# A guide to writing a plan for your national clinical audit to promote quality improvement<sup>1</sup>

#### Introduction

National clinical audit can be a powerful tool to promote better healthcare outcomes. However, this is not a passive process. Fulfilling the improvement potential of national clinical audit requires a proactive plan based on best practice and evidence based quality improvement methods.

A key function of national clinical audit is to allow patients, NHS providers and commissioners to answer fundamental questions relating to the provision of care:

- Do we know how good we are?
- Over time, where are the gaps in our practice that indicate a need for change?
- What changes can we make to improve care?
- In our efforts to improve, what is working and why?

This guide summarises best practice for promoting quality improvement and provides a suggested structure for your quality improvement plan.

## About health care quality improvement

- Clinical quality refers to the delivery of safe, effective and patient-centred care.
- Quality Improvement requires a systematic approach that uses specific techniques.
- Improvement requires both local action and central co-ordination and resources.
- Measurement is key but should be focused with specific intent
- Data should be provided in the right format at the right time to the right hands.
- Patient and public involvement is critical.

## A plan to promote quality improvement

The principles outlined above can be used to create a coherent and credible plan to promote the use of your national clinical audit data to improve clinical quality. The plan should be co-produced with key stakeholders, including patients, and should build on the improvement intent outlined in your contract specification and tender submission.

Progress against your improvement plan should be should be communicated via your project outputs, reported to your programme board and to HQIP.

A proposed structure for your plan is shown below, with hyperlinks to relevant resources. The expectation is that your plan should be no longer than 4 pages.

1. The work of the HQIP senior healthcare QI lead is supported by the Health Foundation, an independent charity committed to bringing about better health and health care for people in the UK

# Suggested structure for your plan to promote quality improvement

#### 1. Introduction

A brief description of the aims of the audit and the importance of a quality improvement plan.

#### 2. Improvement goals

- Clearly describe the healthcare problems that the audit aims to improve.
  - o What are your audit data telling you about the current quality of care?
  - o Do you know what good looks like?
  - o What are your stakeholders telling you are the priorities for improvement?
- Set targets for your improvement goals e.g. by April 2020 95% of patients admitted with sepsis will receive all components of the care bundle.
- Ensure the audit indicators align to your improvement goals by including a driver diagram

#### 3. Improvement methods

The methods will vary according to your improvement goals and should be shaped accordingly to ensure maximum ownership and engagement. Consider subdividing this section into:

#### a. National

Describe how you will align, collaborate and provide outputs to:

- Improvement initiatives e.g. Best Practice Tariff, Getting it Right First Time.
- NHS England e.g. via NCDs, the National Quality Board, specialised commissioning.
- Devolved nations via the relevant organisations.
- Other stakeholders e.g. professional societies and patient charities.

#### b. Regional

Describe how you will align, collaborate and provide outputs to:

- Improvement initiatives e.g. Academic Health Science Networks, NHS clinical networks
- Healthcare systems e.g. <u>Integrated Care Systems</u>, <u>Primary Care Networks</u>

#### c. Local

## Feedback on performance

Describe how you will optimise the feedback of results to healthcare providers to ensure maximum impact. Examples include:

- On line run charts for key measures e.g. <u>National Hip Fracture Database</u>
- Quarterly reporting of performance against expected standard.

#### Improvement tools

Describe the tools that you will make available to healthcare providers, how they will access them and what support they may expect. Examples include:

- "How to" guides e.g. Run Charts, Model for Improvement, NHS making data count
- Links to existing resources e.g. Institute for Healthcare Improvement, ELFT QI tools
- Links to training courses for quality improvement e.g. ELFT QI training, RCGP QI ready
- Good practice repository with contact information where possible.

#### Improvement workshops & collaboratives

Describe how you will engage audit users in improvement via workshops and collaboratives.

The workshops should be supported by individuals with expertise in Quality Improvement. Discussion of local data by teams should be encouraged with support to develop improvement plans. Provision should be made for feedback, follow up and sharing of good practice. See QI workshop guide

Ongoing support and feedback may be best facilitated by formal <u>Improvement Collaboratives</u>. The audit provider is not necessarily expected to fund or deliver these collaboratives but should describe how they might link with organisations that can e.g. AHSNs.

## d. Patient and public involvement

Describe how you will involve patients and the public in your improvement plan. Examples include:

- Engaging your patient panel to co-produce the improvement plan.
- Producing a "what you should expect" leaflet to facilitate your patients and carers seeking care in line with expected standards.

#### e. Communications

Describe how you will communicate your improvement plan to stakeholders, providers, patients and the public. Examples include:

- Regular improvement bulletins.
- Patient leaflets on how to seek high quality care.

## 4. Evaluation

Describe how you will evaluate the impact of your improvement plan. Examples include reporting progress against improvement goals:

- To the programme board.
- To HQIP at contract review meetings.