

Bwrdd Iechyd Prifysgol Cwm Taf Morgannwg University Health Board Knowing How Well We Are Doing

Clinical Audit Forward Plan 2022-23



The following key criteria will also be used for judging success:

- 100% participation, appropriate levels of case ascertainment and submission of complete data sets by all health boards and trusts (where applicable) in the full programme of National Clinical Audits and Clinical Outcome Reviews.
- Improvements in the quality and safety of patient outcomes and experience brought about by learning and action arising from the findings of National Clinical Audit and Clinical Outcome Review reports.

The findings and recommendations from national clinical audit, outcome reviews and all other forms of reviews and assessments will be one of the principal mechanisms for assessing the quality and effectiveness of healthcare services provided by health boards and trusts in Wales.

Welsh Government (WG) made the decision at the beginning of the pandemic to suspend the national audit proforma process to avoid adding to clinical pressures.

WG in discussion with clinical leads has decided for 2022-23 has made the decision to stop routinely requesting proformas from health boards for every audit report.

A Welsh Health Circular and Annual Plan is due to be published this Spring to clarify the mandatory audit list. The Cwm Taf Morgannwg University Health Board (CTMUHB) Clinical Audit Forward Plan has been developed based on the HQIP audit directory, but may need to be updated following the final release of the Welsh Health Circular by WG.

Compliance Key

| RED | Cause for concern. Full compliance not achieved by audit deadline. |
|-------|---|
| AMBER | Tier 1: National audit delayed, backlog exists but plan in place to comply with national audit deadline. |
| | Tier 2: Organisation priority audit delayed by one quarter, but plan in place to comply with revised audit deadline. |
| GREEN | Audit on track at 31/03/2022 or completed, evidence of audit compliance documented on AMaT system. |
| BLUE | Audit and action plan completed by clinical audit leads and signed off on AMaT system. |

Due to COVID submission deadlines and planned report release deadlines are constantly changing and in most cases being delayed.

| National Audit | Audit Period | Submission Deadline | Planned Report Publication | Specialty | Compliance Position 2021/22 | RAG Status 2021/22 | | | |
|---|--|---|-------------------------------------|----------------------------|---------------------------------|-----------------------|--|--|--|
| Acute | | | | | | | | | |
| National Joint Registry (<u>NJR</u>) | operates continuous data capture | N/A | September 2022 | Trauma and Orthopaedics | Organisation wide compliance | GREEN | | | |
| National Emergency Laparotomy Audit (<u>NELA</u>) | operates continuous data capture | N/A | TBC | Surgery / Anaesthetics | Organisation wide compliance | GREEN | | | |
| Case Mix Programme (<u>CMP</u>) ICNARC | operates continuous data capture | Monthly | March 2023 | Anaesthetics | Organisation wide compliance | GREEN | | | |
| Major Trauma Audit # (<u>TARN</u>) | operates continuous data capture | Quarterly in line with dashboard publication | Quarterly Dashboards Apr 2022 | Emergency Medicine | Organisation wide compliance | GREEN | | | |
| Long Term Conditions | | | | | | | | | |
| National Diabetes Audit * Note this covers the following areas : National Diabetes Foot Care Audit (<u>NDFCA</u>) | operates continuous data capture | N/A | 12/05/2022 | Therapies | Organisation wide compliance | GREEN | | | |

Outcome Reviews in which all Welsh Health Boards and Trusts <u>must</u> participate (across sites where services are provided)

| National Audit | Audit Period | Submission Deadline | Planned Report Publication | Specialty | Compliance Position 2021/22 | RAG Status 2021/22 |
|---|--|--|----------------------------------|-------------------------------|--|-----------------------|
| National Diabetes Inpatient Audit (<u>NaDia</u>) | WG decided not to participate in year one of the harms collection | твс | 12/05/2022 | General medicine | Bedside audit discontinued / Harms audit England only | N/A |
| National Pregnancy in Diabetes Audit (<u>NPID</u>) | operates continuous data capture | N/A | 13/10/2022 | Obstetrics and Gynaecology | Organisation wide compliance | GREEN |
| National Core Diabetes Audit (<u>NCDA</u>) | Data capture from Primary Care at specific intervals | N/A | 14/04/2022 | Primary Care | Organisation wide compliance | GREEN |
| National Diabetes Transition Audit (<u>NCDA</u>) | N/A | Data will be collated from existing submissions | 09/06/2022 | Primary / Secondary Care | Organisation wide compliance | GREEN |
| National Diabetes Paediatric Audit (<u>NPDA</u>) * # | 01/04/2022 – 31/03/2023 | N/A | 14/04/2022 | Paediatrics | Organisation wide compliance | GREEN |
| National Asthma and COPD Audit Programme (<u>NACAP</u>)* # Note this covers the following areas: Adult Asthma | operates continuous data capture | N/A | 12/05/2022 | General medicine | Organisation wide compliance | GREEN |
| COPD | operates continuous data capture | N/A | 12/05/2022 | General medicine | Organisation wide compliance | GREEN |
| Children and Young People Asthma | operates continuous data capture | N/A | 12/05/2022 | Paediatrics | Organisation wide compliance | GREEN |

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|--|--|------------------------|----------------------------------|--|---|-----------------------|
| Pulmonary Rehabilitation | (Delayed due to COVID) | N/A | TBC | General medicine | Service not operational | AMBER |
| National Early Inflammatory Arthritis Audit * # (<u>NEIRT</u>) | N/A | N/A | 13/10/2022 | Rheumatology | Action being taken to improve compliance | AMBER |
| All Wales Audiology Audit # | operates continuous data capture | N/A | N/A | Ears, Nose and Throat | Organisation wide compliance | GREEN |
| Older People | | | | | | |
| Sentinel Stroke National Audit Programme (SSNAP) (<u>SSNAP</u>) * | operates continuous data capture | N/A | 14/04/2022 | General medicine / Therapies | Organisation wide compliance | GREEN |
| Falls and Fragility Fractures Audit Programme Including: Inpatient Falls * (<u>NIFA</u>) | operates continuous data capture | N/A | 10/11/2022 | General Medicine / Trauma & Orthopaedics | Organisation wide compliance | GREEN |
| National Hip Fracture Database (<u>NHFD</u>) | operates continuous data capture | N/A | ТВС | General Medicine / Trauma & Orthopaedics | Organisation wide compliance | GREEN |
| National Dementia Audit * (<u>NDA</u>) | 03/04/2022 – 13/11/2022 | December 2022 | ТВС | Mental Health | N/A | N/A |

| National Audit | Audit Period | Submission Deadline | Planned Report Publication | Specialty | Compliance Position 2021/22 | RAG Status 2021/22 | |
|--|--|------------------------|----------------------------------|-------------------------------|--|-----------------------|--|
| End of Life | • | | | | | | |
| National Audit for Care at the End of Life (<u>NACEL</u>) * | 01/05/2022 – 30/06/2022 | 07/11/2020 | 14/07/2022 (Round 3) | Palliative Care / Medicine | Organisation wide compliance | GREEN | |
| Heart | 1 | | | I | | | |
| National Cardiac Audit Programme (<u>NCAP</u>) • National Heart Failure Audit * (<u>NHFA</u>) | operates continuous data capture | N/A | TBC | Cardiology | Action being taken to improve compliance | AMBER | |
| Cardiac Rhythm Management * (<u>CRM</u>) | operates continuous data capture | N/A | ТВС | Cardiology | Organisation wide compliance. (excludes Bridgend) | GREEN | |
| Myocardial Ischaemia National Audit Project (<u>MINAP</u>)* | operates continuous data capture | September 2022 | TBC | Cardiology | Action being taken to improve compliance | AMBER | |
| Cardiac Rehabilitation Audit (<u>CRA</u>) | operates continuous data capture | N/A | TBC | Cardiology | Organisation wide compliance | GREEN | |
| Cancer | - | | | • | | | |
| National Bowel Cancer Audit * (<u>NOGCA</u>) | operates continuous data capture | N/A | 10/03/2022 | Surgery | Organisation wide compliance. Managed through cancer services. | GREEN | |

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|---|--|------------------------|----------------------------------|---------------------------|--|-----------------------|
| National Oesophago-Gastric Cancer Audit * (<u>NOGCA</u>) | operates continuous data capture | N/A | 08/12/2022 | Surgery | Organisation wide compliance. Managed through cancer services. | GREEN |
| National Audit of Breast Cancer in Older People (<u>NABCOP</u>) | operates continuous data capture | N/A | 12/05/2022 | Surgery | Organisation wide compliance. Managed through cancer services. | GREEN |
| National Lung Cancer Audit * (<u>NLCA</u>) | operates continuous data capture | N/A | ТВС | Respiratory Medicine | Organisation wide compliance. Managed through cancer services. | GREEN |
| National Prostate Cancer Audit * (<u>NPCA</u>) | operates continuous data capture | N/A | TBC | Surgery | Organisation wide compliance. Managed through cancer services. | GREEN |
| Women's and Children's H | lealth | | 1 | | | |
| National Neonatal Audit Programme Audit * # (<u>NNAPA</u>) | operates continuous data capture | N/A | 10/03/2022 | Paediatrics | Organisation wide compliance. | GREEN |
| National Maternity and Perinatal Audit *# (<u>NMPA</u>) | operates continuous data capture | N/A | 12/05/2022 | Obstetrics / Midwifery | Organisation wide compliance. | GREEN |
| National Perinatal Mortality Review Tool | operates continuous data capture | N/A | 11/03/2022 | Obstetrics / Midwifery | Organisation wide compliance. | GREEN |

Outcome Reviews in which all Welsh Health Boards and Trusts must participate (across sites where services are provided)

| National Audit | Audit Period | Submission Deadline | Planned Report Publication | Specialty | Compliance Position 2021/22 | RAG Status 2021/22 |
|--|---|-------------------------------------|----------------------------------|---------------|-------------------------------|-----------------------|
| Other | | | | | | |
| National Audit of Seizures and Epilepsies in Children and Young People (Epilepsy12) *# (<u>NASECYP</u>) | Series of data collection cohorts within the audit | Various deadlines for cohorts | Summer 2022 | Paediatrics | Organisation wide compliance. | GREEN |
| National Clinical Audit of Psychosis * (<u>NCAP</u>) | Not planned for 2022-23 | N/A | 14/07/2022 | Mental Health | Organisation wide compliance. | GREEN |

(* denotes NCAPOP Audits)

(# denotes reports likely to include information on children and / or maternity services)

| Other National Priority Audits (Tier 1) | Audit Period | Submission Deadline | Report Publication | Specialty | Compliance Position 2021/22 | RAG Status 2021/22 |
|--|----------------------------|------------------------|-----------------------|-----------|---|-----------------------|
| National COVID Audit | Not planned for 2022-23 | N/A | TBC | Medicine | High level of compliance in initial phase of audit, compliance significantly affected by closure of department and demands on clinical staff December 2021 / January 2022 | AMBER |

National Vascular Registry Audit (includes Carotid Endarterectomy Audit) * (<u>NVRA</u>) no longer included on the annual rolling programme due to vascular services moved to tertiary centre, combined outcomes now reported under Cardiff & Vale UHB.

Outcome Reviews in which all Welsh Health Boards and Trusts must participate (across sites where services are provided)

Clinical Outcomes Review Programme (2022/23)

The Clinical Outcome Review Programme (CORP) is designed to help assess the quality of healthcare, and stimulate improvement in safety and effectiveness by enabling learning from adverse events and other relevant data. It aims to complement and contribute to the work of other agencies such as NICE, the Royal Colleges and academic research studies which support changes to improve NHS healthcare.

| The Clinical Outcome Review Programme (Tier 1) | Audit Period | Completion Deadline | Report Publication | Programme | Compliance Position 2021/22 | RAG Status 2021/22 |
|--|-------------------------------------|------------------------|-----------------------|--|---|-----------------------|
| NCEPOD - Physical Healthcare of Inpatients in Mental Health Hospitals | Feb 2020 Delayed due to COVID | June 2021 | Spring 2022 | Medical & Surgical programme | Limited participation in data submission. | RED |
| National Confidential Inquiry into Suicide and Safety in Mental Health | 01/04/2022 – 31/03/2023 | N/A | 14/04/2022 | Mental Health Programme | Organisation wide compliance. | GREEN |
| NCEPOD – Transition from Child to Adult Services | 01/04/2022 – 30/06/2022 | твс | TBC | Child Health Clinical Outcome Review Programme | N/A (new for 2022/23) | N/A |
| NCEPOD – Crohn's Disease | 01/11/2021 – 31/05/2022 | June 2022 | Spring 2023 | Medical & Surgical programme | N/A (new for 2022/23) | N/A |
| NCEPOD – Epilepsy | 01/02/2022 – 30/06/2022 | June 2022 | July 2022 | Medical & Surgical programme | N/A (new for 2022/23) | N/A |
| NCEPOD – Testicular Torsion | TBC | ТВС | TBC | Medical & Surgical programme | N/A (new for 2022/23) | N/A |
| NCEPOD – Community Acquired Pneumonia | TBC | TBC | TBC | Medical & Surgical programme | N/A (new for 2022/23) | N/A |

| The Clinical Outcome Review Programme (Tier 1) | Audit Period | Completion Deadline | Report Publication | Programme | Compliance Position 2021/22 | RAG Status 2021/22 |
|---|--|------------------------|-----------------------|---|-------------------------------|-----------------------|
| MBRRACE – Perinatal Mortality Surveillance | operates continuous data capture | твс | 13/10/2022 | Maternal, Newborn and Infant Clinical Outcome Review Programme | Organisation wide compliance. | GREEN |
| MBRRACE – Saving Lives Improving Mothers Care | operates continuous data capture | твс | TBC | Maternal, Newborn and Infant Clinical Outcome Review Programme | Organisation wide compliance. | GREEN |

Outcome Reviews in which all Welsh Health Boards and Trusts <u>must</u> participate (across sites where services are provided)

| Organisation Priority Audits (Tier 2) | Audit Period | Completion Deadline | Report Publication | Specialty | Compliance Position 2021/22 | RAG Status 2021/22 |
|---|--|------------------------|-----------------------|---|--|-----------------------|
| Case Note Documentation Audits: | Revised methodology TBC | | | | | |
| Acute Hospital Documentation Audit | | твс | TBC | Acute inpatient activity | Compliance significantly affected by closure of department and demands on clinical audit staff December 2021 / February 2022 | AMBER |
| Community Hospital Documentation Audit | | TBC | TBC | Community hospital inpatient activity | Compliance significantly affected by closure of department and demands on clinical audit staff December 2021 / February 2022 | AMBER |
| A&E Documentation Audit | | ТВС | TBC | Emergency Medicine | Organisation wide compliance. | GREEN |
| Consent to Treat Audit | Revised methodology TBC | твс | твс | Surgery | N/A | N/A |
| National Ophthalmology Audit (Adult Cataract surgery) * (<u>NOD</u>) | Under Review | твс | TBC | Ophthalmology | CTM agreed as an organisation priority audit, but due to COVID-19 Bridgend inclusion delayed until 2022-23 | AMBER |
| Appendectomy Audit | Prospective audit methodology TBC | твс | TBC | Surgery | Organisation wide compliance. | GREEN |

Cwm Taf Morgannwg University Health Board Organisation (Tier 2) Priority Annual Audit Programme 2021/22

| Organisation Priority Audits (Tier 2) | Audit Period | Completion Deadline | Report Publication | Specialty | Compliance Position 2021/22 | RAG Status 2021/22 |
|--|--------------|------------------------|-----------------------|-----------|---|-----------------------|
| Tracheostomy Care Audit | твс | твс | ТВС | Surgery | Limited Clinical Audit resources focused on national audit compliance so audit rolled over to 2022/23 | RED |