



# Clinical Audit Checklist

4 May 2023 / Intensive Care Quality Improvement  
/ Astrid Declaro

**Complete**

Score	<b>78.13%</b>	Flagged items	<b>6</b>	Actions	<b>3</b>
<b>Site conducted</b>					Unanswered
<b>Department</b>					
Intensive Care Quality Improvement					
<b>Healthcare Facility</b>					East Rochester Hospital
<b>Audit Lead</b>					Astrid Declaro
<b>Conducted on</b>					04.05.2023 12:36 PST

## Flagged items & Actions

6 flagged, 3 actions

### Flagged items

6 flagged, 2 actions

Clinical Audit Checklist / Preparation, Planning & Selecting the Standards/Criteria

**Does the clinical audit have a clearly-stated quality improvement aim and objectives?**

No

To Do | Priority Medium | Due 11.05.2023 12:37 PST | Created by SafetyCulture Staff

Submit proposal form

Clinical Audit Checklist / Measuring Performance

**Is the data set collected defined with reference to the audit standards?**

No

Clinical Audit Checklist / Measuring Performance

**Is the population of patients to be included in the audit defined with reference to the audit standards?**

No

Clinical Audit Checklist / Measuring Performance

**Is the audit sample size set, and the sample selected, in accordance with best practice guidance?**

No

Clinical Audit Checklist / Measuring Performance

**Are the findings presented in a way which gave a clearest possible picture of performance?**

No

Clinical Audit Checklist / Implementing Changes

**Do the findings show compliance with standards?**

No

To Do | Priority Medium | Due 11.05.2023 12:41 PST | Created by SafetyCulture Staff

Create action plan

### Other actions

1 action

Clinical Audit Checklist / Sustaining Improvements

**Has the stakeholder group determined whether the audit needs to be repeated?**

No

To Do | Priority Low | Due 11.05.2023 12:45 PST | Created by SafetyCulture Staff

Clinical re-audit

## Preparation, Planning & Selecting the Standards/Criteria

1 flagged, 1 action, 80%

**Does the clinical audit have a clearly-stated quality improvement aim and objectives?**

No

To Do | Priority Medium | Due 11.05.2023 12:37 PST | Created by SafetyCulture Staff

Submit proposal form

**Does the audit measure performance against standards for process and outcomes that are based on the best available evidence?**

Yes

**Are the standards clearly referenced?**

Yes



Photo 1

**Has a named clinician been identified to lead the clinical audit?**

Yes

**Is the named lead is a junior doctor working on rotation?**

No

**Is the audit to be undertaken in compliance with local governance arrangements?**

Yes

**Is it proposed and registered in accordance with local policy and protocols?**

Yes

**Are the sample identification, data collection and analysis, and all other aspects of the clinical audit cycle compliant with the law and best practice on information governance and data security**

Yes

**Are all members of the clinical audit committee engaged in the clinical audit cycle from the start and in delivering the service to be audited?**

Yes



Photo 2



Photo 3

Is a stakeholder group identified and engaged in the clinical audit?

Are any ethical or information governance concerns identified?

No

Did the stakeholder group sign off the audit aim, objectives, standards and audit method before data collection began?

Yes

## Measuring Performance

4 flagged, 60%

Is the data set collected defined with reference to the audit standards?

No

Is the population of patients to be included in the audit defined with reference to the audit standards?

No

Is the audit sample size set, and the sample selected, in accordance with best practice guidance?

No

Is the rationale behind the sample size and selection method documented in the audit report?

Yes

Is any part of the data to be extracted from electronic health records?

Yes

Is the data extraction tested to ensure that the correct data source was being used, and the correct sample and data were being extracted?

Yes



Photo 4



Photo 5

Is any part of the data to be collected from paper health records?

No

Is clinical audit data analyzed using appropriate statistical techniques to measure compliance with audit standards?

Yes

Are the findings presented in a way which gave a clearest possible picture of performance?

No

Are the clinical audit findings reported with the appropriate level of granularity?

Yes

Are full details of the clinical audit method documented to ensure that any necessary repeat data collection to measure the impact of interventions was carried out in exactly the

Yes

same way?



Photo 6



Photo 7

**In the final report, are any unavoidable variations in the repeat data collection method documented and reported alongside the results?**

Yes

## Implementing Changes

1 flagged, 1 action, 87.5%

**Are the results shared with the stakeholder group?**

Yes

**Do the findings show compliance with standards?**

No

To Do | Priority Medium | Due 11.05.2023 12:41 PST | Created by SafetyCulture Staff

Create action plan

**Are steps undertaken to establish the underlying causes for non-compliance?**

Yes

**Is an action plan developed to address the established underlying causes?**

Yes

**Is the action plan signed off by the stakeholder group and in accordance with local governance arrangements?**

Yes

**Is the action plan implemented?**

Yes



Photo 8



Photo 9



Photo 10

**Is the impact of the implementation of the action plan monitored in an appropriate way?**

Yes

**Are any unforeseen negative impacts identified?**

No

**Has evidence been obtained to demonstrate that implementation of the action plan has resulted in an improvement in the quality of services?**

Yes

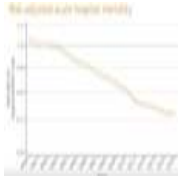


Photo 11

## Sustaining Improvements

1 action, 100%

**Has the stakeholder group determined whether the audit needs to be repeated?**

No

To Do | Priority Low | Due 11.05.2023 12:45 PST | Created by SafetyCulture Staff

Clinical re-audit

**Has the stakeholder group determined whether refinements are required to the audit protocol and data collection tool for greater focus on shortfalls identified?**

Yes

**Have alternative approaches to ensuring that quality of service is maintained, such as some form of ongoing monitoring, been considered?**

Yes

**Have the results of the audit been documented and shared with key stakeholders, service users, the rest of the organization, and with the public?**

Yes

**Have learnings from the audit been shared with colleagues, both within the organization and across partner organizations, including commissioners, clinical networks and other professional groups?**

Yes

yes, able to automatically generate and share the clinical audit report! saved so much time and effort! lets me focus on patients more



Photo 12

## Sign Off

### Additional Recommendations

Improvement efforts can be maintained by integrating iAuditor in our regular checking mechanisms

### Audit Lead Name & Signature



Astrid Declaro  
04.05.2023 12:47 PST

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## Clinical Audit Committee

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### Clinical Audit Committee 1

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#### Name, Department & Signature



Jennelyn Casacop, Clinical Improvement  
04.05.2023 12:48 PST

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### Clinical Audit Committee 2

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#### Name, Department & Signature



Dyan delos Santos, Intensive Care  
04.05.2023 12:49 PST

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### Clinical Audit Committee 3

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#### Name, Department & Signature



Luigi Mendoza, Clinical Engineering  
04.05.2023 12:49 PST

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### Clinical Audit Committee 4

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#### Name, Department & Signature



Jericho Coronado, Applications Systems Analyst  
04.05.2023 12:49 PST

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## Stakeholders

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### Stakeholders 1

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#### Name & Signature



Sigrid Geronimo  
04.05.2023 12:50 PST

## Stakeholders 2

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### Name & Signature



Karl Gochuico  
04.05.2023 12:50 PST

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## Stakeholders 3

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### Name & Signature



Michelle dela Paz  
04.05.2023 12:51 PST

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## Stakeholders 4

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### Name & Signature



Neil Daroing  
04.05.2023 12:52 PST

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## Stakeholders 5

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### Name & Signature



Patrick Hagape  
04.05.2023 12:52 PST

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## Media summary

### Appendix 1 - Examples of Intensive Care Quality of Care Measures

#### 1. Structure Measures

The size of the ICU  
Whether the ICU is open or closed  
The type and amount of technology available  
The number and roles and responsibilities of ICU staff (as described in IC-1, IC-2 and IC-3)  
Clinical work-load and case mix  
Levels of supervision

#### 2. Process Measures

Rate of DVT prophylaxis  
Rate of stress ulcer prophylaxis  
Early extubation leading  
Delayed discharge from ICU  
Appropriate transfusion threshold  
Blood glucose control  
Hand washing  
Time to administration of antibiotics  
Low tidal volume ventilation in ALV/ARDS  
Site of L.R. Management

#### 3. Outcome Measures

Severity-adjusted mortality rate  
Health-related quality of life  
Unplanned readmissions to ICU  
Serious adverse drug event rate  
Ventilator-associated pneumonia rate  
CVC bloodstream infection rate  
Family satisfaction



Photo 2

Photo 1



Photo 3



Photo 4



Photo 5



Photo 6



Photo 7



Photo 8



Photo 9



Photo 10

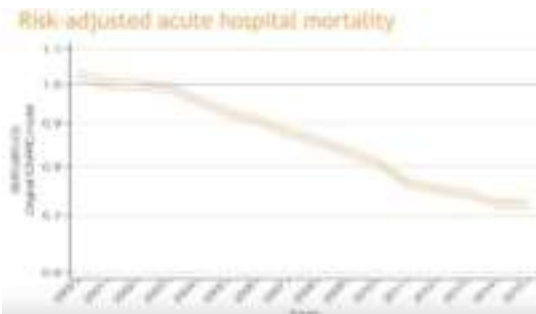


Photo 11



Photo 12