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Name of Meeting
Quality, Safety and
Improvement Committee
Date of Meeting
15th February 2022
Agenda item:
3.2.1a

Interim Report of the Annual Quality and Clinical Audit Plan 2021/22

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Approval/Scrutiny route:	Business Executive Team – 1 February 2022
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Purpose:

The purpose of this paper is to provide the Committee with progress on the 2021/22 Annual Quality and Clinical Audit Plan. The Plan contains both National (UK and Welsh) Audits (externally determined) and Local audits (internally determined) including the interim findings and recommendations listed within the full document.

Recommendation:				
APPROVE <input type="checkbox"/>	CONSIDER <input type="checkbox"/>	RECOMMEND <input type="checkbox"/>	ADOPT <input type="checkbox"/>	ASSURANCE <input checked="" type="checkbox"/>

The Quality, Safety and Improvement Committee is asked to:

- **Receive assurance** on the progress of the Quality and Clinical Audit Plan for 2021/22
- **Note** proposed improvement initiatives

Link to Public Health Wales Strategic Plan	
Public Health Wales has an agreed strategic plan, which has identified seven strategic priorities and well-being objectives.	
This report contributes to the following:	
Strategic Priority/Well-being Objective	6 - Supporting the development of a sustainable health and care system focused on prevention and early intervention

Summary impact analysis	
Equality and Health Impact Assessment	An equality and health impact assessment is not required as there is no impact on policy or decisions relevant to Race, Disability and Gender duties.
Risk and Assurance	Welsh Government expects that all NHS organisations in Wales participate in quality and clinical audit. Healthcare organisations are required to have a cycle of continuous quality improvement that includes clinical audit.
Health and Care Standards	This report supports the Health and Care Standards for NHS Wales Theme 3 Effective Care Standard 3.3 Quality Improvement, Research and Innovation.
Financial implications	None
People implications	There is no anticipated impact on the workforce of Public Health Wales NHS Trust.

1 Introduction

The purpose of this paper is to provide the Quality, Safety and Improvement Committee with an interim update from the 2021-22 Annual Quality and Clinical Audit Plan ('the Plan'). The Quality and Clinical Audit Plan 2021-22 reflects the breadth of planned activity across the organisation and areas of public health practice. The Quality and Clinical Audit Plan 2020-21 references planned activity for both National UK / Welsh (externally determined) and Local audits (internally determined).

This paper outlines ongoing and planned improvement initiatives to strengthen our approach to undertaking, reporting and providing assurance on audit activity across the organisation.

2 Background

An initial Quality and Clinical Audit Plan was developed for the organisation in 2015/16 with subsequent annual iterations focussing on ensuring that all planned activity are collated into one master document.

The Quality Safety and Improvement Committee has previously highlighted that a wider organisational focus should be considered to reflect the breadth of the organisation and areas of public health practice. Over the past three years the focus has been on reflecting a broader perspective across Public Health Wales, however progress has been impacted by the focus on the COVID-19 response.

The Microbiology Division have been engaged, and confirm they undertake an extensive quality assurance audit programme (including vertical and horizontal audits), as required by regulatory and compliance procedures, and reported quarterly to UKAS. Due to the scope of this work, it has not been included in the Plan, however a synopsis of this programme of audit work will be included in the year-end report. In addition, any clinical audits that arise from the Microbiology Clinical Governance Group will be included in the Plan.

3 Description

3.1 Summary of Quality and Clinical Audit Plan progress

In this reporting year there has been an emphasis on engaging with Directorates to undertake audit in their area and to ensure all audit activity is reported within the Plan. Overall in 2021-22 there were originally 39 audits in the Plan. Five audits were then removed during the year, mainly due to operational pressures. (see table 3).

A full breakdown of the status of audits is below (table 1):

Table 1: Status of audits within the 2021-22 Plan:

General Update	Summary Numbers
Completed as planned	6
Ongoing as planned	19
On hold/Delayed (due to external delays)	1
On hold/Delayed (due to internal constraints)	8
Requested to be removed from plan	5
Total	39

The remaining 34 audits broken down by Division/Directorate is below (table 2):

Table 2: Summary of audits by directorate/division for 2021-22

Directorate/ Division	National	Local
Screening Division	2	23
Health Protection	4	0
QNAHPs		3
Ops & Finance (Estates)		1
WHO CC		0
Primary Care Division		1
Total	6	28

The below table contains further detail of the **five** audits removed from the 2021-22 plan and deferred to the 2022-23 plan:

Table 3: Status of audits removed from the 2021-22 Plan:

Directorate/ Division	Audit	Status
Maternal and Child Screening	Re-audit: Laboratory audit of sickle cell and thalasaemia request card completion (<i>local audit</i>)	Removed from plan due to external delays; e-learning delivery delayed, meaning audit unable to commence.
Maternal and Child Screening	Re-audit: Antenatal Diagnosis and Management of Syphilis (ADAMS) Audit (<i>local audit</i>)	Removed from plan due to operational pressures in local health board labs and insufficient capacity to undertake audit.
WHO CC/ Policy and International Health	Audit (improvement project) on implementation of the Well-Being of Future Generations Act (<i>local audit</i>)	Removed from plan due to operational pressures
WHO CC/ Policy and International Health	To Evaluate the Charter for International Health Partnerships in Wales (<i>local audit</i>)	Removed from plan due to operational pressures
Diabetic Eye Screening	No perception of light pathway audit (<i>local audit</i>)	Removed from plan due to operational pressures

4 Improvement initiatives

The April 2021 the Quality Safety and Improvement Committee Performance and Effectiveness Review highlighted the Committee's desire to receive further insight into the quality and clinical audit programme. This included requests for the Plan to identify emerging themes from across different areas, and the strengths and weaknesses identified in audit results to be included in reporting and to inform the subsequent year's Plan.

With a dedicated resource now available, an iterative improvement approach will be taken on the Quality and Clinical Audit programme. The below improvement initiatives have been identified to maximise opportunity and reduce risk. The impact of these will be measured and reviewed, with further improvements identified and implemented as part of a continuous improvement cycle.

4.1 Ensuring all audit activity is reported in the organisational Plan

During 2021-22, improvement initiatives have been introduced to ensure all audit activity is reported in the Plan. Quarterly update meetings were introduced with programme leads within the screening division. This has resulted in a significant increase in the number of locally-derived audits being undertaken that are reported within the Plan (table 4). This is a result of these meetings facilitating discussion around what activity constitutes as audit, generating new ideas for audit, and acting as a regular reminder to report all audit activity. Feedback gathered to date has reflected an overwhelming positive response to this approach. Meetings in this format will continue in 2022-23 and be extended to other programmes.

Table 4: Locally-derived audits in Screening Programmes

Programme	Total no. of audits at year end 2019-20	Total no. of audits at year end 2020-21	Total no. of audits at interim 2021-22
Breast Test Wales	1	2	3
Bowel Screening Wales	1	2	6
Cervical Screening Wales	1	0	6
Wales Abdominal Aortic Aneurysm Screening	3	2	5
Diabetic Eye Screening	1	1	3
Maternal and Newborn Screening	0	0	0
Total	7	7	23

4.2 Improve quality and consistency of audit reporting

An audit undertaken in January 2022 (of a sample of final audit reports from different screening programmes and QNAHPs) highlighted that the type of information reported was not consistent in the variety of report templates used. A standardised audit report template used across the organisation would ensure audits are consistently reporting key aspects of the audit process, including identifying standards to audit against, clearly reporting audit findings, and assessing these results and the level of assurance they provide.

Furthermore, current audit reports do not consistently give assurance that actions will be taken where non-compliance is identified. Making improvements to address non-compliance is a substantial element of the audit cycle and underpins its function as an improvement tool.

A new standardised audit report template will be piloted for audits within the 2021-22 audit plan. Feedback will be gathered and changes made to the template as necessary, and then the template will be implemented for use by all audit teams in 2022-23.

Action plans will be required for all audits in the 2021-22 Plan where non-compliance is identified. These will be reviewed with audit leads throughout 2022-23, and a summary of progress provided to Committee at interim and year-end.

4.3 Ensuring audits are appropriately prioritised to address areas of risk and where improvement can be made

At present, there is no mechanism to provide assurance that programmes are selecting quality and clinical audits using a risk based approach or where it could be used an improvement tool. There is a risk audit is overly used for routine monitoring, which is not always the most relevant or effective way to add value.

A system of 'priority statuses' will be developed. This system will ensure all audit activity is aligned to strategic or operational priorities and responsive to concerns that arise. Audit leads will have the opportunity to provide feedback on the proposed system before it is implemented for use during the development of the 2022-23 Plan.

4.4 Produce a thematic analysis of audit results

To improve reporting on the Quality and Clinical Audit programme to Committee, a thematic analysis will be developed and reported at year-end. This will include analysis of where audits of similar themes across different areas of work have taken place, and the strengths and weaknesses of the audit programme for that year. In addition to providing greater assurance to Committee, this analysis will help inform the audit plan for the following year.

4.5 Better align quality and clinical audit programme with the internal audit programme

In April 2021, the Quality Safety and Improvement Committee identified that the Internal Audit Programme and Quality and Clinical Audit Programme could be better aligned. In recognition of this, a map and gap analysis is planned of the two programmes' 2022-23 plans, to identify areas of the organisation where no audit activity is planned. These areas will be engaged with to identify if they can undertake any quality audits to address any risks or make improvements.

5 Well-being of Future Generations (Wales) Act 2015

The report contributes to Goal 3 "Support the NHS to deliver high quality, equitable and sustainable services" This below information follows the five ways of working, as defined within the sustainable development principle in the Act, in the following ways:



An annual audit plan is conducted to support services to engage in activities to continuously improve by evaluating, developing and implementing innovative ways of working. The plan demonstrates the organisations commitment of continuous improvement



Where possible Public Health Wales seeks to validate the efficacy of its practice and to make continuous improvements. The annual audit plan is integral to supporting this work.



The audit plan impacts a number of the wellbeing goals, including "A Resilient Wales" and "A More Equal Wales"



The annual audit plan contains work across UK and Wales and includes other NHS bodies working together with Public Health Wales NHS Trust to provide the best outcomes



The audit plan is an important aspect of the organisation's governance arrangements, and, as such, helps the organisation to improve the quality and safeguard the high standards of the services provided by Public Health Wales

6 Recommendation(s)

The Quality, Safety and Improvement Committee is asked to:

- receive **assurance** on the content of the attached interim report for the Annual Quality and Clinical Audit Plan 2021/22 and to **note** proposed improvement initiatives