



# Clinical Audit Learning and Development Curriculum Guidance

## Advanced Level

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Final Draft 8  
June 2011

Quintessent Ltd

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# 1. Introduction

1.1 This document sets out guidance for the development and delivery of an advanced clinical audit training, education and/or development programme

1.2 This advanced level of training, education, and development can be used and adapted for practitioners (clinicians and clinical audit specialists) who wish to become specialist practitioners in clinical audit and/or become involved in leading clinical audit at a local or national level.

1.3 The purpose of the guidance is to establish the corpus of learning for clinical audit at an advanced level to develop clinical audit specialists and leaders.

1.4 The guidance provides a set of curricula against which providers of learning, training and education can self assess against or be benchmarked and awarded a mark of excellence, if appropriate. It is intended for use by both public and private providers of learning, education, and training.

1.5 The document also sets out guidance on learning and teaching methods.

1.6 It is expected that commissioners and providers of training and education and development in clinical audit will adapt the guidance to suit the needs of the learners and the needs of the organisation.

1.7 It is further expected that delivery of clinical audit training, education and development programme will take place within a quality and service improvement context and /or programme

1.8 The guidance highlights six key areas in which practitioners should demonstrate competence. These competency areas are mapped against defined learning outcomes encompassing understanding, competencies and skills, attitudes/behaviours and knowledge

1.9 The curricula have been matched against the key competency documents below as appropriate. It should be noted however, that this not a comprehensive list of all the competencies that may be relevant or of interest.

1.10 This document also makes reference to the Intermediate and Basic Level Curriculum Guidance developed by HQIP.

1.11 The curriculum guidance for each of the three programmes has taken into account the following:

- I. Selected outcomes contained in Tomorrow's Doctors (2009)<sup>1</sup>:
- II. Selected content and objectives for clinical audit training for foundation programme doctors and for registers as set out in the Guide to Involving Doctors in Clinical Audit. HQIP<sup>2</sup>
- III. Knowledge and skills required for clinical audit for clinical leaders, clinicians, clinical audit specialists and clinical audit facilitators as set out in HQIP's Education, Training and Development Strategy for Clinical Audit<sup>3</sup>.
- IV. Selected competencies within the Common Competencies Framework for Doctors<sup>4</sup> August 2009
- V. Selected competences set out in The UK Foundation Programme Curriculum<sup>5</sup>.
- VI. NHS Knowledge and Skills Framework (KSF) requirements<sup>6</sup>

1.12 HQIP has developed a set of quality assurance standards which can be used to self assess the level of compliance with this guidance<sup>7</sup>.

1.13 The guidance in this document was developed in consultation with clinical audit practitioners and those currently delivering training, development and education in clinical audit.

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<sup>1</sup> Tomorrow's Doctors. GMC. 2009

<sup>2</sup> Guide to Involving Doctors in Clinical Audit. HQIP<sup>2</sup>

<sup>3</sup> Education, Training and Development Strategy for Clinical Audit<sup>3</sup>. HQIP. 2009

<sup>4</sup> Common Competencies Framework for Doctors. Academy of Medical Royal Colleges. August 2009

<sup>5</sup> The UK Foundation Programme Curriculum. GMC/Academy of Medical Royal Colleges Foundation Programme. March 2010

<sup>6</sup> The NHS Knowledge and Skills Framework (NHS KSF) (October 2004)

<sup>7</sup> Quality Assuring Clinical Audit Learning and Development. HQIP Draft March 2011

## 2. Aims and Objectives

### **A. Aims:**

- To raise the national standard of clinical audit training in health and social care
- To emphasise the role of clinical audit as part of the quality improvement agenda
- To develop competent and confident practitioners in clinical audit

### **B. Objectives**

#### **To enable clinical audit practitioners:**

- To use clinical audit methodologies and other quality improvement techniques in an experiential hands –on approach within a learning framework
- To measure the impact of clinical practice

2.1 There are several entry points for practitioners to access clinical audit training and development. They have been organised into three programmes levels as illustrated in Table 1.

**Table 1: Levels of learning/training**

**Advanced Programme**

**Level 3** suitable for postgraduate students, medical directors, clinicians and clinical audit practitioners with a lead/specialist/training role in clinical audit

**Intermediate Programme**

**Level 2** suitable for F1/F2 Doctors, clinicians undertaking clinical audit, and clinical audit practitioners

**Basic/beginners Programme**

**Level 1** suitable for undergraduate students, vocational training students, in service clinicians (refresher), clinical audit support staff, and clinical staff induction programmes. May also provide template for awareness raising training for Boards /managers

Curriculum guidance is also available from HQIP for Intermediate and Beginners' Levels

2.2 It is envisaged that clinicians and clinical audit practitioners will move through the levels depending on role and need. For example, as part of revalidation, clinical doctors may need to demonstrate they have undertaken quality improvement activities, such as clinical audit, leading to improved quality of patient care. To help support this they may wish to refresh their skills and access a clinical audit development programme (accredited or with the potential for accreditation) at an intermediate level.

2.3 Others may wish to become specialist practitioners in clinical audit or become involved in national audit programmes and undertake a programme of learning that will lead to accreditation and /or postgraduate credits. The Level 3 Advanced programme will provide this level of expertise and engagement.

2.4 The learning outcomes for each of the three levels are referenced against Blooms Taxonomy<sup>8</sup> of Educational Objectives. A summary of the framework is attached as appendix 2.

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<sup>8</sup> 'Taxonomy Of Educational Objectives: Handbook 1, The Cognitive Domain' (Bloom, Engelhart, Furst, Hill, Krathwohl) 1956.

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Draft 8 June 2011

2.5 Section 3 below describes each of the curriculum programme areas against the appropriate academic/vocational benchmark, a summary of the learner profile, the practical and academic learning objectives and **suggested** assessment criteria against which the outcomes of the learning might be evaluated.

### 3. Characteristics of the Advanced, Intermediate and Basic Programmes

**Table 2: Key characteristics of the Advanced Programme**

<b>Advanced Programme</b>			
Series of modules/training days. Depending on provider arrangements the timescale will vary, for example, between 6 – 12 months			
<b>Academic or vocational level</b>	<b>Learner profile</b>	<b>Practical and academic learning objectives</b>	<b>Suggested assessment criteria</b>
<p><b>For academic organisations or those wishing to seek academic accreditation</b></p>			
<p>Entry Level <sup>79</sup></p> <p><b>Level 7</b> reflects a post graduate level of learning and programmes may be structured to provide the equivalent of 60 credits for PGCE<sup>10</sup> for example.</p> <p><b>Level 8</b></p> <p>This equates to 120 credits/ Post Graduate</p>	<p>Suitable for postgraduate students, clinicians and clinical /clinical audit practitioners with a lead/specialist/training role in clinical audit</p>	<p>Design, implement and review a clinical audit project</p> <p>Produce a clinical audit report setting out recommendations with an action plan</p> <p>Develop an improvement and implementation plan against theory/policy and assessment of impact</p> <p>Engage with key stakeholders to make improvements</p>	<p>Completion of an essay to demonstrate understanding of the theories, regulatory frameworks and policy context for clinical audit practice within quality improvement</p> <p>Assessment of the clinical audit plan and project and report against a set criteria</p> <p>Assessment of the improvement and</p>

<sup>9</sup> See Appendix 1: Definitions of the Framework for Higher Education Qualifications

<sup>10</sup> Post graduate Certificate of Education

<b>Advanced Programme</b>			
Series of modules/training days. Depending on provider arrangements the timescale will vary, for example, between 6 – 12 months			
<b>Academic or vocational level</b>	<b>Learner profile</b>	<b>Practical and academic learning objectives</b>	<b>Suggested assessment criteria</b>
<p><b>For academic organisations or those wishing to seek academic accreditation</b></p>		<p>Use the literature to evaluate and critique connections between theories, models and best practice and outcomes of clinical audit</p> <p>Use the literature explore the role of clinical audit in health improvement and governance and assess its impact and effectiveness (referring to theoretical and applied knowledge))</p> <p>Write a reflective journal</p>	<p>implementation plan against set assessment criteria</p> <p>Review of reflective journal incorporating all aspects of learning from the audit, implementation and impact</p> <p>PDP signed off</p>
<p>Diploma</p> <p>Or 180 credits to obtain a full Masters Degree)</p> <p>The notional learning time for a 100 - credit module is 100 hours.</p>			

**Table 3: Characteristics of Intermediate Programme**

<b>Intermediate</b>			
Series of modules/training days. Depending on provider arrangements and learning needs of participants and sponsoring organisations the timescale will vary, for example, between 2 - 5 days			
<b>Academic /vocational level</b>	<b>Learner profile</b>	<b>Practical and Academic Learning Objectives</b>	<b>Suggested Assessment criteria</b>
<p>For academic organisations or those wishing to seek academic accreditation</p> <p>FHEQ level up to 4/5/6<sup>11</sup></p> <p>For example:</p> <p>NVQ level 4 (FHEQ Level 4) to undergraduate/ BTEC level (FHEQ level 6)</p>	<p>Suitable for F1/F2 doctors, clinicians undertaking clinical audit, and most clinical audit practitioners (without management responsibilities)</p>	<p>Write reflective log/journals</p> <p>Demonstrate understanding of the policies and procedures for clinical audit</p> <p>Demonstrate participation in clinical audit project</p> <p>Produce a summary clinical audit report</p> <p>Production of outline Improvement and implementation plan</p>	<p>Test knowledge and understanding of clinical audit:</p> <p>Multi choice questionnaires – requirement of 90% to pass</p> <p>Test application:</p> <p>Review of involvement in clinical audit project.</p> <p>Reflective essay incorporating summary of actions and outcomes assessed against standard checklist/ criteria.</p>

<sup>11</sup> See Appendix 1: Table 3: Definitions of the framework for Higher Education Qualifications

**Table 4: Characteristics of Basic Programme**

<b>Basic</b>			
One day workshop/training module			
<b>Academic /vocational level</b>	<b>Learner profile</b>	<b>Practical and Academic Learning Objectives</b>	<b>Suggested Assessment criteria</b>
<p><b>For academic organisations or those wishing to seek academic accreditation</b></p>			
<p>Up to FHEQ Level 5<sup>12</sup></p> <p>Note: the basic curriculum has been matched to the competencies for clinical audit at undergraduate level for clinicians</p>	<p>Suitable for undergraduate students (as part of degree course)</p> <p>Vocational training students</p> <p>To meet In -service training requirements for example mandatory training as part of NHS litigation authority</p> <p>Clinical audit support staff</p>	<p>Attendance or completion of e learning</p> <p>Completion of written Action Plan</p> <p>Demonstrate understanding of clinical audit cycle and process and its use in practice</p> <p>Demonstrate understanding of how audit fits into the quality improvement context</p>	<p>Test of knowledge and understanding:</p> <p>Multi choice questionnaires – online (to assess learning).</p>

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<sup>12</sup> See Appendix 1: Table 3: Definitions of the framework for Higher Education Qualifications

## 4. Learning and teaching methods

4.1 Providers of clinical audit training and development will need to demonstrate a range of innovative and interactive methods for enhancing learning and acquisition of practical skills. It is expected that the content and delivery of the respective programmes will:

- Be linked to current roles;
- Incorporate reflective practice;
- Be practically based;
- Have scientific rigour;
- Incorporate lecture based teaching methods;
- Incorporate scenarios and case studies;
- Incorporate group discussions;
- Involve people involved in clinical audit;
- Provide opportunities for learners to facilitate their own learning;
- Provide opportunities for classroom and offsite learning;
- Provide opportunities for innovative ongoing methods of learning and assessment (to embed learning) such as quizzes, practical demonstrations, shared learning forums, e-learning, use of podcasts and video; and
- Reflect the content and format of the programme.

## 5. The Curriculum Guidance

5.1 The aim of this curriculum guidance is to set a benchmark for the development and delivery of training for clinical audit. It is hoped that this guidance will be used by commissioners and providers of training to develop their programmes which, when linked to rigorous and appropriate assessment processes and outcomes, will lead to well trained and competent clinical audit practitioners.

5.2 However, whilst the content areas are described, the detail as to the 'what and how' is open to individual interpretation and it is envisaged and hoped that training and development providers will develop their own innovative approach to delivering the curriculum.

### 5.3 Advanced Programme Curriculum

The advanced curriculum is aimed at learners who already have previous experience of clinical audit and wish to further develop their skills and competencies. It is aimed at those practitioners wishing to further their skills and knowledge at a post graduate/training level and have a leadership or specialist roles in quality improvement. It is therefore anticipated that the curriculum will build on existing knowledge and skills in clinical audit and develop new competencies in leadership, change management and implementation of health improvement

6.

# Curriculum guidance for the Advanced Clinical Audit Programme

## Level 3

### Advanced Curriculum Guidance

The guidance curriculum for the advanced programme has been matched against the key competency documents below. It should be noted however, that this not a comprehensive list of all the competencies that may be relevant or of interest.

The guidance curriculum has taken into account the following:

- I. Content and objectives for clinical audit training for foundation programme doctors and for registers as set out in the Guide to Involving Doctors in Clinical Audit. HQIP<sup>13</sup>
- II. Knowledge and skills required for clinical audit for clinical leaders, clinicians, clinical audit specialists and clinical audit facilitators as set out in HQIP's Education, Training and Development Strategy for Clinical Audit<sup>14</sup>. This document is tabled in the Appendix.

The guidance curriculum could also contribute to the acquisition of competencies and requirements described below:

- III. Competencies within 3.6, 5.1, 5.3, 5.4, 6.1, 6.2, as set out in the Common Competencies Framework for Doctors <sup>15</sup>August 2009
- IV. Competences under 1 (professionalism), 11 (ethical and legal issues), 12 (maintaining good medical practice), 14 (working with colleagues) as set out in The UK Foundation Programme Curriculum<sup>16</sup>.
- V. Knowledge and Skills Framework (KSF) requirements: communication dimension 1/ level 3/4, personal and people development 2/ level 2/4, health and safety and security 3 /level 3 /4, service improvement level 3 /4, quality level 3 /4, services and project management G5 level ¼.

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<sup>13</sup> Guide to Involving Doctors in Clinical Audit. HQIP<sup>13</sup>

<sup>14</sup> Education, Training and Development Strategy for Clinical Audit<sup>14</sup>. HQIP. 2009

<sup>15</sup> Common Competencies Framework for Doctors. Academy of Medical Royal Colleges. August 2009

<sup>16</sup> The UK Foundation Programme Curriculum. GMC/Academy of Medical Royal Colleges Foundation Programme. March 2010

VI. The advanced programme for clinical audit is organised into six curriculum areas and associated learning outcomes:

**1. Understanding clinical audit and its context**

To be able to explain and critique what clinical audit is; what it achieves and how it fits into the context of quality improvement, risk management, patient experience and clinical practice.

**2. The clinical audit cycle and model(s)**

To be able to describe and explain the clinical audit cycle and to explain and analyse the theory and principles which underpin the methodology.

**3. Designing, planning and setting up a clinical audit project**

To be able to design and plan a clinical audit project in a practice /directorate/organisation (local and/or national level) which demonstrates practical application of principles and theories underpinning best practice

**4. Data collection and analysis**

To be able to collect and critically analyse and appraise data from a clinical audit, collate and display findings and produce a full clinical audit report setting out key recommendations and actions for improvements in patient care.

**5. Making sustained improvements**

To be able to present clinical audit findings, recommendations and action plans to stakeholders, sponsors and colleagues and to influence and achieve improvements in patient care, which are sustainable.

**6. Leadership and change management**

To demonstrate skills required to develop a clinical audit strategy as part of an overall quality improvement programme which is aligned to organisational (national, regional or local) and patient safety priorities; to demonstrate the skills and ability to lead the implementation of a clinical audit strategy leading to improvements in care.

**Curriculum area one: Understanding clinical audit and its context**

**Learning Outcomes**

**To explain and critique what clinical audit is, what it achieves and how it fits into the context of quality improvement, risk management, patient experience and clinical practice.**

By the end of this curriculum area learners will be able to explain and critique:

- How clinical audit fits into the NHS at a national and local level
- The role of clinical audit in improving quality of patient care and experience
- How clinical audit links to risk management and patient safety
- How clinical audit links to the current quality and service improvement agenda
- How clinical audit can lead to service efficiencies and economies
- How clinical audit measures and improves outcomes
- How evidence based information relates to organisational development and quality improvement in healthcare organisations
- The ethical, patient confidentiality and patient consent considerations when undertaking clinical audit
- How clinical audit is a process shared with patients and other key people

	Indicative Content	Notes
1	What is clinical audit (and what it is not)	Good practice guidance: Description in HQIP Guide for Clinical Audit, Research and Service Review. <sup>17</sup>  New Principles of Best Practice in Clinical Audit', HQIP. 2011 <sup>18</sup>
2	Description of the different types of clinical audit, for example rapid –cycle clinical audit, and their importance	
3	Review of the clinical audit, service improvement and research continuum: <ul style="list-style-type: none"> <li>• Understanding of the difference between and components of a descriptive study, survey, service evaluation, research and a clinical audit.</li> <li>• How to design each activity properly</li> <li>• Different forms of evidence</li> </ul>	HQIP Guide for Clinical Audit, Research and Service Review (see footnote 21)
4	How clinical audit fits into the national and local NHS context and policy  To include the relationship between local and national clinical audits	Implementing local change from national clinical audit projects. HQIP Sept 2009
5	How clinical audit relates to the following: <ul style="list-style-type: none"> <li>• Quality improvement</li> <li>• Evidence based practice</li> <li>• Patient experience</li> <li>• Patient safety</li> <li>• Risk assessment</li> <li>• Clinical risk management</li> </ul>	New principles of Best Practice in Clinical Audit. HQIP (see footnote 21)

<sup>17</sup> A Guide for Clinical Audit, Research and Service Review — An educational toolkit designed to help staff differentiate between clinical audit, research and service review activities

<sup>18</sup>New Principles of Best Practice in Clinical Audit', HQIP. Edited by Robin Burgess. 2011. Radcliffe Publishing

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	Indicative Content	Notes
	<ul style="list-style-type: none"> <li>• Quality assurance processes (in business and industry)</li> <li>• Regulatory frameworks</li> <li>• Measurement of outcomes</li> <li>• Measuring compliance with standards</li> <li>• Budgetary control and financial savings</li> </ul> <p>And the role of clinical audit as a science, a mark of professional practice, and in the measurement of outcomes</p>	
6	<p>How clinical audit operates as an integral part of quality improvement processes</p> <p>To include the range of quality improvement tools and processes such as:</p> <p>PDSA<sup>19</sup> cycles            LEAN            Process mapping            Pareto charts etc.</p>	
7	How evidence based information and theory relates to organisational development and quality improvement in health and health care organisations	
8	Accountability for quality and safety of patient care	
9	Why clinical audit matters and what difference it can make to patient safety and improved quality of care	This should be supported by case studies delivered by people in the field
10	The relationship of the clinical audit cycle to the improvement of clinical care and patient experience	
11	Types of action that can be taken on clinical audit findings	This should be supported by case studies delivered by people in the field

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<sup>19</sup> Plan, Do, Study, Act cycles

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	Indicative Content	Notes
12	Data protection requirements applicable to clinical audit	Reference to curriculum area two Data Protection Act 1998
13	The importance of building in ethical, patient confidentiality and consent considerations when undertaking clinical audit	An integral part of all learning interventions  Guidance to be used contained in: Ethics and clinical audit and quality improvement - a guide for NHS organisations. HQIP <sup>20</sup>  New principles of Best Practice in Clinical Audit. HQIP <sup>21</sup>
14	The role of patients and other key people in clinical audit	Patient and Public Engagement (PPE): PPE in Clinical Audit. HQIP <sup>22</sup>  Clinical Audit: An Introduction for Patients. HQIP. <sup>23</sup>

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<sup>20</sup> A guide for Clinical Audit, Research and Service Review – an educational toolkit designed to help staff differentiate between clinical audit, research and service review activities. HQIP

<sup>21</sup> New Principles of Best Practice in Clinical Audit. Edited by Robin Burgess. HQIP. 2011. Radcliffe publishing

<sup>22</sup> HealthCare Quality Improvement Partnership (HQIP). Patient and Public Engagement (PPE).: PPE in clinical audit: HQIP. 2010.

<sup>23</sup> Clinical Audit: An Introduction for Patients. HQIP. (April 2010)

## Curriculum area two: The clinical audit cycle and model(s)

### Learning Outcomes

**To be able to explain and describe the clinical audit cycle and to explain and analyse the theory, principles and components which underpin the methodology,**

By the end of this curriculum area learners will be able to describe, explain, analyse and/or demonstrate

- A clinical audit cycle
- How to choose and develop appropriate criteria, standards and objectives for clinical audit
- Appropriate selection of measurement and service improvement tools and methodologies, and be able to use them
- Different types of forms for recording data collected
- The statistical methods commonly used
- Good record keeping and ability to use intra/internet skills
- The difference in design between a descriptive study, a survey, a research study and a clinical audit.
- The legal, governance and data protection considerations when undertaking clinical audit
- Duty-of-care responsibilities

**Key reference documents relating to Curriculum Area 2 are listed at the end of the section**

	Indicative Content	Notes
1	The clinical audit cycle	See list below for key reference documents  HQIP description of the clinical audit cycle to be used as standard <sup>24</sup>
2	How to select/identify and develop clinically appropriate clinical audit criteria, objectives and measurable standards and how to assess compliance with these  Selecting and developing appropriate performance levels	
3	Defining audit criteria and standards <ul style="list-style-type: none"> <li>• Selecting and developing appropriate criteria: structure, process, and outcome criteria</li> <li>• Inclusion/exclusions</li> <li>• Exceptions</li> <li>• Sources of criteria</li> <li>• Involving users</li> </ul>	
4	How to draw up standards and objectives correctly as measures <ul style="list-style-type: none"> <li>• How to set a quantitative standard (%) for a clinical audit measure</li> </ul>	
5	Importance of explicit standards to measure quality or patient safety in a clinical audit	

<sup>25</sup> The six Caldicott principles, applying to the handling of patient-identifiable information.

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	Indicative Content	Notes
	Indicative Content	Notes
6	Importance of having a good operational definition of the terms used in a clinical audit standard	
7	Basic measurement and service improvement tools and methodologies  To include introduction to quality improvement tools such as LEAN, process mapping, and PDSA (Plan, Do, Study, Act) cycles	
8	The different models to assess robustness of measures.	
9	The concepts of reliability and validity and how they apply to clinical audit	
10	Measurement and methodology	
11	Sampling theory and application in different clinical audits	
12	The various types of data and data collection methods	
13	How to select the most appropriate data collection methodology	
14	How to decide on a strategy for data collection	
15	How to design a data collection tool and how to pilot one	
16	How to a range of computer tools supporting: <ul style="list-style-type: none"> <li>• the design and analysis of forms for data collection tools</li> <li>• statistical analysis</li> </ul>	
17	How to apply ethical principles and considerations into clinical audit projects	

	Indicative Content	Notes
18	How to apply patient confidentiality and consent into clinical audit projects	
	Indicative Content	Notes
19	How to comply with confidentiality and data protection protocols	Ref: Caldicott Guardians <sup>25</sup> and Data Protection Act 1998 <sup>26</sup>
20	How to identify and comply with legal requirements that may impact on clinical audit work	
21	Duty-of-care responsibilities	

**Key reference documents relating to curriculum area 2:**

- New Principles of Best Practice in Clinical Audit. Edited by Robin Burgess. HQIP. 2011. Radcliffe publishing
- Criteria for Best Practice in Clinical Audit. HQIP. 2009
- Clinical Audit Criteria Tool. HQIP 2009
- A guide for Clinical Audit, Research and Service Review – an educational toolkit designed to help staff differentiate between clinical audit, research and service review activities. (2009). HQIP
- New Principles of Best Practice in Clinical Audit. Edited by Robin Burgess. HQIP. 2011. Radcliffe publishing

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<sup>25</sup> The six Caldicott principles, applying to the handling of patient-identifiable information.

<sup>26</sup> Data Protection Guidance and Advice for Organisations [www.ico.gov.uk/for\\_organisations/data\\_protection](http://www.ico.gov.uk/for_organisations/data_protection)

- An Introduction to Statistics for Clinical Audit. HQIP (April 2010)
- Clinical audit programme guide and guidance tools HQIP (September 2009)
- An information governance guide for clinical audit HQIP (September 2009)
- Ethics and clinical audit and quality improvement HQIP (September 2009)

### **Curriculum area three: Designing, planning and setting up a clinical audit project**

#### **Learning Outcomes**

**To be able to design and plan a clinical audit project in a practice, directorate, organisation (local and/or national level) which demonstrates practical application of principles and theories underpinning best practice**

By the end of this curriculum area learners will be able to (principally through the design and planning of their clinical audit project):

- Choose, design and plan a clinical audit project
- Demonstrate the ability to engage and/or involve key and relevant stakeholders in clinical audit projects
- Draw up clinical audit standards to measure quality or safety of patients for the clinical audit and to demonstrate this in practice
- Incorporate the characteristics of quality of care measures and demonstrate how the validity of quality standards is to be tested.
- Demonstrate the link between the proposed clinical audit and the quality improvement context/ strategic aims and goals of practice, directorate and/or organisation.
- Explain the link between clinical audit methodology adopted and intended improvements in care and patient experience
- Incorporate and make an appropriate assessment of the legal, ethical and data protection dimensions of any proposed audit

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	Indicative Content	Notes
1	Applying the principles of how to undertake a clinical audit project	Guidance to be used: Clinical Audit Criteria Tool. HQIP <sup>27</sup>
2	How to design and plan a clinical audit in a practice, directorate and/or organisation/system and across different health care settings and care pathways	<p>Guide to Facilitating Clinical Audit across Different Care Settings HQIP (April 2010)</p> <p>Guide to carrying out clinical audits on the implementation of care pathways HQIP (April 2010)</p> <p>Clinical audit programme guide and guidance tools (September 2009)</p>
3	What constitutes good planning	

<sup>27</sup> Clinical Audit Criteria Tool. HQIP ([www.hqip.org.uk/criteria-of-best-practice-in-clinical-audit](http://www.hqip.org.uk/criteria-of-best-practice-in-clinical-audit))

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	Indicative Content	Notes
4	How to assess and incorporate ethical, legal and governance issues and arrangements when designing a clinical audit project and process	Reference to Curriculum Area One
	Indicative Content	Notes
5	How to assess and incorporate patient confidentiality and consent requirements as appropriate into the planned clinical audit	Reference to Curriculum Area One
6	How to draw up and incorporate appropriate clinical audit objectives, criteria and standards into a specific clinical audit project:	Guidance to be used: Clinical Audit Criteria Tool. HQIP <sup>28</sup>
7	Choosing the right measurement and methodology to achieve intended improvements in patient care and experience	An Introduction to Statistics for Clinical Audit. HQIP (April 2010)
8	How to identify and engage key and relevant stakeholders (clinical and non-clinical) in a clinical audit subject and plan their involvement in the clinical audit <ul style="list-style-type: none"> <li>• Sponsorship</li> <li>• Stakeholder engagement</li> </ul>	Patient and Public Engagement (PPE): PPE in Clinical Audit. HQIP 2010 <sup>29</sup> Clinical Audit: An Introduction for Patients. HQIP. <sup>30</sup>

<sup>28</sup> Clinical Audit Criteria Tool. HQIP ([www.hqip.org.uk/criteria-of-best-practice-in-clinical-audit](http://www.hqip.org.uk/criteria-of-best-practice-in-clinical-audit))

<sup>29</sup> HealthCare Quality Improvement Partnership (HQIP). Patient and Public Engagement (PPE).: PPE in clinical audit: HQIP. 2010.

<sup>30</sup> Clinical Audit: An Introduction for Patients. HQIP. (April 2010)

	Indicative Content	Notes
	<ul style="list-style-type: none"><li>• Patient involvement</li></ul>	
9	Set up and apply piloting tool and set up a pilot database	
10	Carry out a pilot	
11	Apply a data collection protocol for the clinical audit (to include repeat data collection)	

#### Curriculum Area Four: Data collection and analysis

##### Learning Outcomes

**To be able to collect and critically analyse and appraise data from a clinical audit. Collate and display findings and produce a full clinical audit report setting out key recommendations and actions for improvements in patient care.**

By the end of this curriculum area learners will be able to:

- Collect, analyse and critically appraise clinical audit data using a range of analytical tools and techniques
- Conduct reviews of cases and assess compliance with clinical audit standards
- Demonstrate use of methods to collate, report, and present audit data and findings
- Produce a full clinical audit report setting out recommendations and actions for improvements in patient care
- Describe and apply principles of repeat data collection to demonstrate improvement

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	<b>Indicative Content</b>	<b>Notes</b>
1	Collecting clinical audit data	
2	Analysing data to find any problems in delivering patient care	
3	Using analytical tools and techniques to analyse a problem to find possible causes of problems revealed by collated data	An Introduction to Statistics for Clinical Audit. HQIP (April 2010)
4	Interpreting the findings against the clinical audit standards	
5	Reviewing cases that are not consistent with a clinical audit standard	
6	Calculating and reporting compliance with clinical audit standards	
7	Using appropriate methods to report, collate and display clinical audit findings and data	
8	Presenting preliminary findings from a clinical audit to colleagues and key stakeholders	
9	Knowing how to produce a summary report	
10	Producing a full clinical audit report on the findings	Template clinical audit report HQIP (September 2009)
11	Understanding the difference between actions and recommendations	
12	Assessing the type of action to be taken based on the results of audit	

	<b>Indicative Content</b>	<b>Notes</b>
13	Understanding the importance of repeating data collection after action is implemented (re- audit) to demonstrate improvements in care <ul style="list-style-type: none"><li data-bbox="286 456 853 483">• Revisiting criteria, standards and latest evidence</li></ul>	

## Curriculum Area Five: Making sustained improvements

### Learning outcomes

#### **To be able to present clinical audit findings, recommendations and action plans to stakeholders, sponsors and colleagues and to influence and achieve improvements in patient care which are sustainable**

By the end of this curriculum area learners will be able to:

- Involve colleagues in evaluating clinical audit findings
- Describe and critically appraise the importance of continual review and repeating the clinical audit stages
- Disseminate through various methods the results and learning from clinical audit
- Influence key stakeholders to achieve improvements in patient care
- Work with key stakeholders towards developing a plan to achieve improvements in patient care based on the recommendations of the audit, and which is integrated into the quality improvement agenda of the practice/ directorate/ organisation
- Review and assess whether changes made have resulted in improvement
- Monitor, review and assess the impact of clinical audit on improvements in patient care.

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	<b>Indicative Content</b>	<b>Notes</b>
1	Presenting preliminary findings from a clinical audit to colleagues and key stakeholders	Template clinical audit report (September 2009)
2	Using action plans and tools to develop an improvement plan	
3	Influencing attitudes towards improvement in practice	
4	How to implement an improvement plan – problems and alternatives	<p>Guide to Facilitating Clinical Audit across Different Care Settings. HQIP (April 2010)</p> <p>Guide to carrying out clinical audits in the implementation of care pathways. HQIP (April 2010)</p>
5	<p>Involving key people in the results:</p> <ul style="list-style-type: none"> <li>• Colleagues</li> <li>• Team</li> <li>• Board members</li> <li>• Other stakeholders</li> <li>• The public</li> <li>• Patients, carers and users</li> </ul>	<p>Guide on how to present clinical audits for the public (1) HQIP (April 2010)</p> <p>Guide on how to present clinical audits for the public (2) HQIP (April 2010)</p> <p>Template clinical audit report . HQIP. (September 2009)</p>

	Indicative Content	Notes
6	Presenting key findings from clinical audit to different target audiences: <ul style="list-style-type: none"> <li>• Colleagues</li> <li>• Team</li> <li>• Board members</li> <li>• Other stakeholders</li> <li>• The public</li> <li>• Patients, carers and users</li> </ul>	As above
7	Linking outcomes back to: <ul style="list-style-type: none"> <li>• The evidence base of the project</li> <li>• Practice development roles</li> <li>• Own objectives to improve care</li> <li>• Prevailing quality improvement agenda and</li> <li>• Organisation's objectives to improve care</li> </ul>	
8	Introduction to issues around change and sustainability  To include how to assess whether change has led to improvement	
9	How to develop strategies and actions which contribute to sustainable change	Guide to Facilitating Clinical Audit across Different Care Settings HQIP (April 2010)  Guide to carrying out clinical audits on the implementation of care pathways HQIP (April 2010)  Clinical audit programme guide and guidance tools (September 2009)

	<b>Indicative Content</b>	<b>Notes</b>
10	Publicising the outcomes of the audit <ul style="list-style-type: none"><li>• How to write for publication and submit to a peer reviewed journal</li><li>• Understanding good practice around 'share and spread'.</li></ul>	
11	How to evaluate, review and assess the impact clinical audit has on improvements in patient care through methods such as : <ul style="list-style-type: none"><li>• Repeat data collection</li><li>• Monitoring</li><li>• Re-auditing</li></ul>	

## Curriculum Area Six: Leadership and Change Management

### Learning outcomes

**To demonstrate skills and abilities required to develop a clinical audit strategy aligned to organisational strategies for quality improvement and patient safety and to lead its implementation.**

By the end of this curriculum area learners will be able to:

- Develop and implement a strategy for clinical audit which is aligned to and embedded within the quality improvement strategy for the practice/directorate/organisation
- Understand and demonstrate key leadership skills around personal effectiveness, influence, motivation and team working
- Understand and critically appraise the organisational culture around quality improvement
- Demonstrate the skills to lead a clinical audit project at a local and national Level
- Demonstrate skills to enable change and quality improvement
- Demonstrate impact/outcomes, including cost savings
- Develop a continuing professional development plan based on the outcomes of this programme

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	Indicative Content	Notes
1	<p>Understand the key components of an organisational strategy for clinical audit and quality improvement</p> <ul style="list-style-type: none"> <li>• Able to write a strategy for clinical audit which feeds into the quality requirements of the organisation such as quality accounts</li> </ul>	<p>Template for Clinical Audit Strategy. HQIP<sup>31</sup></p> <p>Template for Clinical Audit Policy HQIP<sup>32</sup></p>
2	<p>Develop and understand skills required to lead the implementation of clinical audit projects.</p> <ul style="list-style-type: none"> <li>• Personal effectiveness</li> <li>• Vision and strategic development</li> <li>• Influence and engagement</li> <li>• Motivating others to enhance performance and outcomes</li> <li>• Leading and working in teams</li> </ul>	
3	<p>Understand the theories and principles of change and able to implement change including the people dimensions of change</p>	
4	<p>The importance of understanding the organisations culture around clinical audit and quality improvement and how to measure it.</p>	<p>For example through the use of tools such as The Manchester Patient Safety Framework (MaPSaF)<sup>33</sup></p>
5	<p>How to influence the organisations culture around quality improvement including clinical audit</p>	
6	<p>How clinical audit relates to appraisal, revalidation and continuing professional development</p>	<p>Link audits explicitly to learning/professional development portfolios</p>

<sup>31</sup> <http://www.hqip.org.uk/template-policy-strategy/>

<sup>32</sup> <http://www.hqip.org.uk/template-policy-strategy/>

<sup>33</sup> The Manchester Patient Safety Framework (MaPSaF) 2006

	<b>Indicative Content</b>	<b>Notes</b>
7	Develop a personal/professional development plan based on the outcome of the programme	This is linked to the assessment process

## Appendix 1

### Definitions of the Framework for Higher Education Qualifications<sup>34</sup>

FHEQ level	Examples of HE qualifications	Examples of National Qualifications <sup>35</sup>	Examples of Qualifications and credit framework <sup>36</sup>	Advanced	Intermediate	Basic
4	- Certificates of higher education - Higher national certificates	- NVQs at level 4 - BTEC Professional Diplomas, Certificates and Awards	- BTEC Professional Diplomas Certificates and Awards - HNCs - NVQs at level 4		Yes	Yes
5	- Diplomas of higher education - Foundation Degrees - Higher national diplomas	- HNCs and HNDs - NVQs at level 5 - BTEC Professional Diplomas, Certificates and Awards	- HNDs - BTEC Professional Diplomas, Certificates and Awards - NVQs at level 5		Yes	Yes
6	- Bachelors degrees - Bachelors degrees with honours - Graduate certificates and diplomas - Professional Graduate Certificate in Education	- National Diploma in Professional Production Skills - BTEC Advanced Professional Diplomas, Certificates and Awards	- BTEC Advanced Professional Diplomas, Certificates and Awards	Yes		

<sup>34</sup> The FHEQ broadly corresponds with levels 4 – 8 of the National Qualifications

<sup>35</sup> Have to be accredited by the three regulators for England, Wales and Northern Ireland

<sup>36</sup> New framework.

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FHEQ level	Examples of HE qualifications	Examples of National Qualifications <sup>37</sup>	Examples of Qualifications and credit framework <sup>38</sup>	Advanced	Intermediate	Basic
7	- Masters degrees - Integrated masters degrees - Postgraduate certificates - Postgraduate diplomas	- Diploma in Translation - BTEC Advanced Professional Diplomas, Certificates and Awards	- BTEC Advanced Professional Diplomas, Certificates and Awards	Yes		
8	- Doctoral degrees	- Specialist awards	- Award, Certificate and Diploma in strategic direction	?		

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<sup>37</sup> Have to be accredited by the three regulators for England, Wales and Northern Ireland

<sup>38</sup> New framework.

## Appendix 2

### Learning objectives/outcomes framework

#### Context:

The type of verb that is used in the task statement, determines the level or of learning (or degree of difficulty) that must be achieved. For example, being able to criticize a process shows a much more complex behaviour than simply being able to identify a process. For the purposes of the guidance we have used [Bloom's Taxonomy](#)<sup>39</sup> and its adaptations, as a framework and reference model. Bloom's Taxonomy was primarily created for academic education, however it is relevant to all types of learning.

#### Blooms Taxonomy

Bloom's Taxonomy underpins the classical 'Knowledge, Attitude, Skills' structure of learning method and evaluation, and aside from the even simpler [Kirkpatrick learning evaluation model](#), Bloom's Taxonomy of Learning Domains remains the most widely used system of its kind in education particularly, and also industry and corporate training. It is a simple, clear and effective model, both for explanation and application of learning objectives, teaching and training methods, and measurement of learning outcomes.

#### Bloom's Taxonomy model is in three parts, or 'overlapping domains'.

1. **Cognitive domain** (intellectual capability, i.e. **knowledge**, or '**think**').  
What do we want people to know?
2. **Affective domain** (feelings, emotions and behaviour, i.e. **attitude**, or '**feel**').  
What do we want people to think or care about?
3. **Psychomotor domain** (manual and physical skills, i.e. **skills**, or '**do**').  
What do we want people to be able to do?

An important premise of Bloom's Taxonomy is that each category (or 'level') must be mastered before progressing to the next. As such the categories within each domain are levels of learning development, and these levels increase in difficulty.

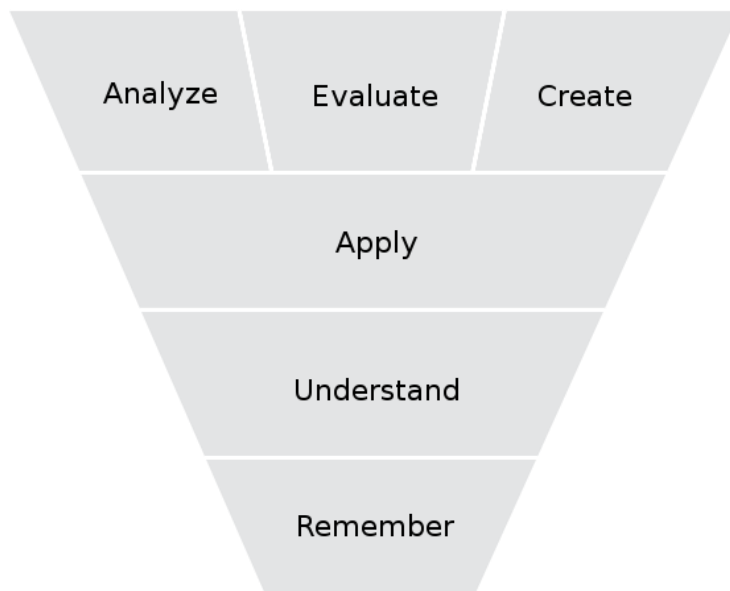
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<sup>39</sup> Bloom B. S. (1956). *Taxonomy of Educational Objectives, Handbook 1: The Cognitive Domain*. New York: David McKay Co Inc.

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The Cognitive Domain<sup>40</sup> is primarily used in determining the learning objectives of the curriculum guidance.

The simple matrix structure enables a checklist or template to be constructed for the design of learning programmes, training courses, lesson plans, etc. Effective learning - especially in organisations, where training is to be converted into organisational results - should arguably cover all the levels of each of the domains, where relevant to the situation and the learner.



Categories in the cognitive domain of Bloom's Taxonomy (Anderson & Krathwohl, 2001)

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<sup>40</sup> Detail of Bloom's Taxonomy Domains can be found in: ['Cognitive Domain'](#) - ['Affective Domain'](#) - ['Psychomotor Domain'](#)