

Embedding clinical audit at the heart of the quality agenda: national clinical audit summit

3rd November 2009, Royal College of Physicians, London

Summary

On Tuesday 3rd November 2009, The Healthcare Quality Improvement Partnership (HQIP) hosted their second national clinical audit summit: **'Embedding clinical audit into the quality agenda'** in London. The summit provided a chance for the leaders of national clinical audits to address the challenges and opportunities they share and discuss how their audits could contribute to quality accounts, metrics and the quality agenda as a whole.

The summit was attended by over 100 delegates, bringing together the teams involved in running audit projects both within and outside of the National Clinical Audit and Patient Outcomes Programme, clinical databases and registers, and representatives from the Royal Colleges and the Department of Health.

The primary purpose of the day was to see how things had progressed over the last year, and talk about how to ensure clinical audit becomes embedded into the quality agenda going forward.

The summit also aimed to enable opportunities for national audits to network, share experiences, gain support and express views, as well as to stress that within HQIP there existed strong support for clinical audit, backed by central funding. A sense of urgency and commitment to the development and reinvention of audit underpinned the day.

Programme:

The conference was opened by Robin Burgess, HQIP's Chief Executive, who ran through HQIP's achievements over the past year and highlighted our plans for the coming year.

Professor Nick Black, chairman of NCAAG, gave an update on NCAAG and the national clinical audit programme; Janet Davies, Director of Nursing, Royal College of Nursing addressed the challenges of engaging nurses in clinical audit; and Dr Ade Adeagbo, Director of Organisational Development, National Voices, gave a well received speech about the service user's perspective.

Throughout the summit, delegates were invited to respond to the presentations, ask questions and participate in discussions through:

- a question and answer panel made up of the speakers above, as well as Professor Adrian Newland, from the Academy of Royal Medical Colleges
- a series of workshops on a range of national clinical audit issues.

Several key themes emerged from these activities that raised serious and challenging issues, including:

- the very real challenges of extending audit to include collecting data from primary care
- the need to ensure patient involvement throughout the entire audit process

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- issues of communicating and dissemination of audit data to clinicians in a way that changes practice
- the handling of outliers
- relationship of audit data, often collected for teams, to revalidation
- the need to sell national audit on a local level.

The above areas were recognised by participants as presenting a need for long-term development, and ultimately solutions, and there was consensus that a national strategy on quality which included clinical audit needs to action all of these topics.

Outputs:

The wide ranging discussion and workshop sessions explored these complex areas in detail, and the outputs will be used to steer HQIP and NCAAG as part of the future strategy on audit.

The workshops are summarised in a separate document.

Conclusion:

The agenda is challenging and will take time to achieve. However, the summit met its main objectives and ensured participants went away with a sense that audit is part of a wider process to drive quality.

Those involved in NCAPOP projects were given the opportunity to share experiences, raise issues, and meet their peers, feeling part of a wider movement to improve audit quality. Projects outside of NCAPOP were shown that support was also available for them, and that they could share the networking opportunities and benefits that the new programme provided.

Above all, the meeting was a unique opportunity to harness the energy and commitment of a significant group of clinicians, policy makers, audit professionals and patient bodies to help shape the future of clinical audit. The addresses, detailed comments made in workshops and discussion in the plenary sessions are all already making their way into the strategic plans of HQIP.