

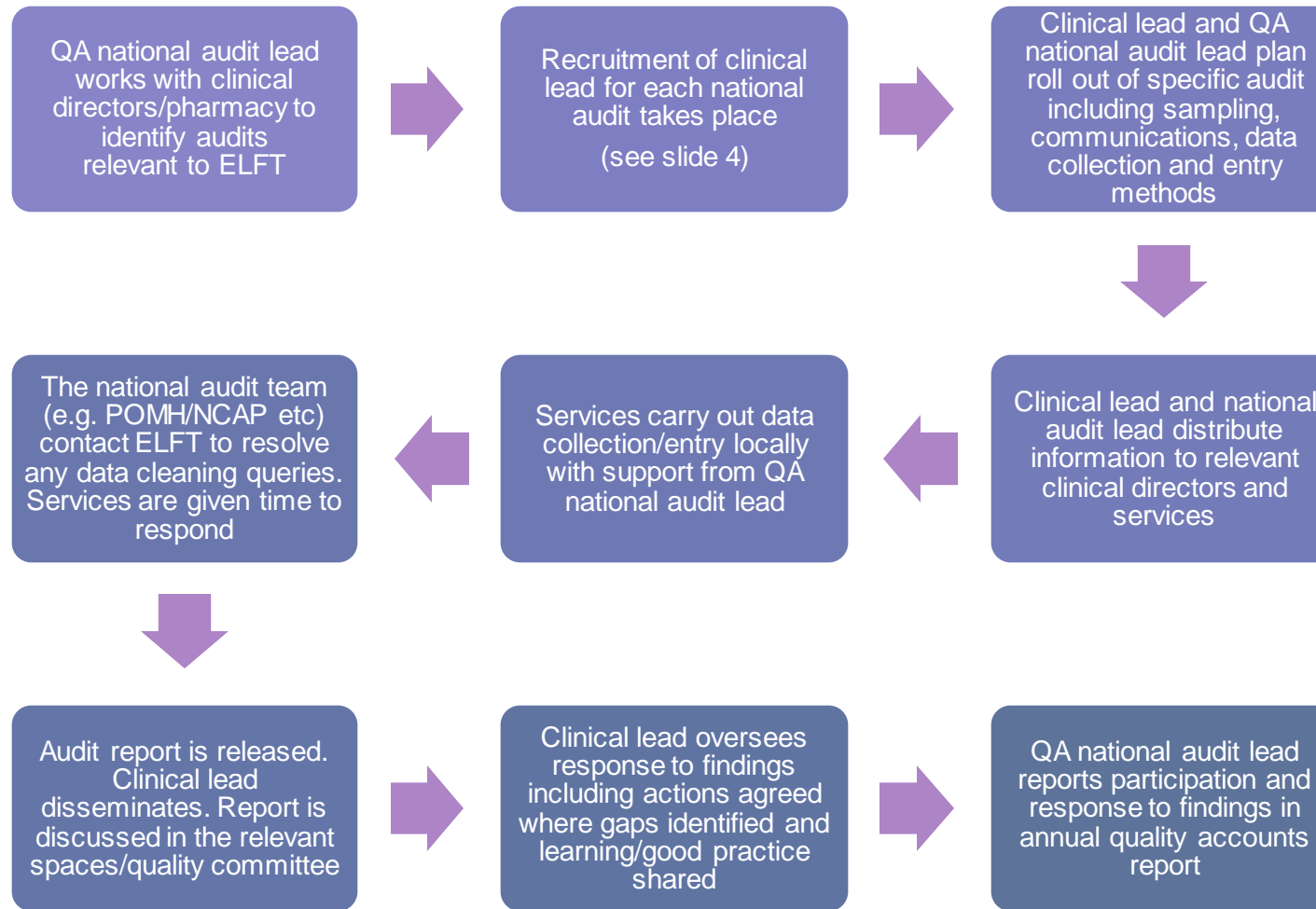


ELFT National Audit Information Pack

Quality Assurance Team (QA)

elft.qa@nhs.net

High Level Process



References:
 Clinical Lead = Clinical Lead for National Audit
 HQIP = Healthcare Quality Improvement Partnership

Detailed Process

▪ Identify national audits and ELFT clinical leads

- QA national audit lead identifies audits relevant to the Trust listed in HQIP directory and sends to relevant clinical directors for input on whether the trust should participate
- Relevant clinical directors / pharmacy confirm whether we will participate in national audit
- QA national audit lead advertises opportunity to be clinical lead for the national audit and recruits clinical lead
- QA national audit lead and clinical lead meet to discuss context, sampling, approach

▪ Roll-out of data collection/entry

- QA national audit lead drafts communications including; context, opportunity to attend webinar, expectations etc.
- Clinical lead distributes information to clinical directors to forward on as appropriate or sends directly to the relevant services
- QA national audit lead conducts sampling for the audit, usually via informatics by pulling a data extract based on a group of inclusion and exclusion criteria
- QA national audit lead and clinical lead distribute further comms via email, what's new, twitter etc. throughout sampling / run up to data collection and entry to raise awareness
- QA national audit lead drafts comms outlining instructions for data collection/entry and clinical lead ensures these reach relevant services
- Relevant teams conduct data collection / entry locally with support of QA national audit lead. The process for this differs depending on the audit
- Clinical lead and QA available to answer queries from participating services during data collection/entry and liaise with national audit team where applicable
- Data collection/entry concluded, national audit team conduct data cleaning; ELFT responds to any data cleaning queries

▪ Results and learnings

- National audit team releases reports (national and/or local depending on audit), QA national audit lead forwards to clinical lead and pharmacy for dissemination within ELFT
- Clinical lead and relevant services discuss and agree response to findings in relevant spaces/committee including agreeing improvement plans and sharing good practice
- Clinical lead feeds back to QA national audit lead with regards to discussions had and actions agreed
- QA national audit lead reports on participation in national audits for each financial year in our quality accounts

Clinical Lead for National Audit

Responsibilities

Overview

- The clinical lead for each national audit will work closely with the QA national audit lead to co-ordinate the audit. They will agree and plan timescales, sampling methods, data collection and entry, and finally, ensure that the findings from the reports are discussed in the relevant spaces and actions agreed and implemented

Main duties

- Sharing clinical knowledge on the context and background of the national audit topic
- Involvement in communicating the ask and distributing communications to the relevant clinical directors / directorates / services
- Advising on methods for sampling and data collection/entry
 - e.g. the best way to identify eligible patients, appropriate sample sizes, methods of data collection and entry, advice regarding data cleaning queries
- Reviewing data and reports once available, taking the results to the relevant spaces/committee for discussion including sharing areas of achievement and good practice as well as agreeing and implementing actions in response to areas identified for improvement

Time commitment

- Duration is the length of the audit cycle (typically around 6 months)
- Includes initial call to plan roll out of audit, ad hoc communications during the audit cycle, check in once results are received regarding plan for disseminating results and agreeing action plan, and a check in to feedback on action plan

National Audit	Year	ELFT Clinical Lead
National Audit of Dementia (NAD) Memory assessment services spotlight audit 2023/24	2023	TBC
POMH Topic 22a: Use of anticholinergic (antimuscarinic) medicines in old age mental health services	2023	Waleed Fawzi
National Clinical Audit of Psychosis (NCAP): Early intervention in psychosis audit	2018-2023	Olivier Andlaeur
POMH Topic 1h & 3e: Prescribing of antipsychotic medication in adult MH services, including high dose, combined and PRN	2022	Phil Baker
POMH Topic 21a: Melatonin audit	2022	Cathy Lavelle
POMH Topic 20b: Improving quality of valproate prescribing	2022	Syed Ashraf
POMH Topic 19b: Prescribing for depression in adult mental health services	2021 / 2022	Dominic Dougall
National Audit of Cardiac Rehab (NACR) 2021	2021	Kelly Read
National Audit of Dementia (NAD) Memory assessment services spotlight audit 2020/21	2021	Team leads
POMH Topic 20a: Improving quality of valproate prescribing	2020	Guy Thompson
POMH Topic 19b: Prescribing for depression in adult mental health services	2019	Dominic Dougall
POMH Topic 18a: Prescribing clozapine	2018 / 2019	Sheraz Ahmad/David Bridle
POMH Topic 16b: Rapid tranquillisation	2018	Sarah Dracass/David Bridle
POMH Topic 7e: Monitoring of patients prescribed lithium	2017	David Bridle
POMH Topic 13: Prescribing for ADHD in children, adolescents and adults	2015	Graeme Lamb
POMH Topic 9: Antipsychotic prescribing in people with a learning disability	2015	Ian Hall

National Audit Schedule 2023/24

Key Dates 2023/24	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
POMH 21a	R											
POMH 20b					R							
NCAP EIP	S	DC	DE	R								
POMH 22a						S	DC/DE	DC/DE				

References:

- S = Sampling
- DC = Data Collection
- DE = Data Entry
- DC/DE = Simultaneous Data Collection & Data Entry
- R = Reporting

National Audit Guidance 2023/24

Audit	Services	Sampling Guide	Clinical Lead
POMH 21a: use of melatonin	CAMHS, community paediatrics or learning disability services	Patients of any age who are currently prescribed melatonin and are under the care of CAMHS, community paediatrics or learning disability services. Patients under the care of adult, forensic or old-age psychiatry services should not be included	Cathy Lavelle
POMH 20b: the quality of valproate prescribing in adult mental health services	Adult mental health services	Patients currently prescribed valproate and under the care of adult mental health services (including forensic services), irrespective of age. Patients under the care of other services, such as CAMHS, learning disability and older people's services, should not be included	Syed Ashraf
NCAP: early intervention in psychosis audit 2023	Early Intervention in Psychosis Services	Patients aged 65 or under who are on the caseload of an EIP team or CYPMH/CAMHS team with a diagnosis of First Episode Psychosis. Patients experiencing psychotic symptoms due to an organic cause should not be included	Olivier Andlauer
POMH 22a: use of anticholinergic (antimuscarinic) medicines in old age mental health services	Old age mental health inpatient services	Patients under the care of older adults mental health inpatient services	Waleed Fawzi
National Audit of Dementia Spotlight Audit in community based Memory Assessment Services	Community-based memory services	TBC	TBC

Questions or comments?

Please contact:

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