Other Issues to Consider

Just because a procedure or service has one or more characteristics, it may not make an ideal clinical audit topic. Other areas to consider include:

- Is it practical to undertake the audit?
- Can you get the information you need?
- Is the problem amenable to change?
- Is the topic a priority for the organisation?
- Are good standards / guidelines available? If not, is there consensus agreement on good practice?
- Who needs to be involved to ensure changes can be implemented?
- Does the topic pertain to national policy initiatives?

Use the table overleaf to determine if your topic is suitable for clinical audit or if you have several topics and are not sure which one would result in the greatest improvement.

If you have most of your ticks in the "Yes" or "Maybe" columns of the table then you probably have a good topic for clinical audit. But is your idea a clinical audit or a research project? (For more information see the leaflet INF451 'The Difference between Clinical Audit and Research').

Tool for Prioritising Clinical Audit Topics

	Yes	Maybe	Don't know	No
Is the topic High Risk?				
Is the topic High Volume?				
Is the topic High Cost?				
Is there wide variation in practice?				
Is there local concern about practice?				
Are Standards / Guidelines available?				
Is the topic important locally?				
Is the topic important nationally?				
Can practice be changed?				

Further information about clinical audit is available from SharePoint on the clinical audit pages:

https://nhsbloodandtransplant.sharepoint.com/sites/Clinical/SitePages/Clinical%20Audit.aspx where full details of all completed clinical audit reports can be found (accessed 9th October 2023). All leaflets in this series (INF450-INF460) are available via the controlled document library on NHSBT Intranet (Link)

Leaflet developed from an original idea by UBHT NHS Trust Clinical Audit Department.

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Leaflet 3

Identifying a Clinical Audit Topic

Clinical Audit

Clinical Audit Manager: Marc Lyon - 07764 280833

Senior Clinical Audit Facilitators:

Emma-Kate Chawishly – 07711 447198 Dawn Tilsley – 07720 275387

clinical.audit@nhsbt.nhs.uk

Clinical Audit Topics

Clinical audit compares current practice against standards and guidelines. Clinical Audit recommends quality improvements where they will improve outcomes in patient care. However, with



the huge range of activities and decisions made during the care of patients and donors, it can often be difficult to decide which areas to audit. Clinical audit staff can help you decide what to audit and can provide ideas from previously

completed audits.

Identifying Audit Topics

Some clinical audit projects are initiated by organisations such the National Institute for Health Care Excellence (NICE), the Care Quality Commission



(CQC) or the Royal Colleges. Within NHSBT, national and local audits may be initiated via the annual audit programme, various clinical groups or individual clinical or scientific staff. All NHSBT audits must be approved by the relevant CARE Group.

In addition to participating in national audits, health professionals are expected to carry out clinical audits in their own work area. However, selecting an area of your own practice to audit can be difficult.



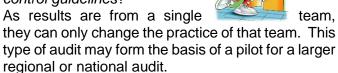
Remember – When choosing audit topics, focus on the areas that will lead to improvements

Which Type of Audit?

There are three types of clinical audit in NHSBT, examples can be found below.

Local

e.g. How does a single collection team's practice compare with national infection control guidelines?



Regional



e.g. How does the practice of collection teams in the south-east region compare with national infection control guidelines?

Results from a regional audit would include more teams, so it has more

scope for changing practice than a local audit.

National

e.g. How does the infection control practice of many or all collection teams nationally compare to national guidance?

The results of a national audit have the greatest potential to make improvements to practice. Infection control practice can be changed in all collection teams nationally.

How to Choose an Audit Topic

Look for areas with the greatest potential for improvement and consider the following characteristics:



High Risk - procedure / service risk harm to patients / donors / staff / organisation.

e.g. incorrect clinical advice / late test results / inappropriate donor selection.



High Volume - frequent procedures or many patients / donors / users are involved.

e.g. 'Acceptance of Tissue Donors'.



High Cost - activities which are costly in monetary terms or highly resource dependent. e.g. Process and Issue of autologous serum eyedrops.



Areas Identified - through incidents / causes of concern.

e.g. identified from complaints / adverse events / quality incidents.



Wide Variation in Practice - are things done differently in different areas?

e.g. record keeping, documentation, sample labelling and out of hours

therapeutic apheresis practice may all show variation in practice in different areas.