

INFORMATION ON CLINICAL AUDIT FOR BAOS PRIZE

Clinical Audit is.....

‘A Clinically led initiative which seeks to improve the quality and outcome of patients’ care through structured peer review, whereby clinicians examine their practice and results against agreed explicit standards and modify their practice where indicated.’

NHSE 1996

Or in English.....

- Clinical Audit is a way of finding out whether we are doing what we should be doing
- Are we following guidelines?
- Are we applying best practice?

So how do we do this?

- Put very simply Clinical Audit works by collecting information or data, and comparing it to set standards and guidelines
- An effective Clinical Audit needs at least two data collections. (If you only do one, all you've done is collect data!)
- The first data collection establishes the current position.
- Plan and implement changes (where necessary).
- Allow time for the changes to take effect.
- Collect data a second time to see if the changes have resulted in improvement.

This is known as the Audit Cycle.

The Audit Cycle



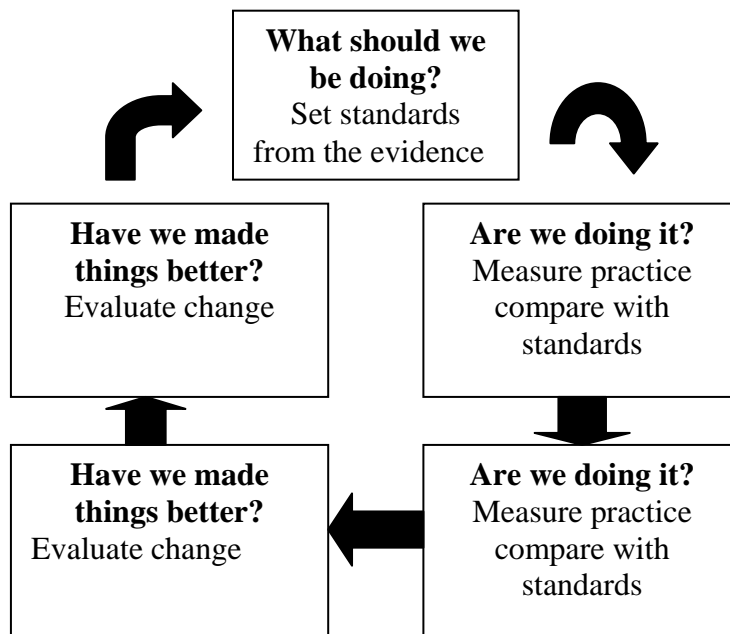
Why do we need it?

- To improve patient care;
- To enhance staff training and educational development;
- To ensure clinical effectiveness through the monitoring of clinical guidelines/standards.

The differences between Research and Audit

- Research asks “What is the right thing to do?”
- Audit asks “Are we doing the right thing?”

5 QUESTIONS AND ACTIONS FOR AUDIT



Planning your audit-proformas

Proformas

- How?
- Who?
- Where?

How?

- Is the information you require already collected, for example in patient’s notes or electronically?
- If so a **retrospective** type audit is suitable
- If the information is not routinely collected a **prospective** audit is required

Who?

- If collecting from notes does it require familiarity with patient records or specific clinical knowledge?
- If collecting prospectively consider attaching the form to the patient records, in which case everyone needs to be aware of what it is

Where?

- Where are blank forms kept?
- Where should completed forms be sent and how are they processed?

Design

- Only collect the information you need
- Questions/data items should reflect the objectives of the audit
- Keep the questions brief and clear, provide guidance notes if appropriate
- Tick box type questions are easier to analyse than free text

Patient lists

- How will you identify your sample?
 - By diagnosis
 - By outcome of test
 - By length of stay
 - By date of attendance

Possible topics could include:

- Rate and type of complications following extractions / minor oral surgery, i.e. dry sockets, haemorrhage, paraesthesia
- Management of anticoagulated patients (Warfarin, aspirin) undergoing dental extractions
- Referral pattern of extractions / MOS to secondary care
- Availability and type of surgical equipment in practice
- Inferior dental nerve block techniques and success rates
- The use of different suture materials – advantages and disadvantages
- Emergency drug and resuscitation guidelines, provision and training procedures within practice

This is not an exhaustive list. Use your imagination.

Contact BAOS if you wish a BAOS member to act as your mentor.