



# CASE STUDY

## Healthcare Inequalities

Clinical Audit Awareness Week 2025 (#CAAW25)  
featuring the Clinical Audit Heroes Awards  
2-6 June 2025

[www.hqip.org.uk/clinical-audit-awareness-week](http://www.hqip.org.uk/clinical-audit-awareness-week)



## Project: Embedding Health Inequality Assessment within Routine Clinical Audit (West Suffolk NHS Foundation Trust)

### What is the aim of this project?

Clinical audits seek to ensure the quality, safety, and effectiveness of clinical services. They are a cornerstone of clinical governance in NHS organisations. Clinical audits are routinely performed by healthcare professionals and offer an ideal opportunity to review for health inequalities in current service provision and outcomes. This project aims to embed assessment of health inequalities as part of the routine functioning of West Suffolk NHS Foundation Trust's Clinical Audit programme.

### Who is involved in this project?

This project is led by Dr Bryn Hilton (Public Health Registrar), supervised by Dr James Mapstone (Consultant in Public Health Medicine), and supported by Georgina Coote (Clinical Audit and Effectiveness Coordinator).

### What are the components of this project?

- **Audit of audits** – the first step in this project was assessing the extent to which health inequalities are currently considered in clinical audits performed in the Trust. Summaries of 8 months of completed clinical audits (n=115) were screened for their inclusion of health inequality assessment. 2/115 considered health inequalities. Of the remaining 113, 61 could have included assessment of health inequalities, indirectly supporting the aims of the audits and helping to reduce health inequalities across the Trust.
- **Audit teaching for resident doctors** – a teaching session was held for Foundation Year 1 doctors 'An Introduction to Clinical Audit', outlining how easy it is to embed health inequality assessment as part of a clinical audit. This session identified the major barriers to performing high-quality clinical audits as: insufficient time, difficulty in identifying an impactful topic, and underdeveloped analytical skills.
- **Health inequality analysis template** – a template was developed to support staff with assessment of health inequalities. This is an Excel workbook in which staff input their audit data. The workbook then contains various sheets that automatically generate differences in outcome by characteristics, such as sex, age, or deprivation. The template also contains an in-built lookup of deprivation decile and geospatial mapping of patients' postcodes.
- **Health inequality online training module** – the Trust already has an online platform with Clinical Audit training modules for staff development. An additional module was developed that contains learning on health inequalities and how to assess for them.

## What are the next steps for the project?

Integrating the analysis template and online training module into the existing Clinical Audit online platform. The Public Health Department are also offering ongoing support for any healthcare professionals within the Trust who wish to embed health inequality analysis into their clinical audit and need help with the design, analysis, or interpretation of their audit.

## What learnings can be taken away and applied elsewhere?

- The first step to reducing health inequalities is looking for health inequalities. Clinical audits are an ideal opportunity to assess for health inequalities and are currently under-utilised.
- Embedding health inequality assessment into clinical audits is a simple shift (considered design and data collection, straightforward additional analysis) with potential to significantly reduce health inequalities.
- Insufficient time, difficulty in identifying an impactful topic, and underdeveloped analytical skills all act as barriers to clinicians performing high-quality audits. Interventions that seek to improve the quality of clinical audits and embed health inequality assessment should actively mitigate these barriers.

***“Health inequalities are unfair and avoidable differences in health across the population, and between different groups within society. These include how long people are likely to live, the health conditions they may experience and the care that is available to them.”***

***– NHS England***

