work of the Committee.

The Committee welcomed a number of 'guests' to the meetings over the last year: Andrew Hooper (Director of IM&T) to engage the department in discussions about ensuring effective IT support for future clinical audit activity; Sarah Blackburn (Non-Executive Director and Chair of the Audit & Assurance Committee) to discuss future joint working with Internal Audit; and Jan Dudley (Chair of the Clinical Effectiveness Committee) discuss closer working between the two committees, particularly in relation to monitoring compliance of NICE guidance.

During the latter half of the financial year, the Committee agreed a Clinical Audit Strategy for 2010-12 and discussed revisions to the Clinical Audit Policy (to be finalised in May 2010), both reflecting published guidance from the Healthcare Quality Improvement Partnership.

The Committee considered the Trust's Quality Strategy, recently ratified by the Board. The need for closer working between the Clinical Audit Committee and Clinical Effectiveness Committee was noted as was the need for the development of plans to monitor clinical outcome data. The Clinical Audit Committee also reviewed guidance for Trust Boards published by the Healthcare Quality Improvement Partnership; this included a set of key questions for Boards to consider. Issues arising from these documents will form part of the Committee's Workplan for 2010/11 (see Appendix E).

### **2.3 Clinical Audit and Clinical Effectiveness**

The Trust's Clinical Audit and Clinical Effectiveness functions work closely together. The Clinical Audit Manager reviews all NICE Technology Appraisal Guidance (TAG) implementation plans prior to formal agreement to ensure that any requirement for audit has been fully considered. Systems are also in place to report summary findings from these audits to the local NICE Commissioning College. Reports of the outcomes and actions relating to audits of NICE guidance are reviewed by the Clinical Effectiveness Committee on a monthly basis. These reports provide the Clinical Effectiveness Committee with more robust assurance of the successful implementation of NICE guidance.

### **2.4 Standards for Better Health/Care Quality Commission indicators**

In 2009/10, the Trust once again declared compliance with Core Healthcare Standards C5d ('the clinical audit standard').

The Trust also declared overall compliance with the Care Quality Commission "Engagement in Clinical Audits" indicator. The Trust declared that it was compliant with the following five criteria:

1. Between 1 April 2009 and 31 March 2010, did the Trust participate in local and/or national audits of the treatment and outcomes for patients in each clinical directorate covered by the trust?
2. Between 1 April 2009 and 31 March 2010, did the trust have a clinical audit strategy and policy, and a prioritised programme that related to both local and national priorities with the overall main aim of improving patient outcomes?
3. Between 1 April 2009 and 31 March 2010, did the trust have in place suitable governance systems and arrangements to involve and support all clinicians to participate in clinical audit?
4. Between 1 April 2009 and 31 March 2010, did the trust ensure that all clinicians and other relevant staff responsible for or participating in clinical audits were given appropriate time, knowledge and skills to facilitate the successful completion of the audit cycle, in line with the "Principle of Best Practice in Clinical Audit" (NICE, 2002)?
5. Between 1 April 2009 and 31 March 2010, did the trust review the results and recommendations of local and national audits undertaken in the trust, as well as other relevant national findings, to identify required actions and ensure that they are reflected in the organisation's aims and objectives as part of the trusts responsibility to quality improvement?

The Trust declared non-compliance with the following criterion:

6. Between 1 April 2009 and 31 March 2010, did the trust's management or governance leads receive regular reports on the progress being made in implementing the recommendations of relevant national clinical audits and other national findings, including reviews of the outcomes and any re-audits being conducted where necessary?

Further work in this area is needed; a new National Audit Register is currently in development to allow better review of the progress of national audits and to provide assurance that findings are being discussed at Divisional level.

## **2.5 Quality Accounts**

A number of mandated statements about clinical audit have been included in this year's Quality Account, the majority of which related to our participation in national audit projects. The outcomes from clinical audits were also used as evidence within other sections of the Account to provide a measure of the overall quality of care that patients receive.

## **2.6 Clinical Audit Team away day/action plan**

The Clinical Audit Team held an away day in November 2009, following the success of similar events in previous years. The Team was joined by Carol Inward (Chair of the Clinical Audit Committee), Sarah Blackburn (Chair of the Audit & Assurance Committee) and Jenny McCall (Chief Internal Auditor). The day allowed reflection on the work of the past year, the role of clinical audit in relation to corporate objectives, and how the Team will continue to deliver quality improvement through clinical audit in the future. As a result of the day, an action plan was developed to guide the team's activities for the forthcoming financial year. This can be found at Appendix F.

## **2.7 Forward plan for 2010/11**

Each year, clinical specialties are required to put together a forward programme of planned clinical audit for the next twelve months. These plans set out priority projects, based on considerations such as anticipated NICE guidance, NPSA guidance and national clinical audits, etc. This year the consultation process was strengthened to include priorities from the following committees/groups:

- Governance & Risk Management Committee (including Executive Directors) and Audit & Assurance Committee (Non-Executive Directors) to ensure any clinical audit requirements associated with organisational objectives are given due consideration)
- Clinical Effectiveness Committee
- Governance and Risk Management Committee Chairs
- Commissioners
- Foundation Trust Governors
- PALS/Complaints leads
- The public (via a notice placed on the Trust's web site)

A programme of Trust-wide clinical audits facilitated by the Clinical Audit Manager, and overseen by the Chair of the Clinical Audit Committee will continue to be implemented. In addition to the forward plan, other audits may be undertaken during the year on an ad-hoc basis, together with any projects still in progress from the previous year.

The full forward programme for 2009/10 can be found at Appendix D.

## **2.8 Clinical Audit Networks**

During 2009/10, the Assistant Director for Audit & Assurance, Clinical Audit Manager and members of the team have ensured that the Trust has been represented in discussions hosted by the South West Audit Network (SWANS). The Clinical Audit Manager continues to represent the Trust at the Bristol Interface Audit Group which brings governance representatives from member NHS organisations to network on a regular basis, to strengthen links and improve communication across Bristol and Weston health care organisations: the group aim work together to identify and instigate interface audit projects, which improve quality of care within organisations and across organisational boundaries. The Assistant Director resigned as General Secretary of the National Audit Governance Group in the spring of 2010, ending almost ten years of Trust representation on this Group.

## **2.9 Involving patients**

Since the Trust achieved Foundation status, approximately 350 Members have expressed an interest in the process of auditing the Trust's services (although not clinical audit *per se*). The focus for 2010/11 remains how to engage these members and explore ways in which they might wish to contribute to future clinical audit programmes.

**Stuart Metcalfe**

Clinical Audit Manager



## Project Reports for 2009/20010

### 3.1 NICE, NPSA, National Service Framework and National audits

The project numbers listed in the table below provide a quick reference guide to the Trust's participation in national audit projects, audits of National Institute for Clinical Excellence (NICE) and National Service Framework (NSF) guidance, and audits of National Patient Safety Agency (NPSA) guidelines. Further details of these specific projects can be found within Divisional project lists.

Audits of NICE guidance									
366	821	914	1638	1717	1744	1768	1864	1874	1876
1880	1900	1909	1970	2000	2033	2035	2045	2053	2056
2077	2090	2109	2134	2138	2143	2147	2155	2159	2160
2162	2165	2167	2169	2172	2173	2177	2185	2187	2190
2191	2193	2198	2203	2211	2224	2226	2229	2234	2235
2240	2243	2246	2256	2259	2264	2265	2275	2285	2291
2293	2310	2321	2336	2340	2346	2350	2351	2357	2358
2368	2396	2405	2414	2439	2441	2466	2469	2493	2500
2522	2562	2565	2566						
Audits of NPSA guidance									
1967	2087	2095	2111	2117	2145	2158	2161	2164	2169
2182	2192	2255	2268	2278	2496	2531	2580		
Audits of NSF guidance									
1953	2084	2180	2233	2311	2378	2434	2567		
National Audits									
160	207	223	366	537	549	550	553	809	947
1142	1578	1593	1768	1841	1889	1898	1899	1900	1901
1902	1945	2054	2095	2106	2255	2285	2296	2321	2330
2331	2337	2340	2341	2375	2380	2394	2395	2409	2412
2414	2418	2427	2444	2445	2446	2447	2459	2482	2483
2484	2485	2486	2487	2490	2491	2568	2592		

There are a number of 'national audits' in which UHBristol participates, but which are not managed through the Clinical Audit Team. This will usually be where the 'audits' are large-scale data collection exercises, rather than genuine clinical audit. A full list of national audits that the Trust participates in can be found in Appendix H.

## 3.2 Introduction to Divisional Reports

### 3.2.1 Introduction & explanation of statistics

All project information for this report is taken from the UHBristol Clinical Audit Project Management Database. The statistics and list of projects are based on the number of audits registered during the financial year 2009/10. This includes projects started in previous years (2008/09 roll-overs) and projects completed in 2009/10. It does not include projects abandoned or deferred during the year - for details of these, please see Appendix B and Appendix C. Audits started in 2009/10 are defined as those that first appeared within a quarterly report in that financial year (i.e. July 2009, October 2009, January 2010 or April 2010).

Projects are listed by Division. Appendix A gives details of the clinical audit staff supporting Divisions/specialties.

#### Definition of terms:

**Re-audit:** The repetition of an audit project in order to measure whether practice has improved since the initial audit

**Ongoing (continuous) audit:** The continuous collection of data in order to measure practice. Ongoing audit should involve regular review of data and implementation of changes in practice (where necessary) in order to improve performance

**National:** Denotes national audits, e.g. Healthcare Commission National Audits, Royal College and other professional bodies' national audits

**Regional:** This relates to audits carried out in collaboration with other health organisations within the region

**Interface:** Audit of care across organisational boundaries in the patient pathway, e.g. patient referrals in from primary care to UHBristol.

**Multi-specialty:** Involving a specialty/specialties other than the specialty under which the project has been registered

**Multi-professional:** Involving more than one profession (e.g. nurses and doctors)

**Projects with patient involvement:** Patients/carers involved in one or more of the following: identification of audit topic; developing audit idea/project design; carrying out audit project; receiving audit results

### 3.2.2 Comment on data in table 3.2.3

The total number of registered projects in 2009/10 has risen by over 100 compared to 2008/09 (535 compared to 432). This reflects the ever increasing commitment that clinical staff have in improving patient care through clinical audit. The re-audit rate of 22% is slightly less than in the previous financial year; increasing this indicator will become a focus for work of the Clinical Audit Team over the coming year. The continued increase in audits of National Institute of Health & Clinical Excellence (NICE) guidance is encouraging. There has been a percentage increase in a number of other indicators, most notably in the proportion of audits undertaken on a multi-professional and multi-specialty basis and those audits looking at care across organisational boundaries (Interface audits); the latter being identified as a continued priority. The figures show that although the total number of projects abandoned or deferred within the year has risen, in terms of a percentage of our overall programme the rise is slight (1%). Encouragingly, the proportion of completed projects resulting in the production of an action plan has risen.

### 3.2.3 Summary 'dashboard' of indicators

	Total number of projects *	Ongoing (continuous) audits	First audits	Re-audits	Abandoned	Deferred	Audits of NICE / NSF guidance	National	Regional	Interface	Multi-speciality	Multi-professional	Projects with patient involvement	Completed projects	Action Plan produced	Confirmed good/acceptable practice #	Report produced
Diagnostic and Therapy	69	3%	74%	23%	0	0	6%	4%	3%	3%	22%	52%	1%	32	78%	19%	97%
Medicine	82	0%	79%	21%	5	0	17%	17%	1%	2%	39%	38%	5%	43	95%	5%	100%
Specialised Services	65	11%	78%	11%	4	1	29%	18%	2%	3%	12%	51%	9%	30	87%	13%	83%
Surgery and Head and Neck	151	9%	64%	27%	18	3	17%	8%	1%	5%	34%	44%	7%	46	80%	15%	93%
Women and Children's	157	11%	68%	21%	13	5	14%	8%	3%	2%	26%	43%	7%	71	92%	8%	86%
Non-division specific	11	9%	73%	18%	1	0	18%	18%	9%	18%	64%	91%	9%	7	71%	29%	100%
<b>TOTAL</b>	535	7%	71%	22%	41	9	16%	10%	2%	4%	29%	46%	6%	229	87%	12%	92%
<b>TOTAL (2008/09)</b>	432	7%	69%	24%	24	12	15%	7%	2%	2%	25%	38%	6%	196	79%	17%	92%

\* In progress or completed during the year. All percentages are based on this total, apart from those in the last 4 columns which are based on only those audits completed during the year.

# **please note:** this statistic applies only to projects where an action plan was not produced, i.e. there will also have been a number of projects which produced an action plan, but where practice was nevertheless identified as being of an acceptable standard.

### 3.3 DIAGNOSTIC & THERAPY

#### SUMMARY FIGURES

2008/09 roll-overs <<		29
Audits first registered in 2009/10	First audits <b>F</b>	29
	Re-audits <b>R</b>	10
	Ongoing monitoring projects <b>O</b>	0
<b>Total number of audits</b>		<b>69</b>
Completed audits		32
Current (uncompleted) audits carried forward >>		36

The project list below details audits that are led by Diagnostic & Therapy staff and are not related to any specific clinical division. Other audits led by, or otherwise involving, Diagnostic and Therapy staff are listed under the clinical division to which they pertain and, where possible, cross-linked via the table below the list of projects registered within this division.

#### PROJECT LIST

The "Ref." refers to the registration number of the project on the Audit Project Management Database  
X indicates the audit is of the type specified

Ref.	Project Title	Audit Lead	<<	F	R	O	>>
<b>Specialty: Audiology (Adult)</b>							
1999	Real Ear Measurements	Dunja Nieuwoudt	X	X			
2498	Re-audit of Real Ear Measurements	Parminder Munde			X		X
<b>Specialty: Laboratory Medicine</b>							
Subspecialty: Clinical Biochemistry							
2143	Audit of NICE guidelines for management of Familial Hypercholesterolemia (NICE CG71)	Graham Bayly	X	X			
2439	Audit of analytical aspects of coeliac screening against NICE Clinical Guideline 86	Tim Thorpe		X			X
Subspecialty: Histopathology							
1777	Histological reporting of ovarian cancer against the Royal College minimum dataset	Nahida Banu	X	X			
1825	Histopathological Reporting of Borderline Ovarian Tumours	Joya Pawade	X	X			X
1919	Histological reporting of endometrial cancer against Royal College dataset	Joya Pawade	X		X		
2091	Clinical and pathological relevance of histopathological reporting of the placenta	Joya Pawade	X	X			
2194	Histological reporting of lung specimens	Joya Pawade		X			X
2435	Frozen section audit at the Bristol Royal Infirmary for the period from 1st January 2009 to 30th June 2009	Mo Khan			X		X
Subspecialty: Infection Control							
733	Infection Control Ward/Department audit	Michelle Lindsay	X	X		X	X
992	Are all Trust employees complying with the Infection Control Hand Hygiene Policy?	Stephanie Carroll	X	X		X	X
1903	Audit of the Methicillin-resistant Staphylococcus Aureus care pathway	Stephanie Carroll	X	X			
2502	Prospective audit of linen handling and management at ward level 2010	Karen Fletcher		X			X

Ref.	Project Title	Audit Lead	<<	F	R	O	>>
2507	Prospective audit of hand washing facilities and alcohol hand gel locations in clinical areas 2010	Michelle Lindsay		X			X
<b>Subspecialty: Laboratory Haematology</b>							
1813	Antenatal haemoglobinopathy request entry	Sharif Goolam-Hossen	X	X			
2255	National comparative audit of blood collection process	Soo Cooke		X			
2459	National Comparative Audit of the use of Fresh Frozen Plasma 2008	Edwin Massey		X			
2460	Audit of the appropriate use of red cells – a 2 region audit in Midlands and the South West	Edwin Massey		X			
2508	Correct completion of the blood transfusion prescription chart	Soo Cooke		X			X
<b>Subspecialty: Microbiology</b>							
2144	Re-audit on the Microbiology department's standard of documentation in the management of blood cultures with isolation of gram negative organisms	Isabel Baker	X		X		
2257	Laboratory diagnosis and management of candidaemia in the University Hospitals Bristol NHS Foundation Trust	Vijay Richard		X			
2335	Audit of appropriate use of the gentamicin assay service	Rachel Chaplow		X			
2397	Audit of the urine testing algorithm use at HPA Regional Microbiology Laboratory, Bristol	Karthiga Sithamparanathan		X			
2438	Audit of bacteriology reports for the community 2009	Barbara Kirkpatrick		X			
<b>Specialty: Medical Physics &amp; Bioengineering</b>							
<b>Subspecialty: Vascular Studies</b>							
914	Diagnosis and treatment of Pseudoaneurysms	Teresa Robinson	X	X			X
1685	Pre cardiac surgery carotid artery duplex and management of patients with significant carotid disease.	Eleanor Walker	X	X			
1990	Treatment of patients with greater than 70% symptomatic internal carotid artery stenosis	Maria Morgan	X	X			X
<b>Specialty: Nutrition &amp; Dietetics</b>							
2352	Cook/chill: Meeting national nutritional standards for hospital catering	Toni Williams		X			X
2570	Dietetic record card audit 2010	Julie Barker		X			X
<b>Specialty: Occupational Therapy</b>							
1799	Occupational Therapy home visit audit	Scott Allan	X	X			
<b>Specialty: Pharmacy</b>							
1920	Audit of antibiotic prescribing guidelines for adult cardiac surgery	Jacqueline Criper	X	X			
2012	Audit of prescribing and administration of medicines policies	Sarah Hepburn	X	X			
2110	The use of cephalosporins, quinolones and clindamycin within the Bristol Royal Infirmary	Elizabeth Jonas	X	X			
2111	Medicines Reconciliation Process on Admission in the Medical Division at University Hospitals Bristol NHS Foundation Trust	Miriam Michael	X	X			X

Ref.	Project Title	Audit Lead	<<	F	R	O	>>
2112	Medicines Reconciliation process on discharge (Medical Division)	Sophie Blow	X	X			X
2227	Intravenous to oral antibiotic therapy switch - re-audit of practice in the Medical Division	Daniela Ferro			X		X
2424	An audit of ward pharmacist daily antibiotic reviews	Charlotte Pointing		X			X
2456	An audit of missed doses of critical medication in Medical and Surgical Divisions	Carla Cheetham		X			X
2575	Re-audit of Antibiotic Prescribing Guidelines for Adult Cardiac Surgery	Jacqueline Criper			X		X
2580	An audit of oral anticoagulant prescribing for adult inpatients at UH Bristol	Rhiannon Walker		X			X
<b>Specialty: Physiotherapy</b>							
2026	Audit of the Physiotherapy Standards for the Management of an Acute Exacerbation of Chronic Obstructive Pulmonary Disease	Louise Coates	X	X			
2082	Re-Audit of Physiotherapy Case Notes	Linda Clarke	X		X		X
2128	A re-audit of physiotherapy management of general medical patient	Katy Buchan	X		X		
2302	A re-audit of physiotherapy standards for the management of an acute Exacerbation of Chronic Obstructive Pulmonary Disease	Lucy Craig			X		X
2308	A re-audit of physiotherapy management of the general medical patient in respiratory ward	Charlotte Hurry			X		
2565	Re-audit of the discharge process for patients on the elderly rehabilitation wards at Bristol General Hospital	Lin Leong			X		X
<b>Specialty: Radiology</b>							
Subspecialty: Cross-sectional Imaging							
2427	National audit of diagnostic adequacy, accuracy and complications of image-guided or assisted liver biopsy	Huw Roach		X			X
2123	Audit of cardiac computerized tomogram	Adrian Pollentine	X	X			
2142	Re-audit of bone scans at Bristol Royal Infirmary	James Harding	X		X		
2488	An Audit into the Cardiac Magnetic Resonance Imaging Perfusion Service	Elisa McAlindon		X			X
2556	Audit of patient radiation dose in Computed Tomography	Ian Negus		X			X
2557	The rate of pulmonary embolism detection and D-dimer usage	Gavin Clague		X			X
2563	Cardiac MRI affecting decision making in haemoglobinopathies	Ben Leach		X			
Subspecialty: General Radiology							
2063	Continuous assessment of the Radiographer Reporting Team against Royal College of Radiologists standards	Simon Brown	X	X			X
2065	Information on plain X-ray request forms from the Emergency Department at the Bristol Royal Infirmary	Laura Massouh	X	X			
2124	Abdominal X-ray evaluation in the Trust	Karen Mason	X	X			X
2141	Dosage for Barium Enema	Adrian Pollentine	X	X			

Ref.	Project Title	Audit Lead	<<	F	R	O	>>
2247	Appropriate referral for adult abdominal X-rays in the Emergency Department	Rebecca Duerden		X			
2355	Audit of Paediatric Chest X-rays Image Quality	Donna Dimond		X			X
2363	Documentation of anti-spasmodic drugs administered during Barium enema procedures	Vijaya Ajarapu		X			
2398	Reporting Standards of the Skeletal Survey in cases of suspected Non Accidental Injury	Steven Morgan		X			
2553	Re-audit of the documentation of antispasmodic drugs administered during barium enema procedures 2010	Alan Cordey			X		X
2573	Audit of neonatal chest x-rays image quality	Donna Dimond		X			X
2574	Audit of Pancreatic Biopsy Success Rates	Edward Walton		X			X
2582	Re-auditing of the use of gonad protection	Katy Phelps			X		X
Subspecialty: Mammography							
2535	Avon Breast Screening Unit – Connecting to local communities 2009	Suma Chakrabarthi			X		
Subspecialty: Ultrasound							
2067	Re-audit of Pain diaries after Ultrasound Guided Injection	Charles Wakeley	X		X		X
2248	Normal abdominal ultrasound examinations performed and reports generated by Advanced Practitioner Sonographers	Tina Stoyles		X			X

### Summary of benefits, actions or changes achieved as a result of audit in 2009/10

1685 - This audit highlighted the potential for improving the timing of referrals for carotid duplex prior to routine cardiac surgery. Earlier receipt of referrals will allow better allocation of carotid appointments and facilitate patients being seen prior to surgery.

1777 - A minimum dataset for ovarian cancer, incorporating immunohistochemical features including receptor status, was developed for the reporting of results in the department. A macroscopic description proforma was designed for regular use in the tissue processing room.

1799 - The Occupational Therapy induction process was reviewed to ensure that new staff receive correct information on how to complete OT, medical, and Kardex notes e.g. time scales for completing certain reports.

1813 - More staff are now able to authorise antenatal haemoglobinopathy results which will improve the timeliness of reports.

1903 - The Infection Control Nurses and Matrons will visit all MRSA positive patients to ensure the correct treatment has been commenced within 48hrs.

1919 - This re-audit into histological reporting of endometrial cancer against the Royal College of Pathologists minimum dataset confirmed good practice.

1920 - Clinicians were educated about the need to document indication and course lengths of antibiotic prescriptions.

1999 - This audit led to the replacement of equipment used to determine real ear measurements.

2026 - Physiotherapy standards for management of an acute exacerbation of Chronic Obstructive Pulmonary Disease will be emphasised within the induction programme, especially in relation to assessment documentation and oxygen education.

2091 - An adjunct to the placenta reporting request form was created according to national guidelines and the current histology placenta reporting proforma was re-designed as a result of this audit

2110 - The Trust's Antibiotic Prescribing Policy was updated outlining that the use of cephalosporins, quinolones and clindamycin where alternatives are available based on cultures and sensitivities should be avoided.

2123 - This audit confirmed that cardiac CT (computerized tomogram) is a useful imaging modality in the non-invasive assessment of cardiac anatomy and pathology. It significantly influences patient management in the vast majority of examinations.

2128 - The teaching of respiratory assessments will be included in the induction for new Physiotherapists.

2141 - This audit demonstrated that the dose area products of barium enema procedures undertaken at the BRI are well within the recommended diagnostic reference levels set by the National Reference Protection Board (NRPB) despite having a significantly longer than recommended screening times.

2142 - A marked improvement in the recording of injection sites for bone scan reporting was shown by this re-audit.

2143 - A baseline proforma was developed for patients with familial hypercholesterolaemia and patient information leaflets are now available in clinic.

2144 - This re-audit showed documentation of the management of blood cultures with isolation of Gram negative organisms had improved significantly.

2255 - The Trust performed well against standards on the traceability of transfused blood as outlined within the European Union Directive Blood Safety and Quality Regulations 2005.

2257 - Medical microbiology staff will only recommend a search for metastatic infection for selected patients with candidaemia. A senior biomedical scientist is now in-charge of reviewing the referral test book on a weekly basis.

2308 - New physiotherapists will be trained in the use of the medical mobility screening tool when assessing all referrals for medical mobility patients that are not elderly fallers. Focus will be on how to refer patients to the Falls Service and how to fill out the referral form appropriately.

2335 - Specific criteria for ordering gentamicin requests electronically have been introduced. This will reduce the number of inappropriate or unjustified requests and will be used to allow rejection of such assays by Biochemistry.

2397 - The audit confirmed that the urine testing algorithm was being followed appropriately within the Microbiology Department

2398 - Local standards for skeletal survey reporting of suspected non-accidental injury have been developed as a result of this audit.

2438 - As a result of this audit the authoriser's name will be added to each bacteriology report for community.

2459 - The Trust performed well compared to national results in the use of fresh frozen plasma

2460 - The Trust performed well compared to the results of this regional audit looking at the appropriate use of red blood cells.

2535 - This audit demonstrated that, through a dedicated direct health promotion programme, a significant increase in breast screening uptake can be achieved. The project was published in "Race for Health" as an example of good practice and to share the knowledge with other Primary Care Trusts.

2563 - This audit confirmed that cardiac MRI assessment of iron loading for the treatment of patients with haemoglobinopathies was being used appropriately. The communication between the Radiology and Haematology departments ensured that patients were receiving frequent monitoring and were on the best available treatment.



### 3.4 MEDICINE

#### SUMMARY FIGURES

2008/09 roll-overs <<		23
Audits first registered in 2009/10	First audits <b>F</b>	49
	Re-audits <b>R</b>	10
	Ongoing monitoring projects <b>O</b>	0
<b>Total number of audits</b>		<b>82</b>
Completed audits		43
Current (uncompleted) audits carried forward >>		28

#### PROJECT LIST

"Ref." refers to the registration number of the project on the Audit Project Management Database  
**X** indicates the audit is of the type specified

Ref	Project Title	Audit Lead	<<	F	R	O	>>
Specialty: Emergency Department (Adult)							
2130	Re-audit of ED Blood Transfusion Requests	Maeve Hegarty	X		X		
2131	Re audit of tetanus use in the Emergency Dept	Johanna Lloyd-Rees	X		X		
2220	Illicit Drug Users in Accident and Emergency	Sally Lewis		X			X
2330	CEM Clinical Audits: Moderate and Severe Asthma 2009	Helen Mansfield		X			X
2331	CEM Clinical Audits: Fractured Neck of Femur 2009	Rebecca Preece		X			X
2349	Audit of Emergency Department Patients Requiring Large Volume Blood Transfusion	Helen Mansfield		X			
2370	The Management of Sepsis in the Emergency Department	Ahmed Sabra		X			
2376	Audit of the New Alcohol Nurse Service at the Accident and Emergency Department of the BRI	Lucy Harrison		X			X
2395	CEM Clinical Audits: Paracetamol Overdose 2008	Nigel Rawlinson		X			
2396	Audit of Atrial Fibrillation Management in Accident & Emergency	Hyunkee Kim		X			
2400	Emergency Department Cellulitis Audit	Trina Leskiw		X			X
2401	Hypertonic Saline for Severe Head Injury	Anna Shekdar		X			X
2402	Retrospective Audit of Management of Renal Colic	Hannah Brown		X			X
2436	Seniority of Patient Review on the Emergency Department Observation Unit	Lucy Prewett		X			
2469	Management of Falls in the Elderly in BRI Emergency Department	Meinir Hughes		X			
2503	"Did Not Wait" in the Emergency Department	Ray Houston		X			X
2506	ED Audit into Efficiency of Mental Matrix Completion	Katie Richardson		X			X
2533	An Audit of the Appropriate Use of Imaging in Assessment of Knee Injuries in ED, BRI.	Alison Hutchings		X			X

Ref	Project Title	Audit Lead	<<	F	R	O	>>
2549	Audit of Acute Kidney Injury Care in the Emergency Department Against the NCEPOD Recommendations	Emma Redfern		X			
<b>Specialty: Medical Specialties</b>							
2160	Use of the Bristol Observation Chart - Division of Medicine	Helen Julian	X	X			
2211	Use of the Bristol Observation Chart - Division of Medicine	Trevor Brookes			X		
2344	Use of the Bristol Observation Chart - Division of Medicine	Trevor Brookes			X		
2418	National Occupational Health Audit 2008: Back Pain Management and Depression Screening	Brian Williams		X			
2493	Use of the Bristol Observation Chart - Division of Medicine	Helen Julian			X		X
<b>Subspecialty: Care of the Elderly</b>							
1889	The National Clinical Audit of Falls & Bone Health in Older People	Rachel Bradley	X		X		
1899	National Sentinel Audit of Stroke (Round 6)	Sarah Caine	X		X		
2053	Management of Osteoporosis in People with Previous Hip Fracture Treated at the BRI	Tom Miller	X	X			
2293	Management of Patients with Parkinson's Disease	Gerald Tobin		X			
2394	National Audit of Dementia – Care in General Hospitals	Jane Buswell		X			X
2409	The National Audit of Continence Care 2010	Jane Buswell		X			X
2437	Audit of Weekend House Officer Written Handovers	Yealin Chung		X			
2442	Re-audit of Thromboprophylaxis in Adult Medical Patients	Marwan Obeid			X		X
<b>Subspecialty: Contraceptive &amp; Sexual Health Services (CASH)</b>							
1964	Re-audit of Record Keeping of Repeat Issue Combined Oral Contraception Under Patient Group Direction (PGD) 2A	Leonor Herrera-Vega	X		X		
2258	Audit of Record Keeping of Issue of Progestogen-only Emergency Contraception Under Patient Group Direction (PGD) 1	Ann Steele Nicholson		X			
2305	Audit of Record Keeping of Progestogen-only Oral Contraceptive Pill Under Patient Group Direction (PGD) 2B	Elaine Smith		X			
2569	MSM Sauna Outreach Audit	Ian Lloyd		X			X
<b>Subspecialty: Dermatology</b>							
2042	Audit of Waiting Time in Dermatology Outpatient Clinic at the Bristol Dermatology Centre	Kate Evans	X	X			
2056	Re-audit Dermatology MDM	Mohamed Alrawi	X		X		X
2219	Audit of the Standards of Service for Patients Treated with Oral/Bath PUVA Phototherapy	Mohamed Alrawi		X			X
2246	Is the General Practitioner Being Notified of a Patients Diagnosis of Skin Cancer by the Next Day?	Gemma Gregory		X			
2299	Use of Dermoscopy in Assessing Pigmented lesions	Katharine Nightingale		X			X

Ref	Project Title	Audit Lead	<<	F	R	O	>>
2347	Surgical Attire of Staff and Patients During Skin Surgery in the Bristol Dermatology Centre	Helen Whitley		X			X
2348	Wound Infection Audit Following Skin Surgery in the Bristol Dermatology Centre	Helen Whitley		X			X
2350	Audit of the Prescription of Sub-Cutaneous Biologics (Adalimumab and Etanercept) for the Treatment of Moderate to Severe Psoriasis.	Tracey Wheeler		X			
2440	Audit of Blood Screening Prior to Self-Administered Biologics Therapy for Psoriasis	Tracey Wheeler		X			
2534	Retrospective Audit on Basal Cell Carcinoma (BCC) Follow Up	David de Berker		X			X
Subspecialty: Diabetes & Endocrinology							
2323	Department of Health High Impact Intervention 2b, Peripheral Line Care	Sarah Foster			X		X
2337	National Diabetes Inpatient Audit	Jane Godfrey		X			X
2497	Prevalence and Management of Benign Hypercalcaemia and Primary hyperparathyroidism	Rajeev Raghavan		X			X
Subspecialty: Gastroenterology & Hepatology							
1898	UK Comparative Audit of Upper Gastrointestinal Bleeding and the Use of Blood	Peter Collins/ Anne McCune	X	X			
1901	National UK Inflammatory Bowel Disease (IBD) Audit	Tom Creed	X	X			X
1950	Auditing care of Peripheral Cannula	Louise Whyte	X	X			
2101	Vitamin Supplementation in Patients with Alcohol Abuse	Richard Parker & Amy Burchell	X	X			X
2214	Auditing care of Peripheral Cannula	Louise Whyte			X		
2250	A Retrospective Audit of Late Complications of ERCP (Endoscopic Retrograde Cholangiopancreatography) at UHB Foundation Trust	Tom Creed		X			
2317	Re-audit of Care of the Peripheral Cannula	Louise Whyte			X		
Subspecialty: General Medicine							
2054	Audit of Oxygen Prescription for Medical Patients in the Bristol Royal Infirmary (National BTS audit)	Thomas Teare	X	X			
2249	Thromboprophylaxis in Acute Admissions to the MAU	Tom Milller			X		
2403	The Management of the Septic Patient in the First Twenty-Four Hours; Current Practice	Christian Kelly- Morland		X			
2496	Audit of Completion of the Learning Difficulties Risk Assessment	Katie Hopgood		X			X
2547	Audit of Prescribing in Inpatient Medicines	Kitty Hill		X			X
Specialty: Genitourinary Medicine							
2089	Management of Late Syphilis	Indrajith Karunaratne	X	X			
2129	Audit of Management of Genital Herpes	Jane Nicholls	X	X			
2132	Audit on Management of Vulvovaginal Candidiasis in Women Attending the Bristol Sexual Health Centre	Kendon Macdonald	X	X			

Ref	Project Title	Audit Lead	<<	F	R	O	>>
2421	Pelvic Inflammatory Disease audit	Karla Blee		X			X
Subspecialty: Neurology							
2504	Clinical Audit of Idiopathic Intracranial Hypertension (IIH) in UHBristol	Luke Bennetto		X			
Subspecialty: Respiratory							
1900	National Chronic Obstructive Pulmonary Disease (COPD) Audit	James Catterall	X		X		
1927	Chest USS for pleural effusion	Kathryn Bateman	X	X			
2043	Diagnosis and management of lung cancer	Hazel Woodland	X	X			X
2113	The Management of Spinal Cord Compression – Are we meeting the Guidelines?	Hannah Smith	X	X			X
2116	Do Cystic Fibrosis Patients have Chest X-rays, Liver Ultrasound and DEXA Scans Annually?	Iara Maria Camarinha	X	X			
2218	Audit of Management of Community Acquired Pneumonia	Ehsan Ahmadnia		X			
2221	Re-audit of TB and HIV testing	Ruth King			X		
2375	British Thoracic Society (BTS) Adult Asthma Audit	Amelia Dunscombe		X			X
2416	Re-audit of the BTS Guidelines for investigation of PE	Samrat Bose			X		X
2495	An Audit of Drug Allergies of Patients with Cystic Fibrosis (CF)	Victoria Hembrow		X			X
2510	An Audit of Current NIV Practice within the Trust	Katy Buchan		X			X
2511	Audit of Initial Assessment and Management of Acute Heart Failure.	Abbey Leahy		X			X
Subspecialty: Rheumatology							
2040	Audit of Care of Ankylosing Spondylitis Patients at the Bristol Royal Infirmary.	Melissa Domaille	X	X			X
2235	The Use of Rituximab in Rheumatoid Arthritis - NICE TAG 126	Matthew Roy		X			
2346	Adalimumab, Etanercept and Infliximab for the Treatment of Rheumatoid Arthritis	Alex Keough		X			X
2351	An Audit of the Treatment of Recent Onset Rheumatoid Arthritis in adults.	Helen Nightingale		X			X

### Summary of benefits, actions or changes achieved as a result of audit in 2009/10

1889 - This national audit identified the need for new T&O consultants; 3 locums are now in place with substantive posts planned. A new surgical audit nurse has been employed to ensure all hip fractures are entered onto the National Hip Fracture Database.

1927 - Funding for a portable ultrasound scanner (USS) for thoracic ultrasound scanning was agreed and the machine has been purchased. This will reduce patient stay and improve patient safety.

1950 - Drug charts have been redesigned to include a cannula care plan; this document is seen by nursing and medical staff at least once a day. During the nursing handover a designated member of the nursing staff will be responsible for completing the care plans during the shift.

2042 - As a result of this audit, communication with patients has improved; the extent of delays to patients is now communicated verbally or on information boards in waiting area. Plans are in place to improve access and directions to the Dermatology Centre. Work is also underway to develop a patient focus group

2053 - A secondary prevention pathway which will be in the new hip fracture clerking proforma has been introduced.

2089 - A new emergency clinic slot has been introduced to accommodate newly diagnosed syphilis patients; this allows clinicians sufficient time to assess patients. The Syphilis patient management proforma has also been redesigned.

2116 - Work is underway with the Radiology department to try to accommodate both ultrasound and DEXA scans on the same day and if possible on the same day as future clinic appointment. The referral form has been redesigned to help this process.

2129 - The BASHH recommendations are to be incorporated into the local guidelines for the herpes clinic.

2130 - The trust transfusion policy is now reviewed at teaching sessions for new Emergency Department staff. Teaching session on consent and special circumstances related to blood transfusion e.g. Jehovah's witnesses, have been introduced.

2131 - All staff have been educated in the correct documentation and administration of tetanus vaccinations and immunoglobulin. There is now teaching about tetanus prone wound and correct vaccinations at SHO inductions and there have also been ENP and nurse teaching sessions.

2132 - Guidelines for the management of vulvovaginal candidiasis in women attending the Bristol Sexual Health Centre have been written as a result of this audit. These have been circulated in the department for consultation.

2160 - A new Early Warning Score (EWS) flowchart has been produced to clarify the process for staff. These have been laminated and placed in folders at the end of the patient's bed. Posters have also been produced for ward areas.

2221 - Tuberculosis Nurses now offer TB alert HIV information leaflets to all patients with TB.

2235 - The health assessment questionnaire (HAQ) score is now being documented either in patient files or computer system. A ritiximab form has been created to capture all relevant NICE TA126 information for each patient.

2246 - As a result of this audit a new documentation system has been introduced. The system is based on practice within Dorset. It includes a factual tick sheet for the GP naming the patient and their key worker plus date of diagnosis. This is faxed to the GP to ensure that they receive diagnosis by next day as is best practice

2249 - An educational event "The prevention of hospital acquired thrombosis with University Hospitals Bristol" was launched in September 2009. Stroke has also been added to the VTE risk assessment as a contraindication for compression hosiery.

2250 - This audit led to the creation of an integrated care pathway including a customized referral form, patient preparation, day-case and nurse-led discharge guidance. There has also been a successful equipment bid for a short wire system and new duodenoscopes.

2258 & 2305 - Name stamps are now available to all clinical staff.

2293 - All new patients referred to the clinic are now allocated an appointment in the next clinic to ensure that they are seen within 6 weeks of referral. The Parkinson's disease society has agreed to fund a nurse specialist; the nurse has now been employed.

2349 - A proposal has been submitted to the transfusion committee for a change in the guidance. The findings of the audit have also been disseminated through 'Grand Round' presentations.

2350 - A process for chasing outstanding chest x-ray reports has been agreed by the Head of the X-Ray Department. This ensures that all the reports are being seen by the referring consultant before being signed and filed in the notes.

2370 - Further teaching about severe sepsis and advances in management of sepsis has been introduced as a result of this audit, both online and in lectures. There has also been a poster presentation of the findings as a prompt to use severe sepsis proforma.

2369 - The NICE guidelines for atrial fibrillation have now been condensed into a new protocol for the Emergency department. A re-audit is due to start in October 2010.

2403 - A campaign "First dose, Stat dose" has been launched within the MAU to ensure that antibiotics for sepsis are prescribed according to guidelines. This will improve the time taken to receive the first dose.

2436 - Work is underway to implement a new stamp to help clarify reasons and plan for admission to the observation unit within MAU. This will ensure that the unit is appropriately used.

2437 - A new junior doctor handover template has been introduced using the recommendations of the Royal College of Physicians. This will improve communication between doctors and drive up patient safety during the handover process. The results and outcomes of this project are to be presented at a joint event hosted by the UK Foundation Programme and the National Association of Clinical Tutors: 'Sharing Good Practice' to be held in June.

2440 - As a result of this audit a blood screening proforma label has been introduced to improve the blood screening process. This will be placed in the notes by biologics nurse at assessment; blood tests will be signed off by the nurse when requested. The doctor will be signing these forms when they have seen the blood results.

2469 - Junior doctors are now educated about the falls referral form, and where this can be found. The Rapid Emergency Access Team (REACT) has been made aware of the Falls Clinic and how patients can be referred from the Emergency Department. This will improve the care of patients who have fallen.

2504 - Research standards have been accepted as local best practice and implemented accordingly.

2549 - Work is underway to identify an Acute Kidney Injury Assessment tool. Improvements to the written physiological monitoring plan for patients in the Emergency Department have been made.

### 3.5 SPECIALISED SERVICES

#### SUMMARY FIGURES

2008/09 roll-overs <<		32
Audits first registered in 2009/10	First audits <b>F</b>	29
	Re-audits <b>R</b>	4
	Ongoing monitoring projects <b>O</b>	0
<b>Total number of audits</b>		<b>65</b>
Completed audits		30
Current (uncompleted) audits carried forward >>		35

(includes 7 ongoing monitoring projects)

#### PROJECT LIST

"Ref." refers to the registration number of the project on the Audit Project Management Database  
X indicates the audit is of the type specified

Ref	Project Title	Audit Lead	<<	F	R	O	>>
<b>Specialty: Cardiac Services</b>							
Subspecialty: Cardiac Surgery (Adult)							
549	Central Cardiac Audit Database/Society of Cardiothoracic Surgeons National Adult Cardiac Surgery Audit Database	Alan Bryan	X	X		X	X
2120	Preoperative management of type 2 diabetes mellitus patients undergoing coronary surgery	Raimondo Ascione	X	X			
Subspecialty: Cardiology							
207	Central Cardiac Audit Database/British Heart Foundation Cardiac Rehabilitation Database	Fiona Barnard	X	X		X	X
223	Central Cardiac Audit Database/Myocardial Infarction National Audit Project (MINAP)	Jenny Tagney	X	X		X	X
366	Central Cardiac Audit Database/British Heart Foundation Heart Failure Database	Toni Dorrington	X	X		X	X
809	Central Cardiac Audit Database/British Cardiovascular Interventionist Society National Angioplasty Database	Andreas Baumbach	X	X		X	X
1578	Central Cardiac Audit Database/Heart Rhythm UK Cardiac Rhythm Management	Tim Cripps	X	X		X	X
1717	Re-audit of the use of anti-thrombotic and anti-platelet agents as adjuvant therapy during and after percutaneous coronary intervention	John Edmond	X	X		X	X
1864	Biventricular Pacemaker NICE audit (NICE TAG 120)	Esther Shamoan	X	X			
2085	Early ACS Management	Kimberly Bruce	X	X			
2088	Are appropriate referrals made for 24hour holter monitoring	Marie Meader	X	X			
2157	Acute Coronary Syndrome (ACS) Patient Pathway	Valentino Oriolo	X	X			
2196	Standardisation of Filter settings on 12 lead ECGs	Anthony French		X			X
2197	Radial and arterial wound audit	Paula Gontan		X			
2198	Cardiac Resynchronisation therapy - improving implantation rates and standard of post implant care for HF patients	Alastair Sandilands		X			
2199	An audit of the One Stop Cardiology Clinic	Dr Mandie Townsend		X			

Ref	Project Title	Audit Lead	<<	F	R	O	>>
2377	Re-audit of patient satisfaction at the one stop clinic	Alana Durack			X		X
2378	To determine whether the Ejection Fraction in impaired LV systolic function is being recorded	Angus Nightingale		X			X
2379	To ensure Patients with endocarditis who are IV drug users receive the same treatment as non-IV drug users	Simon Duggan		X			X
2412	Arrhythmia Nurse Service	Jenny Tagney		X			X
2431	GUCH pre-operative assessment Clinic	Sheena Vernon		X			X
2432	Catheter Ablation pre-assessment patient questionnaire	Anya Horne		X			X
2433	Are patients with STEMI/NSTEMI or ACS+ve Troponin appropriately managed	Claire Parker		X			X
2187	Use of the Bristol Observation Chart	Liz Leech		X			
<b>Specialty: Homeopathy</b>							
925	The use of a patient generated outcome measure to monitor outcome and completion of package of care and facilitate goal setting in routine practice	Elizabeth Thompson	X	X			X
1625	Homeopathy in Management of Childhood Eczema	Willa Muir	X	X			X
<b>Specialty: Oncology &amp; Clinical Haematology</b>							
Subspecialty: Clinical Haematology							
1983	Allergy Recording - re-audit	Jeanine Stone	X		X		
2084	Identification Of Potential/Obligate Haemophilia carriers	Inas El-Najjar	X	X			
2164	Vince Alkaloids- DOH Guidance on Intrathecal Chemotherapy & Rapid Response	Febin Basheer	X	X			
2171	Sickle Cell (Acute) Management	Sajid Pervaiz	X	X			
2203	Management of CML - NICE TAG 70 Imatinib	EiEi Htwe		X			
2266	Neulasta prescriptions on Avon Haematology Unit	Charlotte Oliver		X			
2531	Vinca Alkaloids Intrathecal Chemotherapy - Re-audit of Compliance with new DOH guidance on and NPSA Rapid Response Report	Kathryn Newton			X		X
2578	Re-audit of Neulasta Prescribing	Claire Chisholme			X		X
Subspecialty: Oncology							
1749	Completeness of Chemotherapy Summary Charts	Louise Medley	X	X			X
1880	Communication and Support Received by Breast Cancer Patients - NICE Improving Outcomes Guidance	Alsion Cameron	X	X			X
1981	Blood Transfusions BHOC - Information Collected	Paula Wilson	X	X			X
1986	The Use of Zoledronic Acid For Symptom Control in Prostate Cancer with Bony Metastases."	Serena Hilman	X	X			
1988	Consent for Chemotherapy	Rebecca Hockett	X	X			



Ref	Project Title	Audit Lead	<<	F	R	O	>>
2020	Pregnancy -Consent for Radiotherapy	Karen Bannerman	X		X		
2086	Head & Neck Radiotherapy Review Follow-Up	Abi Jenner	X		X		
2109	Capecitabine, Oxaliplatin, 5FU in Adjuvant Treatment of Stage III (Dukes C) Colon Cancer - NICE TAG 100	Jessica Mason	X	X			X
2136	Out of Hours Telephone Calls to Ward 61	Tara Shine	X	X			
2161	NHSLA 2009	Amelia Stockley	X	X			
2162	Head & Neck Cancer - Dental Assessment	Heather Kent	X	X			
2165	Gemcitabine+ Paclitaxel for the Treatment of Metastatic Breast Cancer – NICE TAG 116	Kate Scatchard	X	X			
2166	NCEPOD - Chemotherapy Patient Care	Clare Barlow	X	X			X
2167	Temozolomide for Newly Diagnosed High Grade Glioma - NICE TAG 121	Emma Gray	X	X			
2223	Antibiotic Policy - Stop/Review Dates on Ward 61	Paula Wilson		X			X
2237	DXA Scans - Bone Health - Breast Cancer Patients on Aromatase Inhibitors	S Alexander/A Sanders		X			X
2259	Are Patients with Relapsed or Refractory Follicular lymphoma being Prescribed Rituximab in Accordance with NICE TAG 137	Sucheta Mane		X			
2260	Compliance with Skin Radiotherapy Protocol in the BHOC	Kamalnayan Gupta		X			
2264	Re-audit of Cardiac Function Assessment for Patients on Adjuvant Trastuzumab (Herceptin) - NICE TAG 107	Anna Sanders			X		
2265	High Dose Rate Brachytherapy in Prostate Cancer- NICE IPG 174	Ahmed Aziz		X			
2320	Isotopes/Thyroid - Patient Preparation Prior to Radioiodine Ablation	Mary Simmonds		X			
2357	Erlotinib in the Treatment of Non-small Cell Lung Cancer - NICE TAG 162	Paul Flinders		X			X
2358	Irinotecan, Oxaliplatin and Raltitrexed for the Treatment of Advanced Colorectal Cancer - NICE TAG33	Jo Botton		X			X
2444	National Audit of Single Fraction Radiotherapy for Bone Metastases - Royal College of Radiologists	Georgia Welsh		X			X
2445	National RCR Audit of Malignant Spinal Cord Compression	Georgia Welsh		X			X
2446	National RCR Audit of Pre-operative Staging and Treatment of Rectal Cancer	Jessica Mason		X			X
2447	National RCR Audit of Late Effects of Chemo-Radiotherapy	Jo Parkinson		X			X
2487	National Audit - RCR of the Head and Neck Cancer Pre-Treatment Pathway	Matthew Beasley		X			X
2579	NHSLA 2010-11	Natalie Delaney		X			X
Subspecialty: Palliative Medicine							
2224	Preferred Place of Death	Samuel King		X			

Ref	Project Title	Audit Lead	<<	F	R	O	>>
2530	Management of Diabetes Mellitus in the Last 48 Hours of Life.	Sophie Gretton		X			X

### Summary of benefits, actions or changes achieved as a result of audit in 2009/10

1983 - A working party has been convened to examine how allergies are recorded.

1986 - Consideration is being given to the inclusion of Zoledronic acid; creatinine clearance & calcium check for each cycle in the supportive medicines part of the ChemoCare system. Senior nursing staff will remind nurses of the need to document the giving of Zoledronic acid leaflet and dental advice.

1988 - Network chemotherapy protocols have been reviewed to give clearer listing of serious/frequently occurring side effects.

2020 - As a result of this re-audit, amendments have been made to documentation to ensure clear consenting in pregnancy.

2086 - This re-audit showed that the capacity of Macmillan clinic has been increased and new clinic documentation, including space for on-treatment review clinics, is now in place

2136 - Patients have been further educated about their disease, treatment and possible side effects to raise their awareness. A dedicated clinician has been identified to improve the service so that patients requiring immediate assessment on ward 61 can be seen quickly.

2157 - Following the introduction of the new Acute Coronary Syndrome guidelines this re-audit was conducted to review the length of stay of patients reviewed by the ACS Specialist nurse. Results highlighted a reduction in average length of stay and time of admission to treadmill test.

2162 - A new proforma for referring patients with head and neck cancer due to receive radiotherapy has been implemented.

2164 - Training for nursing staff in observing Vinca Alkaloid infusions has been implemented as a result of this audit.

2165 - It has been agreed that pharmacy will not accept chemotherapy prescriptions based on a different tumour site, e.g. breast cancer prescribed on lung cancer protocol. A reminder has been sent to all clinicians regarding completion of Performance Status box on chemotherapy documentation

2167 - As a result of this audit, Pharmacists now book the second post radiotherapy appointment at first clinic to ensure treatment starts with four weeks of the completion of radiotherapy.

2196 - This audit identified the non-standardisation of band widths used on the ECGs machines. Staff awareness was raised as this is an important factor to consider this when interpreting ECGs.

2197/2604 - This re-audit identified an improvement in compliance with the standards for wound care. Further education sessions are planned.

2199 - Results from this audit identified that patients are happy with the service that the new cardiology 'one stop' clinic provides.

2203 - This audit demonstrated compliance with all standards regarding the management of chronic myeloid leukaemia (NICE Technology Appraisal Guidance 70).

2259 - It was agreed that due to concerns about the use of rituximab after an autograft, prescription will be decided on a patient by patient basis rather than committing to giving to all patients. Guidance will not be compromised as it does not refer to or specify those patients receiving an Autograft.

2260 - This audit highlighted the need for a second consultant clinical oncologist to provide cross cover for patients undergoing skin radiotherapy. This has been referred to management and the situation is under review.

2264 - Echocardiograms will now be booked at the same time as the booking of Herceptin therapy to ensure that they are carried out at appropriate time intervals. Guidelines on Herceptin cessation are now displayed in clinic rooms.

2266 - This audit of neulasta prescriptions on the Avon Haematology Unit led to the re writing of local clinical guidelines.

2267 - As a result of this audit a pre-printed consent form was introduced to improve the consent process and the documentation of risk factors. A re-audit is now being undertaken to assess the improvement in the consent process.

2320 - Changes have been made to the timing of thyroid stimulating hormone, thyroglobulin blood tests and the labelling of the bloods as a result of this audit. The Biochemistry Department is now advised of these bloods in

advance to ensure timely return of results. The Radiographer check list has also been updated and regular tutorials are in place for staff caring for radioiodine patients.

2431 - This audit highlighted overall satisfaction with the pre-assessment clinic and highlighted many positive aspects of the service.

### 3.6 SURGERY AND HEAD AND NECK

#### SUMMARY FIGURES

2008/09 roll-overs <<		44
Audits first registered in 2009/10	First audits <b>F</b>	68
	Re-audits <b>R</b>	31
	Ongoing monitoring projects <b>O</b>	8
<b>Total number of audits</b>		<b>151</b>
Completed audits		46
Current (uncompleted) audits carried forward >>		105 (includes 13 ongoing monitoring projects)

#### PROJECT LIST

"Ref." refers to the registration number of the project on the Audit Project Management Database

X indicates the audit is of the type specified

Ref	Title of Project	Audit Lead	<<	F	R	O	>>
<b>Specialty: Adult Ear, Nose and Throat (ENT)</b>							
Subspecialty: ENT (Adult)							
1744	Nutritional assessment of patients with head and neck cancer and adherence to NICE guidelines	Rebekah Stone	X	X			X
2182	NHS Litigation Authority (NHSLA) Documentation Audit - 2009	Ahmed Darwish	X		X		
2298	Re-Audit Of Antibiotic Prescribing	Rebecca Usher			X		
2326	Outpatient Management of Patients with Rhinosinusitis and Polyps Prior to Endoscopic Sinus Surgery	Elizabeth Ingall		X			
2571	Thromboprophylaxis In Adult ENT Inpatients	Manjuladevi Manickavasagom		X			X
2572	NHS Litigation Authority (NHSLA) Documentation Audit - 2010	Claire Langton-Hewer		X			X
<b>Specialty: Anaesthesia</b>							
1792	Ongoing monitoring of patients undergoing General Anaesthesia for Caesarean Section	Nick Wharton	X	X		X	X
1837	The use of monitoring devices to assess the neuromuscular function of patients	Claire Heywood	X	X			X
1968	An audit into the mean arterial pressure (MAP) ranges on ward patients post-bowel resection	Rebecca Aspinall	X	X			X
2156	Daycase haemorrhoidectomies and varicose veins - An Audit	Nancy Boniface	X	X			
2188	Prevalence and management of peri-operative iron deficiency Anaemia	James Sidney		X			X
2222	A re-audit of same day cancellations	Laura O'Sullivan			X		X
2241	An audit to assess the timing of discharge of patients following day surgery and measuring patient satisfaction	Gregory Brown		X			X
2268	Audit of safety briefing and debriefing and the WHO surgical safety checklist in Hey Groves Theatres	Sarah Ingamells		X			
2271	An audit of refused admissions and delayed discharge in Heygroves Recovery	Tamsin Glasgow			X		X
2527	Audit of Aortic Stenosis and Fractured Neck of Femur	Arivazhagan Sampath		X			X

Ref	Title of Project	Audit Lead	<<	F	R	O	>>
2529	Audit of Neuro-Axial Blockade Documentation	Arivazhagan Sampath		X			X
Subspecialty: Acute Pain Service							
2209	Audit of anaesthetic technique and postoperative analgesia in patients undergoing lower limb amputation	Nilesh Chauhan		X			X
2273	Audit of use of the pain observation form for pain assessment at UHBristol	Nilesh Chauhan		X			
Subspecialty: Obs & Gynae Anaesthesia							
1704	Audit of accidental dural puncture (ADP)	Mark Scrutton	X	X		X	X
1966	An audit of seniority of anaesthetist managing morbidly obese (BMI>40) obstetric anaesthetics	Mark Scrutton	X	X			
1967	Safe administration of epidural medicines - NPSA safety alert 21	Mark Scrutton	X	X			
2212	Organisation of staffing levels: Anaesthetists - CNST Standard 1: 5.	Mark Scrutton			X		
2216	Re-audit of management of placenta praevia and caesarean section	Nick Wharton			X		X
2217	Re-audit of post caesarean section analgesia	Nick Wharton			X		X
2423	Audit of Blood Pressure control at elective Caesarean Section	Neil Muchatuta		X			X
Specialty: Pre-Operative Assessment							
2138	The use of coagulation testing in pre-operative assessment (NICE CG3)	Richard Jones	X	X			X
2148	Lifestyle advice in preoperative assessment	Mathew Thomas	X	X			X
2307	A comparative retrospective audit of F1 and nursing staff performance in assessing elective surgical patients in POAC	Clare Evans		X			X
2318	Audit of Patient Body Mass Index (BMI), ASA Grade and Smoking Status in Pre-op Assessment Clinic	Claire Dowse		X			X
<b>Specialty: Dental &amp; Maxillofacial Surgery</b>							
2117	NHS Litigation Authority (NHSLA) Documentation audit 2009 - Dental Hospital	Jon Penny	X		X		
2371	Salivary gland imaging audit	Jennifer Haworth		X			X
2537	Adequacy of the radiograph request forms sent to the dental radiology department	Adele Cordy			X		X
2577	NHS Litigation Authority (NHSLA) Documentation Audit - 2010 - Dental	Chris Bell			X		X
Subspecialty: Oral & Maxillofacial Surgery							
1955	Neck Lump Clinic and FNA results in the Oral and Maxillo Facial Surgery Department	Esther Perera	X		X		X
2201	Condition of surgical margins in resections for cancer of the oral cavity and oropharynx	Chris Bell		X			X
2310	Head and Neck Cancer GP and patient communication - NICE guideline CSGHN, 2004	Chris Bell			X		
2414	National Head and Neck Cancer Comparative Audit (DAHNO)	Teresa Levy		X		X	X

Ref	Title of Project	Audit Lead	<<	F	R	O	>>
2522	Access to primary dental care in patients admitted to hospital with dental infection	John Collin		X			X
2542	Dental Care and Management of Oral Cancer Patients Undergoing Radiotherapy in Bristol	Chris Bell			X		X
2543	Apicectomy referrals	Chris Bell			X		X
2544	Management of Oral Surgery Patients on Anti-Platelet / Anti-Coagulation Therapies	Tim Collins			X		X
Subspecialty: Oral Medicine							
2071	Medical and neurosurgical intervention in managing trigeminal neuralgia	Sarah Ellison	X		X		X
2172	Antibiotic prophylaxis for patients at risk of developing infective endocarditis - NICE CG64	Sarah Ellison	X	X			
2195	Compliance with antibiotic prescribing and monitoring in the Primary Care Unit	Clare Gleeson		X			
2538	Standard of referral letters to Oral Medicine department at BDH	Rachel Fletcher			X		X
Subspecialty: Orthodontics							
2173	Orthodontic treatment and General Dental Practitioner (GDP) attendance [includes standard from NICE CG19]	Nikki Attack	X	X			
2261	Cephalometric outcomes of orthognathic surgery	Hem Shah		X			
2262	A re-audit of orthodontic instrument trays from the decontamination unit: Are they of a satisfactory standard?	Hem Shah			X		X
2311	Treatment pathway for multidisciplinary patients	Hem Shah		X			
2340	National Audit of Mini Screws / Temporary Anchorage Devices (TADs) - NICE IPG 238	Nigel Harradine		X			X
2364	Lost orthodontic appliances	Hem Shah		X			X
2399	Broken brace clinic	Hem Shah		X			X
2408	Incidence of infected titanium plates following orthognathic surgery	Hem Shah			X		X
2494	Study Model Quality at the Bristol Dental Hospital	Elizabeth Paice		X			X
2540	Referral and management of patients diagnosed with obstructive sleep apnoea	Chris Barker			X		X
Subspecialty: Paediatric Dentistry							
1750	Longevity of Fissure Sealants	Christine Casey	X	X			X
2050	Are radiographs being taken when children are assessed for routine extractions under general anaesthesia?	Rachel Fletcher	X		X		
2263	Users' views of the paediatric dental clinic	Lucy Williams			X		
2336	Continuing oral healthcare in children at risk of developing infective endocarditis [NICE CG64]	Rebecca John		X			X
2541	Consent for inhalation sedation for children	Deborah Franklin			X		X

Ref	Title of Project	Audit Lead	<<	F	R	O	>>
2545	Extraction of first permanent molars (FPM) of poor prognosis in children.	Sakirat Toyin Balogun		X			X
Subspecialty: Primary Care Dental Services (PCDS)							
2554	Medical History taking within the BANES zone of UH Bristol Primary Care Dental Service	Elizabeth Scott		X			X
2555	Adherence to Conscious Sedation Guidelines within UHB PCDS clinics	Tina Huckle		X			X
Subspecialty: Restorative Dentistry							
2174	Patient experience during attendance at a consultant clinic	Daryll Jagger	X	X			
2175	Cast cobalt chromium frameworks: Quality of information given to lab technicians by clinicians	Jagdip Kalsi	X	X			
2176	Quality of cast chromium metal frameworks constructed by dental technicians to prescriptions from dentists	Jagdip Kalsi	X	X			
2239	Quality of laboratory prescription forms, special trays and wax rims made at the Bristol Dental Hospital	Rob Jagger		X			
2290	Patient referrals for prosthetics at Bristol Dental Hospital	Rob Jagger		X			
2365	Quality of prescriptions given to crown and bridge laboratory	Aliza Jesani		X			X
2366	Success and failure of Dental Implants in BDH	laire Forbes-Haley		X			X
2539	Dental undergraduate treatment plans	Jennifer Morecroft		X			X
<b>Specialty: Integrated Critical Care Services</b>							
160	Intensive Care National Audit and Research Centre (ICNARC) Database	Tim Gould	X	X		X	X
537	Potential Donor Audit	Fran O'Higgins	X	X		X	X
2206	Audit of the use of the "Do not attempt resuscitation" (DNAR) form in the Bristol Royal Infirmary.	Fiona Duncan		X			
Subspecialty: ITU/HDU							
1991	Therapeutic Hypothermia for Cardiac Arrest on ITU	Matt Thomas	X	X			X
2146	An audit of sepsis management in intensive care patients - Surviving Sepsis Campaign	Aliesje Kuur	X	X			X
2155	Effectiveness of use of Bristol Observation Chart: Transfers to ITU or HDU [NICE CG50]	John Hadfield	X	X			
2189	Are Critical Care Nurses filling in a bereavement checklist following the death of a patient?	Louise Jenkins		X			X
2327	Audit of the compliance with the Liverpool Care Pathway (LCP) in Palliative Care on General ITU	Steve Cantellow		X			X
2332	Audit of Renal Investigation performed on ITU patients with Acute Kidney Injury (AKI)	Rachel Bennett		X			X
2359	Audit of ITU acquired Hypernatraemia and subsequent treatment within Intensive Care	Jonathan Lightfoot		X			X
2373	Audit on the management of hyperglycaemia in ITU patients	Vaseilios Chortis		X			X
2492	Delirium Monitoring in ITU and HDU Patients at the BRI	Charlotte Kenyon		X			X

Ref	Title of Project	Audit Lead	<<	F	R	O	>>
Subspecialty: Outreach Critical Care							
1826	Audit of critical care nurses offering the choice of tissue donation to newly bereaved relatives	Louise Jenkins	X	X			
2342	Emergency Anaesthesia outside the Operating Theatre	Matt Thomas		X			X
2404	"Score to Door" time. An audit of ward admissions to HDU/ITU	Elizabeth Pellowe		X			X
<b>Specialty: Ophthalmology</b>							
2576	NHS Litigation Authority (NHSLA) Documentation Audit - 2010 - Eye	Tonia Didcott			X		X
Subspecialty: A&E and Primary Care							
1936	Bristol Eye Hospital A+E Breaches	Jocelyn Cherry	X	X			
2269	Patients presenting with floaters and flashes to Bristol Eye Hospital Emergency Department	Gill Sefton		X			
2345	Bristol Eye Hospital A&E 4 hour breaches - re-audit	Elisabeth MacDonald			X		X
2353	Eye A&E Follow Up Patients - re-audit	Elisabeth MacDonald			X		X
Subspecialty: Cornea & Cataracts							
2001	Incidence and causes for 2 lines of Snellen visual acuity loss following phacoemulsification and intraocular lens implantation	Petros Aristodemou	X	X			
2093	Patient follow-up after posterior YAG capsulotomy	Panos Georgoudis	X	X			
2213	Outcomes of cataract surgery in diabetic patients	Matthew Wakefield		X			X
2362	Ocular biometry	Nat Knox Cartwright		X			
2413	Conversion rate of patients being referred through the new combined clinic for cataract surgery	Kevin Holmes			X		X
2463	2nd eye cataract surgery following evaluation of quality of vision with quality of life questionnaire	Panos Georgoudis		X			X
Subspecialty: Glaucoma & Shared Care							
2177	Glaucoma outpatient follow up appointments at Bristol Eye	Sonia Yong	X		X		
2481	Bristol Eye Hospital Argon Laser Trabeculoplasty (ALT) using the Pascal laser machine	Bashar Mohammed		X			X
Subspecialty: Medical & Surgical Retina							
1874	Assessment of Diabetic retinopathy at Bristol Eye Hospital	Sanjiv Banerjee	X	X			
1953	Timely management of diabetic retinopathy at Bristol Eye Hospital	Clare Bailey	X		X		
2000	Reduction of risk of transmission of Creutzfeldt–Jakob disease (CJD) via interventional procedures - NICE IPG196	Jenny Ward	X	X			
2068	Outcomes following Pars Plana Vitrectomy for retinal detachment	Rhianwen Jones	X		X		
2252	Outcomes following Pars Plana Vitrectomy for retinal detachment	Nia Jones			X		
2441	Lucentis Outcomes 2009 - NICE TAG 155	Brad Johnson			X		X



Ref	Title of Project	Audit Lead	<<	F	R	O	>>
2551	Is our management of diabetic retinopathy in line with national and local guidelines?	Sajjad Haider			X		X
<b>Specialty: Orthoptics &amp; Optometry</b>							
2381	Referrals to Orthoptic service at school nurse vision screening	Ann Starbuck		X			X
<b>Subspecialty: Paediatrics, Oculoplastics &amp; Squint</b>							
2094	Identifying patients requiring Retinopathy of Prematurity (RoP) screening	Roland Bunting	X		X		
2149	Children's ophthalmology clinics at North Bristol NHS Trust: waiting times and quality of service	Cathy Williams	X	X			X
2204	Is simple punctual stenosis appropriately assessed and treatment effective? Re-audit	Adam Ross			X		X
2254	Vision follow-up and results of treatment for children treated for Retinopathy of Prematurity	Cathy Williams		X			
2312	External Dacryocystorhinostomy (DCR)	Julia Hale			X		X
2313	Adult Squint Surgery Outcomes 2007/2008	Julia Hale			X		X
2334	Nurse-led management of patients with lid lumps	Mohan Mundasad		X			
<b>Specialty: Orthopaedics (T&amp;O)</b>							
1975	An audit of Trauma operating notes	Sahar Abdul Rahim	X	X			
2033	Improving Hand Hygiene at the Bristol Royal Infirmary (Audit and Re-Audit)	Koyes Ahmed	X		X		
2205	The role of patient information leaflets in consent for Trauma/Orthopaedic Surgery: Do they help patients better understand the risks?	Hannah Smith		X			X
2210	Audit on the use IV fluids for resuscitating the peri-operative surgical patient	James Ansell		X			X
2240	Adult Peri-operative Normothermia (NICE CG 65)	Rebecca Griggs		X			X
2283	The orthopaedic referrals process - documentation of key decisions	Hannah Smith		X			X
2415	Compliance with NHS South West targets on time to surgery for Acute trauma admissions	Nnamdi Obi		X			X
2426	Management of Severe Open Lower Limb fractures	Nnamdi Obi		X			X
2486	The National Hip Fracture Database	Rachael Bradley		X		X	X
2489	Audit of Ankle Fracture management at the BRI	Andrew Barnett		X			X
2568	National Joint Registry	Gerry Baber		X		X	X
2592	Health Protection Agency - Surgical Site Infection Surveillance	Gerry Baber		X		X	X
<b>Specialty: Surgical Specialties</b>							
2159	Use of the Bristol Observation Chart - Division of Surgery	Jane Palmer	X	X			
2208	An audit of Pre-operative assessment for Elective Surgical Patients out of hours at the BRI	Sheona Burns		X			

Ref	Title of Project	Audit Lead	<<	F	R	O	>>
2234	Use of the Bristol Observation Chart - Division of Surgery	Jane Palmer		X		X	X
2354	A Re-audit of Gentamicin Prescribing and Monitoring within UHBristol	Joseph Manjaly			X		X
2360	Audit into Blood culture taking procedures in the trust	Rebecca Martin		X			X
2525	An audit of Post-operative Fluid Management	James Lopez Bernal		X			X
Subspecialty: Breast Surgery							
2253	Re-audit of Cancer Standards	Angela Nicholson			X		X
2483	The National Mastectomy and Breast Reconstruction Audit	Angie Nicholson		X			X
Subspecialty: Lower GI (Gastrointestinal) Surgery							
2190	Venous Thromboembolism Prophylaxis in Acute Surgical Admissions in the Bristol Royal Infirmary	Peter Steed		X			X
2191	Reduction of Surgical Site Infections in Colorectal Surgery	Peter Vaughn-Shaw		X			X
2256	Nutritional support for pre-operative colorectal patients	Richard James		X			
2482	National Bowel Cancer Audit (NBOCAP)	Rob Longman		X			X
Subspecialty: Thoracic Surgery							
553	SCTS Thoracic Surgery Return	Tim Batchelor	X	X		X	X
Specialty: Upper GI (Gastrointestinal) Surgery							
1855	An audit to evaluate the role of the multi-disciplinary cancer team in recruiting patients into a National Randomised Trial, OEO5	Jane Blazeby	X	X			X
2314	An audit of the management of relapsed gastric cancer and reasons for poor recruitment to the COUGAR-02 trial	Jane Blazeby		X			X
2329	Audit of Laparoscopic Surgery in Oesophago-Gastric Malignancy	Paul Barham		X		X	X
2407	The Role of Multi Disciplinary Teams in Decision Making for Patients with Recurrent Disease	Thomas Fox		X			X
2484	The National Oesophage-Gastric Cancer Audit	Paul Barham		X		X	X
Subspecialty: Urology							
2405	NICE CG58 - Trans-Rectal Ultra Sound (TRUS) Prostate Biopsy guidance adherence	Kim Davenport		X			X
Subspecialty: Vascular Surgery							
1970	Audit of Radiofrequency Ablation of Varicose veins VNUS CLOSURE Fast	Nicola Laurence	X	X			X
1973	Management and complications following Carotid Endarterectomy	Neil Upadhyay	X	X			
2200	Management and Complications of Carotid Endarterectomy (Re-audit Project 1973)	Neil Upadhyay			X		X
2485	The National Carotid Interventions Audit (Round 2)	Peter Lemont		X		X	X
2526	Audit of Follow-up of EVAR at the BRI	Vera Lees		X			X

## Summary of benefits, actions or changes achieved as a result of audit in 2009/10

- 1936 - The results of this audit demonstrated good compliance with a Department of Health waiting target and assisted in the service redesign of Eye Casualty department in order to achieve new regional targets.
- 1953 - This audit demonstrated compliance with National Screening Committee criteria for hospital treatment of patients with diabetic retinopathy.
- 1966 - Work is under way to ensure adequate consultant anaesthetist cover to maintain safe practice as directed by CEMACH.
- 1967 - This project has been able to provide assurance to the NPSA and the trust, that our procedures governing the administration of epidural medication are safe.
- 1973 - The project has highlighted areas of inefficiency in the admission and treatment of Carotid Endarterectomies following TIA or CVA. Divisional Management are involved in "streamlining" the process.
- 2000 - The audit confirmed that the Eye Hospital system for reducing the risk of transmission of Creutzfeld-Jakob Disease through interventional procedures is succeeding in preventing instruments migrating between sets for retinal procedures.
- 2001 - The results of this audit established that the rate of loss of 2 lines of Snellen Visual Acuity at the Eye Hospital was better than the rate reported in the literature.
- 2050 - This re-audit demonstrated a significant improvement in the proportion of patients with radiographs taken prior to General Anaesthetic at the Dental Hospital since the original audit in 2006, from 62% to 96%.
- 2093 - This audit led to improvements in information for staff and patients on follow-up after YAG-laser capsulotomy at the Eye Hospital. The results showed that complication rates at the Bristol Eye Hospital were better than those reported in the literature.
- 2094 - This audit demonstrated that the Retinopathy of Prematurity screening service run by an Eye Hospital consultant is effective in identifying all patients requiring examination
- 2117 - The audit demonstrated continued good practice in certain areas of record-keeping at the Dental Hospital and identified other areas for improvement.
- 2206 - Foundation doctors have had extended teaching on the appropriate reasons for filling a Do Not Attempt Resuscitation form. The form has now been standardised across the Trust.
- 2173 - This audit has led to improved communication with patients of the need to continue to visit their General Dental Practitioner while receiving orthodontic treatment.
- 2174 - High levels of patient satisfaction with Restorative Dentistry consultant clinics were established through this audit; 99% of patients rated the care they received as Good to Excellent.
- 2176 - Further training for laboratory staff to further improve the quality of cast chromium metal frameworks at the Dental Hospital has been implemented.
- 2177 - Improvements on all standards since a previous audit of glaucoma follow-ups in 2006 were demonstrated. Good practice with regard to appropriate patients being seen on the clinics was also established.
- 2208 - This audit highlighted the difficulties faced by Foundation Doctors in clerking patients out of hours. This has been addressed by increased teaching sessions on the appropriate methods of clerking. Closer working with the Booking Office has meant that more patients are passing through Pre-Op Assessment, particularly those who are admitted on the Day of Surgery. A re-audit is planned following the complete rollout of Day of Surgery Admission.
- 2212 - The audit identified staffing level deficiencies at St Michael's Hospital and has led to a joint business case being put together by the relevant Divisions. Increased provision for anaesthetic support is planned within the next few months.
- 2252 - The audit demonstrated that a good primary reattachment rate was maintained after the introduction of new instruments and showed low per-operative and 1-3 month complication rates following retinal detachment surgery at the Eye Hospital.
- 2254 - A low complication rate for laser treatment of Retinopathy of Prematurity compared to the target set from the literature was demonstrated by this audit.
- 2256 - A revised patient information leaflet is in the process of being introduced to improve compliance with pre-op nutritional requirements.
- 2261 - This audit demonstrated that appropriate patients are receiving orthognathic surgery at UHBristol.
- 2263 - A high level of patient satisfaction with Paediatric Dental clinics was identified.
- 2268 - Valuable baseline data for the rollout of the World Health Organisation Checklist and Productive Operating Theatre work was provided by this audit. Areas of lowest compliance to standards were identified so that

education and teaching could be targeted. As a result our compliance with WHO Checklist completion has been very high after the initial rollout.

2269 - This audit showed that patients are managed appropriately following presentation to Eye Casualty experiencing “flashes and floaters”.

2273 - The Bristol Observation Chart has been redesigned to include a section for pain assessment. Project work surrounding this is ongoing; at present the revised Observation Chart is undergoing initial evaluations on selected surgical ward areas.

2310 - The audit demonstrated substantial improvements in communication with General Practitioners for patients with head and neck cancers since a previous audit in 2007.

2326 - A form which scores sinus symptoms before and after surgery has been introduced.

2362 - Good outcomes for ocular biometry using Partial Coherence Interferometry prior to cataract surgery were established by this audit.

### 3.7 WOMEN AND CHILDREN'S

#### SUMMARY FIGURES

2008/09 roll-overs <<		52
Audits first registered in 2009/10	First audits <b>F</b>	84
	Re-audits <b>R</b>	21
	Ongoing monitoring projects <b>O</b>	0
<b>Total number of audits</b>		<b>157</b>
Completed audits		71
Current (uncompleted) audits carried forward >>		86 (includes 17 ongoing monitoring projects)

#### PROJECT LIST

"Ref." refers to the registration number of the project on the Audit Project Management Database.  
**X** indicates the audit is of the type specified

Ref.	Title of Project	Audit Lead	<<	F	R	O	>>
<b>Specialty: Children's Services</b>							
2501	An audit of consent for genetic testing in paediatric patients	Karen Low		X			X
Subspecialty: CAMHS (Child Adolescent Mental Health)							
2134	Audit of prescribing practice in child and adolescent mental health service	Louise Molodynski	X	X			
2049	Audit of service provision for children with special needs - re audit	Ben Marsh	X		X		
2127	Are we following the Did not attend (DNA) outpatients policy within Children's Services	Katherine Penney	X	X			
Subspecialty: General Paediatrics							
2102	Audit of the use of the South West network Integrated Care Pathway (ICP) for children with diabetic ketoacidosis (DKA)	Fiona Duncan	X	X			
2154	Use of parent held child health record (PHCHR) in outpatient / ward settings	Vera Lee	X	X			
2185	NICE Guidance on atopic eczema - CG	Lindsay Shaw		X			X
2192	Reducing the harm caused by misplaced nasogastric feeding tubes - National Patient Safety Agency (NPSA) Safety Alert No 5 February 2005	Annette Marshall		X			
2245	Prescribing practice on general paediatric wards at the Bristol Royal Hospital for Children	Rachel Nestel			X		
2339	Audit of empirical antibiotic prescribing in the Bristol Children's Hospital	Helen Lee		X			
2367	Prescription of IV fluids : A reaudit	Kate Binns			X		X
2411	Peripheral venous cannula insertion and compliance with cannula care plans and VIP scores in paediatric inpatients in the Children's Hospital	Charlotte Stockley Hannah Barry		X			X
2512	Re-audit of Prescribing Practice on General Paediatric wards at Bristol Royal Hospital for Children	Jen Haylor			X		X
2559	An audit of the quality of discharge summaries for general paediatric patients at BRHC	Sarah Johns		X			X
2560	Compliance with Trust Guidelines for MRSA screening of patients transferred from other hospitals	Georgia Woodfield		X			X
Specialty: Neonatology							
1142	International, national and regional benchmarking of mortality & morbidity and resource allocation on the newborn intensive care unit	David Harding	X	X		X	X

Ref.	Title of Project	Audit Lead	<<	F	R	O	>>
1698	Audit of pre and post operative management of Tracheo oesophageal Fistula	Ali Raza	X	X			
1699	Audit to assess the accuracy of the neonatal naso-gastric tube length chart	Jennifer Kemp	X		X		X
1902	National Neonatal Audit Programme	Anoo Jain	X	X		X	X
2017	Post-natal assessment of newborns with anomalies on fetal scans	Deborah Osio	X	X			
2079	Compliance with CESDI 27/28 recommendations (re-audit)	Archana Mishra	X		X		
2080	Positioning of infants in the Neonatal Intensive Care Nursery	Sue Braithwaite	X	X			
2183	Frequency and quality of head scans in neonate	Ashraf Tarabishi	X	X			X
2300	Audit of use of pain assessment tool	Harriet Winder		X			
2301	Clinic follow up of pre-term babies less than 30 weeks	Subodh Gupta		X			X
2304	Audit of immunisation of long stay babies on NICU	Caroline Plann		X			
2319	Re-audit of NICU care plans – Blood Pressure monitoring	Carol Aldridge			X		
2380	National Comparative Audit of use of Red cells in Neonates and Children	Anthony Penn		X			X
2451	Examination of the Newborn (CNST 3.5.7)	Janet Pollard		X			
2452	Hypoglycaemia in the newborn (CNST 3.5.4)	Lisa Damsell		X			
2453	Hypothermia in the newborn (CNST 3.5.4)	Lisa Damsell		X			
2550	Seizure management in term inborn infants	Karen Luyt		X			X
2552	Use of Folic acid therapy in Direct Coombs Test positive infants	Ela Chakkarapani		X			X
Subspecialty: Paediatric Anaesthesia							
2295	Pain and postoperative nausea and vomiting (PONV) in children undergoing squint surgery	James Sydney		X			X
2297	Pre op fasting in elective and emergency patients	Mala Greampet		X			X
2315	When are children better after Tonsillectomy	Sarah Parry		X			X
2425	Non elective procedures in theatre at BRHC ; Are we meeting clinical needs in this group of patients?	Philip Segar		X			X
2466	Audit to assess the effectiveness of the guideline for pre op sickle cell screening of children at the Bristol Dental Hospital	Muthu Thadsad		X			X
2500	Maintenance of normothermia in the perioperative period at Bristol Royal Hospital for Children (BRHC)	Matthew Drake		X			X
2558	Use of Regional Anaesthesia in children	Juan Guaterol		X			X
Subspecialty: Paediatric Cardiac Services							

Ref.	Title of Project	Audit Lead	<<	F	R	O	>>
79	Post-Operative Morbidity Following Cardiac Catheterisation	Rob Martin	X	X		X	X
80	Post-Operative Morbidity Following Cardiac Surgery	Graham Stuart	X	X		X	X
81	Radiofrequency Ablation in Paediatric Arrhythmias	Graham Stuart	X	X		X	X
83	Review of peri-operative Infections	Rob Martin	X	X		X	X
947	Paediatric cardiac surgery audit (CCAD - Central Cardiac Audit Database)	Andrew Tometzki	X	X		X	X
2294	Fetal echocardiography during the second trimester for the detection of major congenital heart disease in the Southwest Region	Kalyanakumar Gurusamy		X			X
2468	Risk factors for sudden unexpected death in children following arterial shunt operation (Blalock Taussig Shunts )	Nana Akyaa Yao		X			X
Subspecialty: Paediatric Dietetics							
1957	Healthy Start Vitamin Uptake	Sarah Bergun	X	X			X
Subspecialty: Paediatric Ear, Nose and Throat (ENT)							
2410	Audit of discharge criteria for Tonsillectomies	Lucy James		X			X
Subspecialty: Paediatric Emergency Department							
1958	Audit of Bristol Bowel Management Group - Paediatric Constipation Guidance distribution and reported use in Primary Care	Wynne Smith	X	X			
2152	Management of febrile pre - school children presenting to the Emergency Department (ED)	Simon Binks	X		X		X
2153	Management of children under two years with head injuries in whom non accidental injury is suspected	Russell Jones	X	X			X
2242	Management of Gastroenteritis in the Paediatric Emergency Department	Anne Frampton		X			
2243	Urinary tract infection in children: diagnosis, treatment and long term management. NICE CG 54 (Aug 2007)	Anne Frampton		X			
2368	Implementation of (NICE) Guidelines CG47 (May 2007) of Fever in Children under Five years. An audit across Primary and Secondary Care	Samuel Davies		X			X
2455	Quality of documentation in the "cause for concern" form :Child Protection Green Form	Ann Harrison		X			
2467	Audit of paediatric asthma management	Eoin Harty		X			X
Subspecialty: Paediatric Endocrinology							
1451	National Diabetes Audit (NCASP)	Christine Burren	X	X		X	X
1786	Management of Multiple Endocrine Neoplasia (Type 2 A) Syndromes	Wendy Bailey	X	X			
1909	Re - audit of Obesity Guidelines - NICE CG 43	Jessica Williams	X		X		
1928	Correlation of clinical procedures to clinical coding applied to Endocrine admissions to the Clinical Investigations unit	Melanie Guilder	X	X			X
1942	Audit on the screening of Endocrinopathies and Cognitive Dysfunction in childhood brain tumour survivors	Christine Wei	X	X			X
2226	Guidance on the use of Human Growth Hormone (Somatropin) in children with growth failure; NICE Technology Assessment No 42, April 2002	Nicky Nicoll		X			

Ref.	Title of Project	Audit Lead	<<	F	R	O	>>
2291	Audit of annual reviews of children with diabetes submitted to the National Diabetes Audit (NDA)	Gita Modgil		X			
Subspecialty: Paediatric Gastroenterology							
2008	Management of Paediatric Inflammatory Bowel Diseases in the South West Region	Saras Hosdurga	X	X			X
2251	Referrals from primary care and BCH consultants with query constipation - were they appropriate?	Rebecca Winterson			X		
2490	United Kingdom National Inflammatory Bowel Disease Audit	Christine Spray		X			X
2561	Management of central line (CVL) related infections in children on parenteral nutrition (PN) at Bristol Royal Hospital for Children (BRHC)	Beth Hazeldine, Susan Green		X			X
Subspecialty: Paediatric Intensive Care (PICU)							
72	Regional Audit of Critical Care Outcomes (Audit of Critically Ill Children)	Carol Maskrey	X	X		X	X
1527	Chest Drain Removal in Post-op Cardiac Paediatric Patients	Sandra Cutts	X	X			X
2158	National Health Service Litigation Authority (NHSLA) Documentation audit 08/09	Sarah Goodwin	X	X			
2284	Audit of rib fracture in children	New Soe		X			
2356	Audit of PICU acute lung injury guidelines in relation to use of nitric oxide and surfactants	Parasuraman			X		X
2461	Identification and presumptive treatment of H1N1 in severely ill children	Anna Seale		X			X
2548	PICU Discharge delay audit 2010	Tracey Phillips		X			X
Subspecialty: Paediatric Nephrology							
1788	Advice given to children with isolated scars on DMSA scan	Jonathan Graham	X	X			X
2006	Audit of prescription and administration of blood products in paediatric nephrology patients	Anna Kilonback	X	X			X
2181	Audit of prescribing drugs on discharge from renal ward	Karim Shebani	X	X			X
2225	Paediatric renal biopsy audit September 04 - September 07	Ezzat Affifi			X		
2285	Retrospective audit of anaemia in paediatric patients with CKD stage 5 disease 2003- 7	Shazia Adlat		X			X
2287	An audit of the care of patients undergoing renal transplantation at the Bristol Royal Children's Hospital	Hugh McCarthy			X		X
2419	Compliance with current guidelines of MRSA swabs on the paediatric nephrology ward	Joanne Humphreys		X			X
Subspecialty: Paediatric Neurology							
2035	Re-audit of specialist epilepsy referral and neurological investigations - NICE CG 20	Andrew Lux	X		X		
2303	Investigations, treatment and outcome of childhood stroke	Jimmy Kai Fai Sun		X			X
Subspecialty: Paediatric Oncology							
1593	Perinatal transmission of HIV: audit of infected infants born in England between 2002 and 2005	Lizzie Hutchison	X	X			X



Ref.	Title of Project	Audit Lead	<<	F	R	O	>>
2151	End of life planning in paediatric oncology	Balveer Kaur	X	X			
2286	Audit of pentamidine administration: a retrospective and prospective study of both adult and paediatric patients post stem cell transplant"	Caroline Roberts		X			X
2288	Audit of Vancomycin prescribing	Rebecca Palmer		X			X
2465	Aseptic non touch technique audit 2009-10	Wendy Saegenschnitter			X		X
Subspecialty: Paediatric Radiology							
2228	Audit of diagnosis of intestinal malrotation	Nicola Matcham		X			X
2338	Audit of paediatric radiographs	David Grier		X			
Subspecialty: Paediatric Respiratology							
2007	Timeliness of letters from the Respiratory Department	Mala Raman	X	X			
2103	Audit of effectiveness of Epipen training in nursery school staff	Fiona Duncan	X	X			
2106	British Paediatric Respiratory Society / British Thoracic Society Asthma Audit 2008	Deb Marriage	X		X		X
2244	Anaphylaxis : An audit of management in the Children's Emergency Department	Jon Courts		X			X
2434	Parental satisfaction in a nurse led paediatric clinic	Deb Marriage			X		X
2462	Prednisolone prescription in viral induced wheeze	Laura Hinchcliffe		X			X
Subspecialty: Paediatric Surgery							
2122	Neonatal inguinal hernia repair at Bristol Children's Hospital	Oliver Old	X	X			
2229	National Institute for Health and Clinical Excellence (NICE) Guidance on Surgical Site infection	Andrew Robb		X			
2232	Audit of diagnostic imaging for antenatally diagnosed congenital lung lesions	Kamran Mahmood		X			X
2372	Length of stay and complication rate for laparoscopic pyloromyotomy	Kathryn Evans		X			
2374	Outcomes following laparoscopic orchidopexy	Kathryn Evans		X			X
2422	Audit on training and development opportunities for paediatric surgical trainees	Joanne Bareham		X			
2464	Oral care in paediatric bone marrow transplant patients	Tim Hall		X			X
2491	National neonatal surgical prospective audit	Laura Coates		X			X
2505	Audit of paediatric lymphoma waiting times. National Targets	Tim Rogers		X			
Specialty: Paediatric Trauma & Orthopaedics (T&O)							
1827	Audit of management of patients' undergoing external fixation from pre - admission to three months post discharge	Sharron Carrie	X	X			X
2296	Audit of referrals to the paediatric orthopaedic department for patients with suspected malignancy	Jennie Cox		X			X

Ref.	Title of Project	Audit Lead	<<	F	R	O	>>
<b>Specialty: Women's Services</b>							
Subspecialty: Gynaecology							
231	The collection of regional gynaecological cancer for the purposes of audit and improvement of management	John Murdoch	X	X		X	X
1945	National audit of invasive cervical cancers	Robert Anderson	X	X		X	X
2180	South West Cancer Intelligence Services Uterine Cancer Quality Assurance Audit	Diana Bailey	X	X			X
2278	NHSLA Litigation Authority (NHSLA) Documentation Audit	Karen Brooke			X		
2316	Early Pregnancy Clinic	Zoey Robinson		X			X
2457	Obtaining consent for laparoscopic procedures	Shahad Hussein		X			X
2523	Appropriate use of anaesthetic for hysteroscopy	Claire Chisholm		X			X
2566	Re-audit of assessment and prophylaxis for venous thromboembolism in gynaecology (NICE CG 46)	David Hoy			X		X
2567	Compliance with MDT decision for Gynae Oncology patients	Katharine Edey		X			X
2581	NHS Litigation Authority (NHSLA) Documentation Audit – Gynaecology 2010	Jackie Moxham			X		X
Subspecialty: Obstetrics and Midwifery							
633	Audit of blood usage on Central Delivery Suite	Annie Tizzard	X	X		X	X
1638	A series of audits of UNICEF UK Baby Friendly Initiative best practice standards	Sally Tedstone	X		X	X	X
1841	Obstetrics transfusion and iron survey (OTIS).	Sucheta Mane	X	X			
1876	Re-audit of fetal monitoring in labour (CNST 3.2.2 and 3.2.3)	Aruna Naware	X		X		
2074	External Cephalic Version (ECV) notes documentation	Osman Otashi	X		X		
2077	Thromboprophylaxis in post-partum period (NICE CG13)	Zoey Robinson	X		X		
2135	Vaginal Birth After Caesarean Section (VBAC)	Chloe Broughton	X		X		
2275	Diabetes in pregnancy (NICE CG63, CNST 3.3.9)	Sonia Barnfield		X			
2276	Re-audit of the management of Shoulder Dystocia at St Michaels Hospital	Joanna Clark			X	X	X
2277	Drug prescription errors in the obstetric department.	Bryony Strachan		X			
2279	Midwife - Anaesthetic Practitioner Handover	Nicky Ellis		X			
2280	Audit of antenatal screening tests (CNST 3.4.5)	Wendy Ring		X			
2281	Outcomes for women meeting NICE criteria, but not UHBristol criteria, for diagnosis of gestational diabetes (NICE CG63)	Belinda Cox		X			

Ref.	Title of Project	Audit Lead	<<	F	R	O	>>
2282	Re-audit of the guidelines for pre eclampsia and severe hypertension (CNST 3.3.1)	Chris Hyland			X		
2321	National Screening Committee Audit Haemoglobinopathies, Infectious Diseases, Downs Screening and Newborn Blood spot - (NICE CG 62)	Wendy Ring		X		X	X
2322	Use of syntocinon in induction and augmentation of labour (CNST 3.2.5, NICE CG 55, 70)	Monique Latibeadiere			X		
2324	Referral when fetal abnormality detected	Mark Denbow		X			
2325	Women who refused transfusion of blood or blood products	Murali Subramanian		X			
2383	Booking appointments (CNST 3.4.1)	Sara-Jane Sheldon		X			
2384	Missed Appointments (CNST 3.4.2)	Sara-Jane Sheldon		X			
2385	Audit of Clinical Risk Assessment (antenatal and in labour - CNST Standards 3.4.3, 3.4.6)	George Attilakos		X			
2386	Monitoring the Fetus in Labour - Fetal Blood Sampling (FBS)	Claire Chick		X			
2387	Re-audit of use of fibronectin test	Eloise Weeks			X		X
2388	Management of pregnant women with high BMI (CNST 3.3.10, NICE CG 55)	Becca Rice			X		
2391	Caesarean section monitoring	Emma Treloar		X		X	X
2393	Monitoring documentation for management of perineal trauma (CNST 3.3.5)	Rachna Bahl			X		
2406	Maternity High Dependency Care (CNST 3.2.9)	Alexander Middleditch		X			
2428	Maternity Records (CNST 3.1.7)	Val Conibere		X			
2443	Care of women in Labour (CNST 3.2.1, NICE CG55)	Di Dorrington		X			
2448	Audit of Recovery (CNST Standard 3.2.7)	Alia Darweish		X			
2449	Obstetric haemorrhage (CNST 3.3.7)	Ann Tizzard		X			X
2450	Operative Vaginal Delivery (CNST 3.3.3)	Charlotte Sullivan		X		X	X
2454	Postnatal information provision (CNST 5.4.10)	Lisa Damsell		X			
2514	Maternal transfer	George Attilakos		X			
2524	Re-audit of the implementation of Modified Obstetric Early Warning Score (MEOWS) charts at St Michaels Hospital Delivery Suite (CNST 3.2.8)	Emma Treloar			X		
2528	Emergency department admissions for pregnant women (CNST 3.4.10)	George Attilakos		X			
2532	Maternal transfer (CNST 3.4.8)	Lisa Damsell		X			
2562	Re-audit of management of epilepsy in pregnancy (NICE)	Lidia Kwasnicka			X		X

Ref.	Title of Project	Audit Lead	<<	F	R	O	>>
2564	Provision and discussion of information during ante-natal, intrapartum and post-natal periods (CNST 3.4.4)	Sara-Jane Sheldon		X			

### Summary of benefits, actions or changes achieved as a result of audit in 2009/10

- 1841 - Following participation in this national audit of management of anaemia in pregnancy, review of local systems and re-audit are in progress.
- 1876\* - Guidelines have been publicised and processes put in place to ensure recording stickers are available as a result of this audit.
- 1909 - This re-audit led to improvement in adherence to standards outlined within NICE recommendations for treating obesity in children.
- 2017 - Systems have been reviewed by the Postnatal Working party to ensure information is being recorded in new maternity notes appropriately.
- 2035 - An Epilepsy Specialist Nurse is now in place as recommended by the NICE guidelines.
- 2074 - A new tocolytic drug has been introduced.
- 2077 - The Caesarean section form has been revised to make the section for recording risks factors more apparent.
- 2079 - As a result of this audit, the systems for preparation for deliveries of extreme pre-term babies were revised to bring them in line with national recommendations.
- 2080 - Training of positioning infants in the Neonatal Intensive Care Nursery has been incorporated into neonatal induction study day.
- 2102 - The guidelines for the treatment of children with diabetic ketoacidosis (DKA) have been rewritten following the results of this audit and feedback from south west staff survey.
- 2103 - A training package on the use of Epipens (adrenalin administration) has been rolled out to nursery schools in the community.
- 2122 - As a result of this audit, babies are now immediately admitted following diagnosis of inguinal hernia and operated on at the next available surgical slot; a re-audit is currently underway to quantify the perceived benefits of this change in practice.
- 2135 - Following this audit a care plan for Vaginal Birth after Caesarean Section was drafted.
- 2179 - Local guidelines for the management of pre-eclampsia and eclampsia were revised and poster prompts provided on HDU following this audit.
- 2184 - Following this audit of the implementation of Modified Obstetric Early Warning Score (MEOWS) charts, the guideline was revised and training in use of charts provided at Obstetric Emergency, Maternal Critical Care & Clinical Update training.
- 2192 - A paediatric clinical skills training package for placing nasogastric tube feeding is currently being designed.
- 2225 - This audit demonstrated a low complication rate compared to National Renal Standards.
- 2229 - This audit confirmed best practice for use of post operative antibiotics for children undergoing appendicectomies. A patient information leaflet has subsequently been developed.
- 2242 - This audit confirmed best practice against NICE Guidance for children presenting with gastroenteritis.
- 2275 - Following this audit of diabetes in pregnancy it was agreed that systems for provision of contraception advice should be reviewed. The diabetes proforma will be flagged with anaesthetists at induction.
- 2277 - Following this audit of drug prescription errors a number of actions were implemented. A poster was prepared for Central Delivery Suite, the prescription chart was revised and stickers with relevant information were produced.
- 2282\* - The guidelines for pre-eclampsia and severe hypertension, awareness regarding fluid restriction has been raised via study days.
- 2319 - Following this audit of Blood Pressure monitoring, guidelines for blood pressure monitoring are now on the Document Management System and a laminated copy in every baby's care plan folder.
- 2324\* - This audit demonstrated that the appropriate referral process when fetal abnormality is detected was being followed.
- 2325\* - This audit demonstrated that women who refused transfusion of blood or blood products were being treated appropriately.
- 2339 - A continuous monitoring process has been adopted as part of compliance with UHB Medicines Code.
- 2372 - New equipment for patients undergoing laparoscopic pyloromyotomy has been purchased following.

2388\* - A care pathway sheet for hand held record was implemented, the equipment list was modified and compliance checked.

2406\* - The data fields on Ulysses incident database were modified and continuous audit of transfers to BRI commenced.

2410 - As a result of this audit, changes to booking systems have been made to ensure that tonsillectomies are booked as day cases on morning lists. The booking form has also been adapted to include documentation of social criteria.

2428\* - Following this audit of maternity records guidelines were laminated and displayed at Midwives stations.

2443\* - The vaginal examination sticker was re-designed and re-launched and bladder care guidance published in "Hot Topic" Newsletter.

2451\* - The number of examinations carried out will now be checked at midwife annual appraisals.

2452\* - Following this audit of hypoglycaemia in the newborn a review of feeding after caesarean section was recommended, together with re-education and auditing of the hypoglycaemia protocol in "at risk" babies.

2453\* - Following this audit of hypothermia in the newborn a review of thermal control management after caesarean section was initiated.

2524\* - Following this re-audit of the implementation of Modified Obstetric Early Warning Score (MEOWS) charts at St Michael's Hospital, the guidance on back of charts is to be revised and disseminated to Wards.

2532\* - A communication tool for NICU to Ward transfers was produced.

2560 - This re-audit has led to improved MRSA screening rates; an increase from 23% to 75%. The introduction of a check list to improve results further is in discussion.

\*These audits were part of successful assessment for CNST 3 February 2010.

### 3.8 NON-DIVISION SPECIFIC

#### SUMMARY FIGURES

2008/09 roll-overs <<		5
Audits first registered in 2009/10	First audits <b>F</b>	7
	Re-audits <b>R</b>	0
	Ongoing monitoring projects <b>O</b>	0
<b>Total number of audits</b>		<b>11</b>
Completed audits		7
Current (uncompleted) audits carried forward >>		4 (includes 1 ongoing monitoring projects)

#### PROJECT LIST

“Ref.” refers to the registration number of the project on the Audit Project Management Database  
**X** indicates the audit is of the type specified

Ref	Title of Project	Audit Lead	<<	F	R	O	>>
1510	Saving Lives – a programme to reduce healthcare associated infections	Carly Hall	X	X		X	X
1620	Infection Control Clinical Care Audit	Carly Hall	X	X			
2095	Bedside Transfusion Re-audit	Soo Cooke	X		X		X
2126	Trustwide Audit of Compliance with Anaesthetic Machine Checking	Kate Thompson	X		X		
2169	Catering Ward Rounds – managing the patient journey through nutritional care	Toni Williams	X	X			X
2193	Effectiveness of use of Bristol Observation Chart: Cardiac arrests	Julia Wynn		X			
2306	Detecting discrimination against complainants	Anne Reader		X			
2341	National Health Promotion in Hospitals (NHPH) Audit	Phil Hall		X			
2369	The Prevention of Hospital Acquired Thrombosis	Sue Fyfe-Williams		X			X
2382	Delegation of consent audit	Nicola Henderson		X			
2390	Open communication following incidents and complaints	Nicola Henderson		X			

#### Summary of benefits, actions or changes achieved in 2009/10

2193 - This audit of patients suffering from cardiac arrests established that appropriate observations and actions had been undertaken in accordance with the new patient observation chart, incorporating a Modified Early Warning Score (MEWS or EWS) system.

2306 - NHSLA standards state that healthcare organisations should have systems in place to ensure that patients, their relatives and carers are not discriminated against when complaints are made. This audit confirmed that a system was in place to ensure this and that it was being followed appropriately.

2341 - This audit has led to closer workings with Bristol Public Health to help develop a Bristol-wide health promotion strategy. Ongoing work is underway in conjunction with the Bristol Stop Smoking Team to provide brief intervention training to staff as well as working with the Pre-operative assessment Clinic to develop lifestyle questionnaires. The Trust is in the process of implementing the Department of Health ‘Stop Smoking in Secondary Care’ Pilot.

2382 - Following this audit, questions will be added to the annual NHSLA documentation audit to gain further information regarding the process of delegating consent. This will insure that the process is undertaken appropriately, minimising the risk to patients.

## Appendix A - UHBristol Clinical Audit Staff

Division	Specialty	Audit Support	Role & W.T.E	Audit Convenor
Diagnostic & Therapy	Laboratory Medicine	Isabella To	Audit facilitator (0.8)	Dr Paul Thomas
	Medical Physics & Bioengineering			Mr Phil Quirk
	Pharmacy			Kevin Gibbs
	Physiotherapy			Linda Clarke
	Audiology (adult), Occupational Therapy, Orthotics, Nutrition & Dietetics, Speech & Language Therapy (adult)			<i>N/A – contact Heads of Service</i>
	Radiology	Sally King	Superintendent Radiographer, QA, Audit (estimated 0.2)	Dr Huw Roach
Medicine	Medical Specialties	Samantha Wilkinson	Audit facilitator (1.0)	Dr Robert Marshall
	Emergency Services			Dr Emma Redfern
Specialised Services	Cardiac Services	Trudy Gale	Audit facilitator (0.6)	Mr Gavin Murphy (Cardiac Surgery) Dr Mandie Townsend (Cardiology)
	Homeopathy	Sue Barron	Audit facilitator (0.2)	Dr Liz Thompson
	Oncology & Haematology	Mairead Dent	Audit facilitator (0.6)	Dr Paula Wilson
Surgery & Head & Neck	Dental Services & Maxillo-facial Surgery	Jonathan Penny	Audit facilitator (0.8)	Mr Tony Brooke
	Ophthalmology			Ms Cathy Williams
	Anaesthesia, Critical Care & Theatres	James Benwell	Audit facilitator (1.0)	Dr Mark Scrutton
	General Surgery			Mr Mark Wright
	Orthopaedics (T&O)			Mr Adrian Weale
	Adult ENT	Richard Hancock	Audit facilitator (0.8)	Ms Claire-Langton-Hewer
Obstetrics & Gynaecology	Ms Rachael Liebling			
Women & Children's	Neonatology	Chrissie Gardner	Audit facilitator (1.0)	Mr Stephen Marriage
	Children's Services			

Clinical Audit Central Office	Chris Swonnell	Assistant Director of Audit and Assurance (includes 0.25 clinical audit)
	Stuart Metcalfe	Clinical Audit Manager (1.0)
	Joanna Snietura	Audit clerk (0.8)

### Membership of the Clinical Audit Committee

Dr Carol Inward (Chair)  
 Chris Swonnell (Assistant Director for Audit and Assurance)  
 Stuart Metcalfe (Clinical Audit Manager)  
 Phil Hall (Assistant Director to the Medical Director)  
 Clinical Audit Convenors - see above



## Appendix B - Clinical Audit projects abandoned during 2009/10

The majority of the projects listed below were abandoned after the project was started (i.e. after data collection had commenced)

Division	Specialty	Sub-Specialty	Ref	Title of Project	Reason for Abandonment
Medicine	Medical Specialties	Care of the Elderly	1870	Assessment and management of patients with acute stroke	The audit lead went on maternity leave and no-one was identified to take over. The project has since been superseded by other audit work.
Medicine	Medical Specialties	Care of the Elderly	2215	Reversal of Oral Anticoagulation Therapy in Patients Presenting with Intracranial Haemorrhage	A very limited number of notes were available for this audit.
Medicine	Medical Specialties	Dermatology	2309	An audit of female patients due to be prescribed and treated with isotretinoin for acne vulgaris.	The audit lead left the Trust and the project supervisor was unable to obtain any results from the team.
Medicine	Medical Specialties	Diabetes & Endocrinology	821	Regional audit of Diabetic Pregnancies	No members of the project team remain at the Trust. Unable to obtain any results
Medicine	Medical Specialties	Respiratory	1872	Re-audit of CPAP usage and allocation CPAP in patients issued with long term CPAP	Only received an abstract which does not show full results. The project has been superseded by a recent audit of NICE guidance on CPAP
Non-division specific	Trust-wide		1820	An audit of 24 hour observation charts	The audit topic is now obsolete due to introduction of new observation chart including early warning scoring system.
Specialised Services	Cardiac Services	Cardiac Anaesthesia	1782	Cardiac Intensive Care Unit standards of care	Unable to establish any progress from the audit lead or supervisor.
Specialised Services	Cardiac Services	Cardiac Surgery (Adult)	550	UK Heart Valve Registry	National Registry – no longer running.
Specialised Services	Homeopathy		2016	Audit of Iscador Use Adherence to Guidelines	The initial project lead left the Trust. The data was therefore out of date and queries on the initial data analysis could not be answered by the new project lead.
Specialised Services	Oncology & Clinical Haematology	Clinical Haematology	2163	Assessment and Prescribing of Thromboprophylaxis - VTE Prophylaxis - Inpatients AHU	Unable to obtain any further information regarding progress from the project team
Surgery and Head and Neck	Adult Ear, Nose and Throat (ENT)	ENT (Adult)	2014	Acoustic neuroma screening in UBHT	Unable to obtain any further information regarding progress from the project team
Surgery and Head and Neck	Anaesthesia	Obs & Gynae Anaesthesia	1770	Post Caesarean Section Analgesia Audit	Unable to obtain any further information regarding progress from the project team
Surgery and Head and Neck	Dental & Maxillofacial Surgery	Restorative Dentistry	1854	Oral care of patients undergoing treatment for Head and Neck Cancer - re-audit	The audit lead left Trust without producing a final report. Full data was not available to calculate compliance with all standards.
Surgery and Head and Neck	Integrated Critical Care Services	ITU/HDU	2147	CVP line insertion in ITU and Theatre	Project lead has left trust and deanery area. There has been no interest in pursuing the project.

Surgery and Head and Neck	Integrated Critical Care Services	Outreach Critical Care	2233	Anaesthesia and intensive care services for the primary angioplasty	The pilot results were discussed within the department and it was decided that improvements in service would be better addressed through other means
Surgery and Head and Neck	Ophthalmology	Medical & Surgical Retina	1935	Audit of macula-on retinal detachments at Bristol Eye Hospital from Jan to April 2008	The audit leads left Trust without producing a final report. No report forthcoming despite assurances given.
Surgery and Head and Neck	Orthopaedics (T&O)		1832	Management of suspected scaphoid fractures	Project remained at collection stage for a prolonged period. No response from lead or supervisor as to the current status.
Surgery and Head and Neck	Orthopaedics (T&O)		2139	Hand surgery at Bristol Royal Infirmary	The audit lead has left trust and the topic is no longer a priority for the department.
Surgery and Head and Neck	Orthopaedics (T&O)		2140	Antimicrobial prophylaxis in patients at high risk of MRSA colonisation with insertion of metalwork	The audit lead has left Trust. No final project report or results available. The Trust's antibiotic guidelines have subsequently changed so the audit is now obsolete.
Surgery and Head and Neck	Orthopaedics (T&O)		2207	Comparison of the treatment of Weber B ankle fractures with medial ligament instability against current recommendations	Project abandoned due to lack of interest from lead and project team. Majority of team have rotated through different specialities and have no further interest in completing the project.
Surgery and Head and Neck	Surgical Specialties		2292	Improving the quality of information for patients on admission to STAU	Unable to contact project lead after initial discussion.
Surgery and Head and Neck	Surgical Specialties	Lower GI Surgery	1856	An audit of nutrition replacement for patients undergoing colorectal surgery	The audit lead has left the trust; unable to get any further information as to the status of the project. This audit topic has been superseded by the Enhanced Recovery Project Audit.
Surgery and Head and Neck	Surgical Specialties	Lower GI Surgery	1857	An audit of fluid replacement for patients undergoing colorectal surgery	The audit lead has left the trust, unable to get any further information as to the status of the project. This audit topic has been superseded by the Enhanced Recovery Project Audit.
Surgery and Head and Neck	Surgical Specialties	Upper GI Surgery	1972	An audit of the risks and complications of feeding jejunostomy	This project has been in progress for over 2 years. Unable to contact audit lead to establish further progress.
Surgery and Head and Neck	Surgical Specialties	Upper GI Surgery	2145	Completion of Upper GI preoperative safety checks	Unable to establish any progress from the audit lead or supervisor.
Surgery and Head and Neck	Surgical Specialties	Urology	1563	Investigation and management of microscopic haematuria	The audit was presented but the lead left without producing a report final report. Unable to obtain any further results.
Surgery and Head and Neck	Surgical Specialties	Urology	1643	Patients satisfaction of the haematuria clinic	Project lead has left the Trust prior to starting data collection. Unable to make

					any further contact with the lead.
Surgery and Head and Neck	Theatres & Central Sterile Services		2090	Instrument sterilisation in community dental clinics	The project has been superseded by an external audit
Women's and Children's	Children's Services	CAMHs (Child Adolescent Mental Health)	1947	Audit of standards of record keeping in Child and Adolescent Mental Health Services (CAMHS)	Unable to progress further. This service is no longer part of UHBristol
Women's and Children's	Children's Services	CAMHs (Child Adolescent Mental Health)	2097	Audit of timescales regarding Deliberate Self harm Assessments	Unable to progress further. This service is no longer part of UHBristol
Women's and Children's	Children's Services	Community Paediatrics	1814	Current service provision for children with Down's Syndrome	The senior clinician involved in the project has left the Trust. Unable to find a replacement.
Women's and Children's	Children's Services	Community Paediatrics	1817	Auditing Hepatitis B vaccination within the infants born to drug abusing mothers	Unable to progress further. This service is no longer part of UHBristol
Women's and Children's	Children's Services	Paediatric Anaesthesia	2045	Audit of antimicrobial prophylaxis against infective endocarditis in children undergoing interventional procedures	Insufficient data was collected to proceed with audit
Women's and Children's	Children's Services	Paediatric Cardiac Services	1738	Retrospective audit of management of pulmonary stenosis in neonates and children with balloon valvoplasty	The senior clinician involved in the project has left the Trust, unable to find a replacement
Women's and Children's	Children's Services	Paediatric Intensive Care (PICU)	1547	Bronchiolitis in need of CPAP: outcome project (BINCO)	The audit lead has left the Trust. Unable to get any further information as to the status of the project.
Women's and Children's	Children's Services	Paediatric Intensive Care (PICU)	1687	Audit of medical discharge list sticky labels	Insufficient data was collected to proceed with audit
Women's and Children's	Children's Services	Paediatric Oncology	1722	Congenital adrenal hyperplasia - from diagnosis to transfer to adult services. How are we doing?	The audit lead has left the Trust. Unable to get any further information as to the status of the project.
Women's and Children's	Children's Services	Paediatric Oncology	1914	Optimising Paediatric Haematology /Oncology patients for theatres	No response from the audit leads regarding the outcome of this project.
Women's and Children's	Children's Services	Paediatric Respiratology	1785	Serum levels of vitamin D in children with cystic fibrosis (CF)	The audit lead has left the Trust. Unable to get any further information as to the status of the project.
Women's and Children's	Children's Services	Paediatric Respiratology	1794	Asthma in schools	The audit was completed with some basic summary information but the project was not presented and no report was produced.
Women's and Children's	Children's Services	Paediatric Respiratology	2100	An audit of Palivizumab use in paediatrics	The audit lead has left the Trust. Unable to get any further information as to the status of the project.

## Appendix C - Clinical Audit projects with status of 'deferred' at end of 2009/10 financial year

The below list contains projects that were deferred in the 2009/10 financial year and that remained deferred at the end of the year.

Division	Specialty	Sub-Specialty	Ref	Provisional Title of Project	Provisional Title of Project
Specialised Services	Cardiac Services	Cardiology	1733	Closure of atrial septal defects in patients with pulmonary hypertension	The audit lead is currently on maternity leave and hopes to recommence the project on her return.
Surgery and Head and Neck	Anaesthesia		1706	Delays to theatre of patients with fractured neck of femur	A replacement project lead is being sought. The topic is still a priority within the department.
Surgery and Head and Neck	Anaesthesia	Obs & Gynae Anaesthesia	1743	Timely anaesthetic review of patients with cardiac problems presenting to the delivery suite	A replacement project lead is being sought. The topic is still a priority within the department.
Surgery and Head and Neck	Surgery	Upper GI Surgery	1978	An audit of informed consent for elective Oesophagectomy	A replacement project lead is being sought. The topic is still a priority within the department.
Women's and Children's	Children's Services	Paediatric Cardiac Services	2087	Audit of Home Anticoagulation with Warfarin in the Paediatric Cardiology Patient Group	This project will recommence in June 2010
Women's and Children's	Children's Services	Paediatric Intensive Care (PICU)	1925	Suction Audit	A replacement project lead is being sought. The topic is still a priority within the department.
Women's and Children's	Children's Services	Paediatric Intensive Care (PICU)	2168	Audit of Management of Traumatic Brain Injury in PICU	A replacement project lead is being sought. The topic is still a priority within the department.
Women's and Children's	Children's Services	Paediatric Neurology	1768	Folic acid prescription and advice in female young people with epilepsy.	A replacement project lead is being sought. The topic is still a priority within the department.
Women's and Children's	Women's Services	Obstetrics and Midwifery	1839	Audit into the management of women at high risk of preterm labour through the preterm labour clinic	A replacement project lead is being sought. The topic is still a priority within the department.

## Appendix D - University Hospitals Bristol Clinical Audit Forward Plan 2010/11

The forward plan below details projects to be carried out in the 2010/11 financial year, by Division.

### Key

PPI – whether audit involves patients/carers  
 Multi – whether audit is multi-professional/multi-disciplinary  
 Int – Interface (involves other healthcare organisations)

} Y in column indicates that this aspect is included in the proposed audit. Further details on PPI and other organisations given in Rationale

Please note that the contact in the 'Lead' column may not be the person who will carry out this audit, but the senior clinician proposing and supervising a project which they plan to delegate to a junior member of staff to carry out (who would then become the project lead). The Lead's name is followed by an indication of seniority, including abbreviations as follows:

Cons – Consultant  
 SpR – Specialist Registrar  
 SHO – Senior House Officer  
 F1/F2 – Foundation year doctor  
 Supt. – Superintendent  
 Sen. – Senior  
 CNS – Clinical Nurse Specialist  
 OT – Occupational Therapist  
 DM – Divisional Manager  
 ADM – Assistant Divisional Manager

### Division of Diagnostics & Therapies

Title	Sub-Specialty	Lead	Rationale	PPI	Multi	Int.
<b>Laboratory Medicine</b>						
Audit of cervical cancer for women under and above 35	Histopathology	Joya Pawade (Cons.)	Royal College of Pathologists. Minimum dataset for histopathological reporting of cervical neoplasia (2009)		X	X
National audit of familial hypercholesterolaemia	Clinical Biochemistry	Graham Bayly (Cons.)	<b>NICE CG71</b> Identification and management of familial hypercholesterolaemia (Aug 2008)			
Re-audit of the use of platelets	Laboratory Haematology	Soo Cooke (Transfusion Practitioner)	NHS Blood and Transplant national audit scheduled in September 2010			
Prescribing and monitoring of Vancomycin	Microbiology	Ram Lakshmipathy Liz Jonas (Anti-infectives Pharmacist) Martin Williams (Cons.)	UHBristol antibiotic guidelines		X	
Hand washing facilities and alcohol gel location	Infection Control	Michelle Lindsay (Infection Control Sister)	To ensure adequate hand washing facilities are available Trust wide and to ensure alcohol hand gel situated in the correct place.		X	
Aseptic Technique	Infection Control	Kathryn Hole (Infection Control Sister)	To ensure practice is inline with UHBristol Evidence based prevention of Infection guidelines (2007)		X	
<b>Medical Physics &amp; Bioengineering</b>						
The handover of radiology equipment		Phil Quirk (Clinical Scientist)	<b>Rollover from 09/10</b> Standards based on local handover checklist		X	

Title	Sub-Specialty	Lead	Rationale	PPI	Multi	Int.
<b>Nutrition And Dietetics</b>						
Malnutrition Universal Screening Tool 'MUST' in the Early Supported Discharge Team for Stroke	Nutrition and Dietetics	Rachel Cooke (Sen. Specialist Dietician)	UHBristol Early Supported Discharge Team Action Summary (July 2008)		X	
Catering ward round re-audit	Trustwide	Toni Williams (Chief Dietician)	<b>Re-audit ID 2169</b> NPSA (2009) patient environment action team assessments; NICE CG 32 Nutrition support in adults (Feb 2006).	X	X	
<b>Occupational Therapy</b>						
Standards for upper limb assessment	Acute Stroke	Scott Allan (Sen. OT) Bronagh Corlett (OT)	<b>Rollover from 09/10</b> Joint audit with the physiotherapy team on guidelines for upper limb assessment (2008)		X	
Respiratory care pathway	Medicine/ Respiratory	Scott Allan (Sen. OT) Fay Colvin (OT)	<b>Rollover from 09/10</b> Audit of local care pathway (April 2009)			
<b>Pharmacy</b>						
Audit of referral to UH Bristol outpatient anticoagulant service	Pharmacy	Sally-Ann Hall (Clinical Effectiveness Pharmacist) Sandra Price (Anticoagulant Pharmacist)	<b>NPSA Patient Safety Alert 18 (March 2007).</b> To determine the baseline for service standards of referral as a tool for future education and improvement			
Are appropriate antibiotic prophylaxis being given at surgery for patients known to be colonised with Methicillin Resistant Staphylococcus aureus (MRSA)	Pharmacy	Liz Jonas (Antibiotic Pharmacist)	Scottish Intercollegiate Guidelines Network (2008).		X	
<b>Physiotherapy</b>						
Joint notes audit for physiotherapy and occupational therapy	Physiotherapy	Linda Clarke (Lead Physiotherapist in Rehabilitation)	UHB Policy for the Management of Clinical Records (2008); Chartered Society of Physiotherapy. Core Standards of Physiotherapy Practice (2005); College of Occupational Therapists. Professional Standards for Occupational Therapy Practice (Version 2) (2007)		X	
Physiotherapy management of patients with acute exacerbation of chronic obstructive pulmonary disease	Physiotherapy	Katy Buchan (Medical Respiratory Physiotherapist)	<b>Re-audit CA ID 2026</b> <b>Rollover from 09/10</b> Trust standards for management of acute exacerbation of chronic obstructive pulmonary disease (2004)			
Physiotherapy for adult cystic fibrosis patients on a home intravenous antibiotic course	Physiotherapy	Joanne Bond-Kendall (Cystic Fibrosis Physiotherapist)	<b>Rollover from 09/10</b> Trust guidelines for the home physiotherapy service (Nov 2008)			
<b>Adult Audiology</b>						
Use of outcome measures	Adult Audiology	Parminder Munde/	Quality Enhancement Tool	X		

Title	Sub-Specialty	Lead	Rationale	PPI	Multi	Int.
to establish hearing aid benefit and patient satisfaction		Regina Smith (Sen. Audiologists)	for Global Rating Scale to meet national targets for Audiology			
<b>Adult Speech And Language Therapy</b>						
Audit of learning outcomes and change in practice following nurse dysphagia training	Adult Speech And Language Therapy	Vicki Weekes (Highly Specialised SLT)	Royal College of Physicians National Clinical Guideline for Stroke (2008); Skills for Health Competencies for Stroke		X	
<b>Radiology</b>						
Audit of conscious sedation during interventional radiology procedures	Radiology	Denise Knight (Staff Nurse)	UHBristol Conscious sedation policy (2009)		X	
Audit of CT-PET reports against independently externally reviewed examinations	Radiology	Julian Kabala (Cons)	A certain proportion of in-house CT-PET reports are externally and independently reviewed for quality control purposes.			
Audit of CT Colonography performed as part of the National Bowel Cancer Screening Programme	Radiology	Huw Roach (Cons)	A new reviewer will independently review all cases. This audit also looks at CT findings versus colonoscopic findings in patients who have undergone both tests.			
National audit into the use of imaging to guide chest drain insertion for the treatment of childhood pleural infection	Radiology	Adam Wallis (SpR) Manigandan Subramanyam Thyagarajan (Cons)	British Thoracic Society guidelines for the management of pleural infection in children (2005).		X	X
Re-auditing the reporting standards of Skeletal Survey in cases of suspected Non Accidental Injury	Radiology	Steven Morgan (SpR)	Royal College of Radiologists /Royal College of Paediatrics and Child Health. 'Standards for Radiological Investigations of Suspected Non-accidental Injury' (March 2008)		X	

### Division of Medicine

Title	Sub-Specialty	Lead	Rationale	PPI	Multi	Int.
Thyrotoxicosis Audit	Endocrinology	Karin Bradley (Cons)	Review our historical management of these patients as an aid to drawing up departmental guidelines for the management of thyrotoxicosis.		X	
Antenatal counselling for women with pre-gestational DM	Diabetes	Karin Bradley (Cons)	Assess the level of knowledge that women with Type1&2 DM have been given pre-pregnancy to help highlight this much neglected area of care.	X	X	

Title	Sub-Specialty	Lead	Rationale	PPI	Multi	Int.
			We also aim to draw up a patient information leaflet focusing on the areas highlighted by the audit.			
Factors influencing Length of Stay & Assessment of Specialty appropriate patients within general medicine (endocrinology teams)	GIM/Endocrinology	Karin Bradley (Cons)	A retrospective audit of whether specialty appropriate patients are sent from MAU to the endocrinology GIM wards			
Compliance with Think Glucose guidance'	Diabetes	Jane Godfrey (CNS)	National recommendations		X	X
NICE transient loss consciousness	ED	Emma Redfern (Cons)	<b>NICE CG (2010)</b> Incoming guideline, pre-empt implementation			
Audit of follow up practices in Basal cell carcinoma	Dermatology	David de Berker (Cons)	<b>Regional Audit</b> Comparing practice to regional consensus standard set in 2010. This is being adopted as the regional skin cancer audit for this business year.		X	X
NICE Guidelines on atopic eczema	Dermatology	Lindsay Shaw (Cons)	<b>NICE TAG 82 (2010)</b> Re audit to determine whether the action plan achieved improvement		X	
Ankylosing spondylitis - adalimumab, etanercept and infliximab	Rheumatology	Robert Marshall (Cons)	<b>NICE TA 143 (2009)</b> Highlighted by local NICE Commissioning College as priority for audit			
How many of the bisphosphonates prescribed on UHB wards are dispensed according to BNF guidelines	Rheumatology	Shane Clarke (Cons)	Audit based on BNF guidelines			
Re-audit documentation of under 16's consultations and vulnerable clients	Contraception & Sexual Health	Mary Manderfield	Use of Proforma/Pink form, Legal requirement and Good practice (DoH), Safeguarding children	X	X	
Emergency Contraception (EC): interval between UPSI and provision of EC	Contraception & Sexual Health	Leonor Herrera-Vega	Faculty of Sexual and Reproductive health clinical guidelines	X	X	
Management of Genital Chlamydia infection	GUM/CaSH	Andrew Leung (Cons) Leonor Herrera-Vega	Audit of BASHH guidelines	X	X	
Management of Genital Herpes	GUM/CaSH	Andrew Leung (Cons) Leonor Herrera-Vega	Audit of BASHH guidelines	X	X	
Confidentiality	Contraception & Sexual Health	Leonor Herrera-Vega	To determine whether we are following the DoH "You're Welcome" quality criteria	X	X	
Prescription of oxygen following the implementation of a new Trust Oxygen prescribing policy	Respiratory	Liz Gamble	Guidelines from British Thoracic Society		X	
IBD national audit	Gastroenterology	Tom Creed (Cons)	<b>National audit (NCEPOP)</b> Guidelines from Royal College of Psychiatrists		X	
Crohn's disease - infliximab	Gastroenterology	John Smithson (Cons)	<b>NICE TA 40 (2003)</b> Highlighted by local NICE Commissioning College as priority for audit			



Title	Sub-Specialty	Lead	Rationale	PPI	Multi	Int.
Sepsis	MAU	Amanda Beale	Re-audit of previous audit			
Audit compliance with NICE guidelines for Epilepsy	Neurology	Luke Bennetto (Cons) Keith McConnell	<b>NICE TAG 74 (2004)</b>			
National Audit of Dementia	Care of Elderly	Jane Buswell (Nurse Cons)	<b>National audit (NCEPOP)</b> Guidelines from Royal College of Psychiatrists	X	X	
The National Clinical Audit of Falls & Bone Health in Older People	Care of Elderly	Rachel Bradley (Cons)	<b>National audit (NCEPOP)</b> Trust Priority		X	
Fallers with fractures attending A&E in Dec/Jan/Feb cold weather 2009/2010	Care of Elderly	Rachel Bradley (Cons)	<b>NICE CG 21 (2004)</b> management as compared with NICE TAG guidance to include surgical management, theatre capacity etc		X	

### Division of Specialised Services

Title	Sub-Specialty	Lead	Rationale	PPI	Multi	Int.
<b>Cardiac Services</b>						
NHSLA documentation Audit	Service-wide	Graham Brant (Matron)	NHSLA standard 4.4		X	
Adult Cardiac Surgery	Cardiac Surgery	Mr AJ Bryan (Cons)	<b>National audit (NCEPOP)</b> National Central Cardiac Audit Database		X	
Angioplasty (cardiac intervention)	Cardiology	Andreas Baumbach (Cons)	<b>National audit (NCEPOP)</b> National Central Cardiac Audit Database		X	
Cardiac Rehabilitation	Cardiology	Fiona Barnard (CNS)	<b>National audit (NCEPOP)</b> National Central Cardiac Audit Database		X	
Pacing and Implantable Cardiac Defibrillators (ICDs)	Cardiology	Tim Cripps (Cons)	<b>National audit (NCEPOP)</b> National Central Cardiac Audit Database		X	
Myocardial Infarction National Audit Programme (MINAP)	Cardiology	Jenny Tagney (CNS)	<b>National audit (NCEPOP)</b> National Central Cardiac Audit Database		X	
Heart Failure Audit	Cardiology	Angus Nightingale (Cons)	<b>National audit (NCEPOP)</b> National Central Cardiac Audit Database		X	
Cardiac Resynchronisation Therapy	Cardiology	Angus Nightingale (Cons)	<b>NICE TA 120/TA 95</b> Highlighted by local NICE Commissioning College as priority for audit		X	
Acute Coronary Syndrome	Cardiology	Valentino Oriolo (CNS)	<b>National audit (NCEPOP)</b> National Central Cardiac Audit Database		X	
Arrhythmia Service	Cardiology	Jenny Tagney (CNS)	National Arrhythmia Audit. Regular data submission to the British Heart Foundation and patient questionnaires	X	X	
Bristol Observation Charts Audit	Cardiology	Helen Morgan	Quarterly Observation Chart Audits			
Critical Care and ITU NICE Guidelines	Cardiac Anaesthesia	Steve Linter (Cons)	<b>NICE CG 83 (2009)</b>			
Oral Decontamination with chlorhexidine and ventilator associated pneumonia (VAP)	Cardiac Anaesthesia	Steve Linter (Cons)	Need to re-audit to establish an improvement in practice.		X	

Title	Sub-Specialty	Lead	Rationale	PPI	Multi	Int.
<b>Homeopathy</b>						
Audit of Package of Care and Discharge Policy	Homeopathy	Elizabeth Thompson (Cons) Helen Beaumont (Spec Dr)	Recent concern that policy has not been applied and some areas of policy need updating.			
Audit of Iscador Prescribing	Homeopathy	Elizabeth Thompson (Cons)	Audit of recently set local and national guidelines			
Goal Setting within the Homeopathic Consultation	Homeopathy	Elizabeth Thompson (Cons) (Project Lead TBC)	<b>Re-audit of 1623</b> To establish whether setting of treatment goals has improved			
<b>Oncology</b>						
Beretzomib – multiple myeloma	Haematology	Jenny Bird (Cons)	<b>NICE TAG 129 (2007)</b> Highlighted by local NICE Commissioning College as priority for audit		X	
Lenalidomide for the treatment of multiple myeloma in people who have received at least one prior therapy	Haematology	Jenny Bird (Cons)	<b>NICE TAG 171 (2009)</b> Highlighted by local NICE Commissioning College as priority for audit		X	
Rituximab for 1st line treatment of CLL	Haematology	To be confirmed	<b>NICE TAG 174 (2009)</b> Local priority		X	
Paclitaxel - ovarian cancer	Oncology	Susanna Alexander (Locum Cons)	<b>NICE TAG 55 (2003)</b> Rollover from 09/10		X	
Breast Cancer (early) - Docetaxel	Oncology	Amit Bahl (Cons)	<b>NICE TAG 109 (2006)</b> Highlighted by local NICE Commissioning College as priority for audit			
Permetrexed -mesethelioma	Oncology	Jeremy Braybrooke (Cons)	<b>NICE TAG 135 (2008)</b> Local priority		X	
Cetuximab - head & neck cancer	Oncology	Hoda Booz (Cons)	<b>NICE TAG 145 (2006)</b> Rollover from 09/10		X	
Sunitinib for 1st line treatment of advanced and/or metastatic renal cell carcinoma	Oncology	Mark Beresford (Cons)	<b>NICE TAG 169 (2009)</b> Highlighted by local NICE Commissioning College as priority for audit		X	
Cetuximab for 1st line treatment of metastatic colorectal cancer	Oncology	Kirsten Hopkins (Cons)	<b>NICE TAG 176 (2009)</b> Local priority		X	
Sunitinib for treatment of gastrointestinal stromal tumours	Oncology	Steve Falk (Cons)	<b>NICE TAG 179 (2009)</b> Local priority		X	
Pemetrexed for 1st line treatment of non-small-cell lung cancer	Oncology	Adam Dangoor (Cons)	<b>NICE TAG 181 (2009)</b> Local priority		X	
Topotecan for treatment of recurrent and stage IV cervical cancer	Oncology	Paul Cornes (Cons)	<b>NICE TAG 183 (2009)</b> Local priority		X	
Neutropenic sepsis	Oncology	Paula Wilson (Cons)	New guidance Rollover from 09/10		X	
Spinal Cord Compression	Oncology	Paula Wilson (Cons)	<b>NICE CG 75 (2008)</b> Highlighted Clinical Effectiveness Committee as priority for audit Recent local guidelines produced		X	

Title	Sub-Specialty	Lead	Rationale	PPI	Multi	Int.
Hypercalcaemia	Palliative Medicine	Rachael McCoubrie (Cons)	Local priority		X	

### Division of Surgery, Head & Neck

Title	Sub-Specialty	Lead	Rationale	PPI	Multi	Int.
<b>Anaesthesia</b>						
Re-Audit of Day of Surgery Cancellations	Day Surgery Anaesthesia	Hannah Blanshard (Cons)	Re-audit of local standards		X	
World Health Organisation Checklist Compliance	All	Frances Forrest (Cons)	Department of Health Guidance		X	
NHSLA Standards for Blood Transfusion	All	Mark Scrutton (Cons)	NHSLA Assessment Criteria		X	
Pain Management - Patient Experience	Acute Pain Service	Jacqui Gannon (CNS)	Concern that patient choice is not adhered to	X		
Epidural Administration	Obstetric Anaesthesia	Mark Scrutton (Cons)	<b>National Patient Safety Agency PSA 21 (2007)</b> Priority Highlighted through Medicine Management Committee		X	
CNST Staffing Levels Audit	Obstetric Anaesthesia	Mark Scrutton (Cons)	Re-audit of CNST Assessment Criteria		X	
Audit of Category I Caeserian Sections	Obstetric Anaesthesia	Mark Scrutton (Cons) Bryony Strachan (Cons)	Joint audit, concern that "decision-to-delivery" times are not met		X	
Audit of Obstetric Anaesthesia	Obstetric Anaesthesia	Mark Scrutton (Cons)	Audit of best practice in Obs. Anaesthesia			
Use of Bupivacaine Rescue Dose in Labour	Obstetric Anaesthesia	Mark Scrutton (Cons)	Audit of Local standards			
<b>Critical Care</b>						
Patient Experience Audit	ITU/HDU	Matt Thomas (Cons)	Trust priority for PPI and overall patient experience	X		
ICNARC Case Mix Programme	ITU/HDU	Tim Gould (Cons)	<b>National audit (Other)</b> Continuing submission to ICNARC. Trust Priority			
Audit of South West QSIP Monitors and Targets - Critical Care Workstream	ITU/HDU	Matt Thomas (Cons)	Regional Patient Safety Priority/Trust Priority			X
<b>Dental Services</b>						
Management of patients by Head and Neck Cancer MDT	Oral and Maxillofacial Surgery	Ceri Hughes (Cons)	Recommendation of National Cancer Intelligence Network to audit MDTs		X	
NHSLA Documentation audit	All sub-specialties	Tony Brooke (Cons)	Annual Trust-wide audit – NHSLA requirement		X	
<b>ENT</b>						
Re-audit of health records	ENT	Claire Langton-Hewer (Cons) Caroline Collins (SSN)	Organisational safety, compliance with CNST standards		X	
Antibiotic prescribing	ENT	Claire Langton- Hewer (Cons)	To assess compliance with local guideline		X	
<b>General Surgery &amp; Urology</b>						

Title	Sub-Specialty	Lead	Rationale	PPI	Multi	Int.
Audit of South West QSIP Monitors and Targets – Peri-operative Workstream	All	Hywel Davies (Cons) Jane Palmer (HoN)	Regional Patient Safety Priority. Trust Priority.		X	X
Re-Admissions following Surgery	All	Kate Thomson Mike Nevin (HoD/Cons)	Divisional Priority - Concern that re-admission rates are high		X	
Blood Cultures Re-Audit	All	Clare Evans (Cons. Nurse)	Re-audit following alterations to teaching programme		Y	
Surgical Risks – Root Cause Analysis audits	All	Kate Thomson (Patient Safety Lead)	Divisional Priority - Audit of relevant RCA's to identify improvement/ manage change		X	
Early and Locally Advanced Cancer	Breast Surgery	Angie Nicholson (Clinical Nurse Specialist)	<b>NICE CG 80 (2009)</b> Need for audit highlighted through the Clinical Effectiveness Committee		X	
Advanced Cancer	Breast Surgery	Angie Nicholson (Clinical Nurse Specialist)	<b>NICE CG 81 (2009)</b> Need for audit highlighted through the Clinical Effectiveness Committee		X	
Breast Cancer Follow-up treatment	Breast Surgery	Angie Nicholson (Clinical Nurse Specialist) Greg Martin	Audit of Local standards		X	
Minimally Invasive Upper GI Surgery Audit	Upper GI	Paul Barham (Cons)	Audit of best practice for Oesophagectomy/ Gastrectomy			
Enhanced Recovery Programme Audit - Lower GI	Lower GI	Rob Longman (Cons)	New Trust initiative - audit of new pathways/service		Y	
Enhanced Recovery Programme Audit - Thoracic	Thoracic	Tim Batchelor (Cons)	New Trust initiative - audit of new pathways/service		Y	
Abdominal Aortic Aneurysm – Endovascular Stent Grafts	Vascular	Marcus Brooks (Cons)	<b>NICE TA 167 (2009)</b> Highlighted by local NICE Commissioning College as priority for audit		X	
<b>Ophthalmology</b>						
Diagnosis and Management of COAG and Ocular Hypertension	Glaucoma & Shared Care	Paul Spry (Consultant Hospital Optometrist)	<b>NICE CG 85 (2009)</b> Evidence required for possible NHSLA inspection incorporating re-audit of monitoring intervals		X	
Cataract surgery outcomes	Cornea & Cataracts	Derek Tole (Cons)	Annual re-audit against published national benchmarks			
Management of embolic retinal arterial disease /use of carotid ultrasound scans	Medical & Surgical Retina	Erika Damato (SpR) Andrew Dick (Cons)	Re-audit following changes to fast-track referral pathway		X	
Outcomes of trabeculectomy	Glaucoma & Shared Care	Dan Nguyen (SpR) John Sparrow (Cons)	Re-audit of outcomes against published national benchmarks			
<b>Trauma &amp; Orthopaedics</b>						
Audit of New #NOF Pathway	T&O	Gerry Baber (Matron)	New BNSSG-led pathway, audit as baseline and post-implementation		X	?
Time to Theatre re-audit	T&O	Steve Mitchell (Cons)	Audit of adherence to SHA Targets for #NOF surgery		X	

Title	Sub-Specialty	Lead	Rationale	PPI	Multi	Int.
National Hip Fracture Database (NHFD)	T&O	Rachel Bradley (Cons)	<b>National audit (NCAPOP)</b> Trust priority		X	
National Joint Registry (NJR)	T&O	Rachel Bradley (Cons)	<b>National audit (NCAPOP)</b> Trust priority		X	
BOAST Notes Audits	T&O	Adrian Weale (Cons)	Audit of relevant British Orthopaedic Association guidelines		X	

### Women's and Children's Services

Title	Sub-Specialty	Lead	Rationale	PPI	Multi	Int.
<b>Children's Services</b>						
Did not attend (DNA) policy	Cross Hospital (Child Protection Team)	Lisa Goldsworthy (Cons) Katherine Penney (Sen. Nurse)	<b>Re-audit of ID 2127</b>		X	
Audit of antibiotic prophylaxis for surgery	Anaesthesia	Gail Lawes (Cons)	Audit of compliance following publication of local guideline		X	
Audit of prophylaxis for venous thromboembolism	Anaesthesia	Richard Berringer (Cons)	Audit of compliance following publication of national/local guideline		X	
Audit of patient satisfaction	Anaesthesia	Richard Berringer (Cons)	Quality Indicator		X	
Compliance of respiratory syncytial virus prophylaxis in patients with congenital heart disease	Cardiac Services	Rob Tulloh (Cons) Guido Pieles	Compliance to national JCVI guideline for RSV prophylaxis		X	
Anticoagulation audit.	Cardiac Services	Andy Tometski (Cons) Jonathan Forsey (SpR)	<b>National Patient Safety Agency PSA 19 (2007)</b> Priority Highlighted through Medicine Management Committee		X	
Audit of recognition of illness in Children's Hospital (outside of PICU)	Cross Division Outreach Team (Nursing)	Caroline Haines (Nurse Cons)	Compliance with paediatric early warning system (PEW)		X	
An audit of the use of the Screening Tool for Assessment of Malnutrition in Paediatrics (STAMP)	Dietetics	Dharum Basude (Cons) Sarah Trace (Dietitian)	<b>Rollover from 09/10</b> Council for Europe Resolution '10 key Characteristics for Good Nutritional care in Hospitals'			
Growth monitoring practice for patients with Chronic Kidney Disease 3b-5 attending Bristol Royal Hospital for Children	Dietetics (Nephrology)	Laura James (Dietitian)	Guidelines for Growth Monitoring in Children with Chronic Kidney Disease'		X	
Induction process audit	Dietetics	Zoe Hull (Dietitian) Lisa Cooke (Chief Dietitian)	To ensure all new staff are properly inducted and meeting the induction requirements of the Trust			
Atopic dermatitis in children	Dermatology	Lyndsay Shaw (Cons) Helen Hewitt (CNS)	<b>NICE CG 57 (2007)</b>		X	
Hydrocortisone Audit	Endocrinology	Christine Burren (Cons) Lynn Diskin (SpR)	Regional Guidelines		X	
Children with Diabetes	Endocrinology	Christine Burren (Cons)	Multi Region Audit		X	

Title	Sub-Specialty	Lead	Rationale	PPI	Multi	Int.
			Healthcare Quality Improvement Partnership (HQIP)			
Insulin Tolerance Testing	Endocrinology	Liz Crowne (Cons) Sharon Yee Sit Yu (SpR)	Local Guidelines		X	
Management of Gastroenteritis in the Paediatric Emergency Department	Emergency Department	Giles Haythornthwaite (Cons)	<b>Re-audit of CA ID 2242</b>			
Recognition and assessment of Coeliac Disease	Gastroenterology	Bhupinder Sandhu (Cons)	<b>NICE CG 86 (2009)</b>		X	
Management of central line related infections in children with parenteral nutrition	Gastroenterology	Dharam Basude (Cons) Beth Hazeldine (ST3) Sarah Sandman (CNS)	Local Guideline Management of Central Line Related Infection in children on parenteral nutrition		X	
Lumbar puncture in children with possible meningitis	General Paediatrics	Oliver Stanley (Cons)	Local Concern		X	
Availability of old hospital notes for children admitted in emergencies	General Paediatrics	Oliver Stanley (Cons)	Local Concern		X	
Epilepsy 12 Diagnosis and Management of Epilepsy	Neurology	Phil Jardine (Cons)	National Audit led by Royal College of Paediatrics and Child Health (RCPH)			
Epilepsy	Neurology	Andrew Lux (Cons)	<b>Re-audit of CA ID 2035</b>			
Management of Children on Dialysis	Nephrology	Mary McGraw (Cons)	Audit against Renal Association Standards			
Dialysis Access	Nephrology	Jane Tizzard (Cons)	Audit against NSF standards			
Content of Discharge Letters	Nephrology	Jan Dudley (Cons)	Audit against local standards			
Admission to neonatal unit*	NICU	David Harding (Consultant) Ann Tizzard (Midwife) CDS Working Party	CNST Maternity Standard 3.5.3			
Hypoglycaemia in at risk babies*	Obstetrics and Midwifery	David Harding (Consultant) Lisa Damsell (Midwife) Postnatal Working Party	CNST Maternity Standard 3.5.4		X	
Prescribing in General Paediatrics	Pharmacy	Reg Bragonie (Cons) Jennifer Haylor (Pharmacy)	<b>Re-audit of CA ID 1527</b>		X	
Audit of advice calls taken by PICU retrieval team of children not transferred to PICU	PICU/Retrieval	Stephen Marriage (Cons)	Local clinician concern		X	X
Audit of families receiving PICU discharge summaries	PICU	Peter Davis (Cons)	Local clinician concern	X	X	
Audit of parental views of accommodation available to them	PICU	Stephen Marriage (Cons)	Local clinician concern	X	X	
Chest Drain Removal	PICU	Sandra Cutts (Sen. Nurse) Peter Davis (Cons)	<b>Re-audit of CA ID 1527</b>		X	
Guidance on the use of Etanercept for the treatment of juvenile idiopathic arthritis	Rheumatology	Ramanan Athimalaipet (Cons)	<b>NICE TA 35 (2003)</b>		X	
Audit of intravenous Canula	Surgery	Khaled Abdelaal (SpR)	Trust Policy		X	

Title	Sub-Specialty	Lead	Rationale	PPI	Multi	Int.
management		Eleri Cusick (Cons)				
<b>Women's Services</b>						
Re-Audit of Health Records	Obstetrics and Midwifery	Janet Pollard (Patient Safety Midwife)	CNST Maternity Standard 3.1.7		X	
Treatment of heavy menstrual bleeding	Gynaecology	Caroline Overton (Cons) Gynae. Working Party	<b>National audit (NCEPOP)</b> Trust Priority			
Urinary incontinence	Gynaecology	Gynae. Working Party - Lead to be confirmed	<b>NICE CG 40 (2006)</b>		X	
Obesity	Obstetrics and Midwifery	Sue Sellers (Cons) Antenatal Working Party	CNST Maternity Standard 3.3.10		X	
Missed appointments	Obstetrics and Midwifery	Sara-Jane Sheldon (Community Matron) Antenatal Working Party	CNST Maternity Standard 3.4.2			
Care of women in labour	Obstetrics and Midwifery	Belinda Cox (Midwife) CDS Working Party	CNST Maternity Standards 3.2.1		X	
Electronic Fetal Monitoring	Obstetrics and Midwifery	Becca Swingler (SpR) CDS Working Party	CNST Maternity Standards, 3.2.3		X	
Women who refuse blood	Obstetrics and Midwifery	Emma Treloar (Cons) CDS Working Party	CNST Maternity Standards, 3.3.7		X	
Risk assessment	Obstetrics and Midwifery	George Attilakos (Subspec Trainee) Antenatal Working Party CDS Working Party	CNST Maternity Standards, 3.4.3, 3.4.7		X	
Maternal transfer	Obstetrics and Midwifery	George Attilakos (Subspec Trainee) Antenatal Working Party CDS Working Party	CNST Maternity Standards, 3.4.9		X	
Fetal blood sampling	Obstetrics and Midwifery	Emma Treloar (Cons) CDS Working Party	CNST Maternity Standard 3.2.4		X	
Severe pre-eclampsia	Obstetrics and Midwifery	Rachna Bahl (Cons) CDS Working Party	CNST Maternity Standard 3.3.1		X	
Auscultation	Obstetrics and Midwifery	Becca Swingler (SpR) CDS Working Party	CNST Maternity Standards 3.2.2		X	
Use of oxytocin	Obstetrics and Midwifery	Belinda Cox (Midwife) CDS Working Party	CNST Maternity Standard 3.2.5		X	
Admission to neonatal unit*	Obstetrics and Midwifery	David Harding (Cons) Ann Tizzard (Midwife) CDS Working Party	CNST Maternity Standard 3.5.3		X	
Severely ill pregnant women	Obstetrics and Midwifery	Emma Treloar (Cons) Critical Care Working Party	CNST Maternity Standard 3.2.8		X	
Recovery	Obstetrics and Midwifery	Emma Treloar (Cons) Critical Care Working Party	CNST Maternity Standard 3.2.7		X	
Hypoglycaemia in at risk babies	Obstetrics and Midwifery	David Harding (Con) Lisa Damsell (Midwife) Postnatal Working Party	CNST Maternity Standard 3.5.4		X	
Mental Health	Obstetrics and Midwifery	Rachel Liebling (Cons) Antenatal & Postnatal Working Parties	<b>NICE CG 45 (2007)</b> CNST 3.4.6		X	
Ovarian hyperstimulation	Reproductive Medicine	David Cahill (Cons)	To check implementation of changes following previous audit		X	

## Trust wide

Title	Sub-Specialty	Lead	Rationale	PPI	Multi	Int.
<b>Specialty</b>						
Medicines Adherence	Trust wide	Stuart Metcalfe (Clinical Audit Manager)	<b>NICE CG 76 (2010)</b> Highlighted as priority topic through the Clinical Effectiveness Committee. Evidence required for NHSLA inspection	X	X	
Venous thromboembolism: reducing the risk	Trust wide	Stuart Metcalfe (Clinical Audit Manager)	<b>NICE CG 92 (2010)</b> Links into Trust patient safety agenda and highlighted by the Patient Safety Team and Clinical Effectiveness Committee		X	
National Cardiac Arrest Audit	Trust wide	Joanna Bruce-Jones (Resuscitation Manager) Anne Whaley (Cons)	<b>Rollover 09/10</b> Awaiting confirmation of funding from Trust			
Allergy identification audit	Trust-wide	Nicky Henderson (Patient Safety Manager)	To ensure that patients are wearing the correct ID bands identifying them as having an allergy			
Safer use of oral Methotrexate	Trust wide	Divisional leads to be identified	<b>NPSA Alert 3 (2004)/Alert 13 (2006)</b> Highlighted as priority through medicine management audit programme		X	
Anticoagulation therapy	Trust wide	Divisional leads to be identified	<b>NPSA Alert 18 (2007)</b> Highlighted as priority through medicine management audit programme		X	
Use of oral syringes	Trust wide	Divisional leads to be identified	<b>NPSA Alert 19 (2007)</b> Highlighted as priority through medicine management audit programme		X	
Promoting the safer use of injectable medicines	Trust wide	Divisional leads to be identified	<b>NPSA Alert 20 (2007)</b> Highlighted as priority through medicine management audit programme		X	
NCEPOD – Emergency Admissions	Trust wide	Emma Redfern (Cons)	Assurance required for Clinical Risk & Assurance Committee following recommendations outlined by NCEPOD study			



## Appendix E - Clinical Audit Committee work plan 2010

Standing items at all meetings:

- Programme progress report and key performance indicators
- Review of national audit register
- Assurance Framework end of year report for Core Standard C5d (until March 2010)
- Project outcome and actions summary report (completed project during previous quarter)

Date of meeting	Planned agenda Items	Comments
28 <sup>th</sup> January 2010	Determine forward plan process for 2010/11	
	Discuss draft clinical audit policy and strategy documents	Review CAC Terms of Reference as part of this work
	Discuss draft CAC workplan for 2010	To include discussion re. potential invites to CAC in 2010
29 <sup>th</sup> April 2010	Involving FT Members	Update of discussions
	Review HQIP guidance for Trust Boards	
	Formal review of Divisional/ Specialty forward plans (including review of the previous year)	
	Sign off Clinical Audit Strategy	
27 <sup>th</sup> May 2010	Invitation to Chief Internal Auditor	
	Receive Clinical Audit Annual Report	
	Sign off Clinical Audit Policy	Amended to reflect NHSLA requirements
21 <sup>st</sup> July 2010	Invitation to Chief Nurse	
	Review of Action Plan as agreed at the Clinical Audit Team away day in November 2009	
	The use of a 'relevance test' to prioritise activity, the relationship between clinical audit activity and the Board Assurance Framework and Materiality' and what constitutes acceptable practice - Discussion regarding realistic target setting	Need for discussion highlighted through HQIP Board Guidance review
3 <sup>rd</sup> November 2010	Invitation to the Medical Director	
	Review of progress against Clinical Audit Forward Plans	

## Clinical Audit Team action plan December 2009 – Summer 2010

### Assistant Director for Audit & Assurance to action:

Task	Date
Clinical Audit Committee (CAC) to review the structure of the Clinical Audit Oscars	January 2010
Audit convenors to provide feed back on all national audit projects at the January 2010 CAC meeting	January 2010
Forward programme consultation document to be sent to the Audit and Assurance Committee	March 2010
Links with Board need to be strengthened	Summer 2010

### Clinical Audit Manager and Clinical Audit Team to action:

Task	Date
Clinical audit projects and the forward programme to be linked to the Risk Register	Urgent and ongoing
The planning of re-audits to be identified on action plans	Urgent and ongoing
Increase action plans – production/timing/monitoring of and implementation	Urgent and ongoing
Increase leadership re: Clinical Governance needed to implement action plans	Urgent and ongoing
Reports to be sent to the Assurance Leads for review in Assurance Committees.	January 2010
Discussions with Education Supervisors re: directing juniors towards agreed forward plan project	January 2010
Action plans to be discussed with Heads of Division.	January 2010
Develop an on-line forward plan	February 2010
The planning snapshot audits (e.g. patient safety) to be discussed with Patient Safety Team	February 2010
Priorities identified from Foundation Trust members to be included in the forward programme	March 2010
Wider consultation process for forward programme is to be implemented e.g. Committees & Divisional Governance/Patient Safety Leads	March 2010
Implement a coordinated approach to the forward plan process. The programme will incorporate the following priority areas NCAPOP, CA Strategy, NICE Guidelines , Trust objectives, NSFs, NPSA, Local areas and Commissioning	March 2010
Discussion to be held with Kathy Gain regarding linking clinical audit into the Young Persons Forum	March 2010
Staff to be directed to the forward programme rather than ad-hoc projects	As of April 2010
Patient survey training/clinical effectiveness training to be provided to the CAFs	Summer 2010
The possibility of involving trainee nurses/ASPs in clinical audit projects is to be discussed with UWE	Summer 2010
Discussion to be held with Commissioners/Primary Care to identify those patients who fulfil a criteria for treatment but do not get referred	Summer 2010
To develop more interface projects; discussion to be held with the other Trusts/PCTS regarding linking into the clinical audit programme	Summer 2010
Update the 'How to ' guides/training materials	Summer 2010
Develop an on-line training tool	Summer 2010

## Appendix G - National audit participation list

The following abbreviations are used below to indicate the professional body responsible for the organisation of the project; NCAPOP - National Clinical Audit Patient & Outcome Program; RC - Royal College; DOH – Department of Health; O - Other

National Clinical Audits	Type	Division
National Sentinel Stroke Audit	NCAPOP	Medicine
National Audit of Dementia	NCAPOP	Medicine
National Falls and Bone Health Audit	NCAPOP	Medicine
Continence Care Audit	NCAPOP	Medicine
Royal College of Physicians - United Kingdom National Inflammatory Bowel Disease Audit	NCAPOP	Medicine
NHS Diabetes - National Diabetes Inpatient Audit	NCAPOP	Medicine
Adult Cardiac Interventions: Coronary Angioplasty	NCAPOP	Specialised Services
Congenital Heart Disease	NCAPOP	Specialised Services
Adult Cardiac Surgery: CABG & Valve Surgery	NCAPOP	Specialised Services
Myocardial Infarction National Audit Project (MINAP)	NCAPOP	Specialised Services
National Heart Failure Audit	NCAPOP	Specialised Services
Vascular Surgical Society of Great Britain & Ireland - Vascular Surgery Database	NCAPOP	Surgery, Head & Neck
National Joint Registry: Hip and Knee Replacements	NCAPOP	Surgery, Head & Neck
National Lung Cancer Audit (NLCA)	NCAPOP	Surgery, Head & Neck
National Bowel Cancer Audit (NBOCAP)	NCAPOP	Surgery, Head & Neck
National Head and Neck Oncology Audit (DAHNO)	NCAPOP	Surgery, Head & Neck
National Hip Fracture Database	NCAPOP	Surgery, Head & Neck
National Mastectomy and Breast Reconstruction Audit (MBR)	NCAPOP	Surgery, Head & Neck
National Oesophago-gastric Cancer Audit	NCAPOP	Surgery, Head & Neck
Paediatric Intensive Care Audit Network	NCAPOP	Women's & Children'
National Neonatal Audit Project	NCAPOP	Women's & Children'
National Diabetes Audit	NCAPOP	Women's & Children'

National Kidney Care Audit	NCAPOP	Women's & Children'
Health Protection Agency - Surgical Site Infection Surveillance	DOH/O	Surgery, Head & Neck
National Health Promotion in Hospitals (NHPH) Audit	DOH/O	Trustwide
NHS Cancer Screening Programme - National Audit of Invasive Cervical Cancers	DOH/O	Women's & Children'
Adult Asthma Audit	RC	Medicine
Asthma	RC	Medicine
Fractured Neck of Femur	RC	Medicine
National Chronic Obstructive Pulmonary Disease (COPD) Audit	RC	Medicine
National Audit of Diagnostic Adequacy, Accuracy and Complications of Image-Guided or Assisted Liver Biopsy	RC	Specialised Services
Single Fraction Radiotherapy for Bone Metastases Audit	RC	Specialised Services
Malignant Spinal Cord Compression Audit	RC	Specialised Services
Late Effects of Chemo-Radiotherapy Audit	RC	Specialised Services
Head and Neck Cancer Pre-Treatment Pathway Audit	RC	Specialised Services
British Orthodontic Society - National Audit of Mini Screws/Temporary Anchorage Devices (TADs)	RC	Surgery, Head & Neck
Renal Registry: Renal Replacement Therapy	RC	Women's & Children'
Paediatric Asthma Audit	RC	Women's & Children'
Paediatric Empyema Audit	RC	Women's & Children'
Pain in Children	RC	Women's & Children'
Retrospective Audit of Anaemia in Paediatric Patients with Stage 5 Chronic Kidney Disease	RC	Women's & Children'
National Audit of Referrals to the Paediatric Orthopaedic Department for Patients with Suspected Malignancy	RC	Women's & Children'
Blood collection process	O	Diagnostics & Therapies
Central Cardiac Audit Database/Heart Rhythm UK - Cardiac Rhythm Management	O	Specialised Services
Central Cardiac Audit Database/British Heart Foundation - Cardiac Rehabilitation Database	O	Specialised Services
The Arrhythmia Alliance - National Audit of Arrhythmia Nurse Services	O	Specialised Services
Intensive Care National Audit & Research Centre - Case Mix Programme	O	Surgery, Head & Neck
National Elective Surgery Patient Reported Outcome Measures	O	Surgery, Head & Neck

NHS Blood & Transplant: Potential Donor Audit	O	Surgery, Head & Neck
Audit of the use of red cells in neonates & children	O	Women's & Children'
Obstetrics Transfusion and Iron Survey (OTIS)	O	Women's & Children'