

# **Healthcare Audit Plan 2018/2019**

**Quality Assurance and Verification Division**

**1<sup>st</sup> March 2018**

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### **Appendix 1: - Audit Plan 2018/2019**

## 1. Method for selecting themes for the HCA Plan 2018/2019

Following work undertaken in 2017 through a Rapid Appraisal of the Health Care Audit [HCA] Function, it has been decided that in formulating the Audit Plan for 2018 and 2019 data from the following sources would inform the HCA Plan:

- Gaps identified by the controls assurance process
- Themes from analysis of serious incident investigations and complaint data
- Themes emerging from the risk management/risk register process
- Themes from the National Patient Experience Survey

## 2. Key themes for HCA Plan

The following key themes for audit were identified from the analysis of the various risk data streams that were considered as reflected in section 3 above:

- Detecting and responding to patient deterioration
- Managing complex patients with complex co-morbidities
- Discharge planning
- Medication safety
- Healthcare Acquired Infection (HCAI) and Anti-microbial Resistance (AMR)
- Continence and toileting
- Hydration and nutrition
- Falls
- Pressure ulcers
- Safeguarding vulnerable persons at risk of abuse
- Emergency department delays
- The prevention and management of violence and aggression

## 3. Commencing self audits and validation HCAs

In 2017 the Risk Committee recommended the development of approaches to self audit that could then be validated by the Health Care Audit Team. This approach is intended to expand the scope of the health care audit function. In 2018 this approach will be piloted to audit compliance with guidance on **quality and safety committees**, the **open disclosure policy**, the **integrated risk management policy**, and the **incident management framework**. This will be designed as a single HCA with a small number of key questions related to each of the 4 key national policies to be used locally for local audit purposes. This will be followed by validation audit of a random sample of sites by the HCA Team.

## 4. Building on local HCA work

In addition to conducting specific validation HCAs as reflected in section 3 above, a module related to compliance with the HSE Framework for **Developing Policies, Procedures, Processes and Guidelines - PPPGs (2016)** will be built into all other audits of compliance with HSE PPPGs which were developed from 2017 onwards.

This will help to build on local audit work, including providing assurance for the reliability<sup>1</sup> of local audits where this is possible, or suggesting quality improvements where evidence to provide this assurance is not identified.

## 5. Including service user and staff voices in HCA

The HCA Team is committed to including service user and staff voices in audits and this is reflected in the HCA Plan in Appendix 1. Staff are routinely interviewed for all HCAs and this will continue. The themes from the National Patient Experience Survey have informed the HCA Plan for 2018/2019. Service user representatives are part of the HCA sub-group responsible for updating the HCA Standard Operating Procedures which includes mechanisms for ensuring that service user voices are properly heard in HCA plans, priorities, and in the actual conduct of individual audits.

## 6. A focus on cross service audits

Where possible, all audits will be designed to audit across services. This is reflected in the 2018/2019 Healthcare Audit Plan (Please see Appendix 1)

## 7. Unscheduled audits related to emerging safety issues

In 2017, the HCA Team undertook two unscheduled audits related to emerging safety issues including an audit of compliance with the HSE National Counselling Service Guidelines on **Risk Management and Child Protection** (2012); and an audit of compliance with the National Clinical Guidelines on **National Early Warning Score** (2014). The HCA Team will have the capacity to undertake a number of unscheduled audits related to emerging safety issues and will do so during 2018/2019 where requested by the National Director QAV.

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<sup>1</sup> Reliability is a concept related to data quality that has to do with whether repeated efforts to measure the same phenomenon come up with the same answer.

## Appendix 1:

### Healthcare Audit Plan 2018/2019

Theme	Audit no.	Audit description	Source of intelligence informing that this is an audit priority					Issue goes across services	Potential to build on local audit work	Service user (or rep) voice input to audit possible	Staff voice input to audit possible	Comment
			Controls assurance process	Theme from analysis of incident investigations	Theme from analysis of complaint data	Theme from National Patient Experience Survey	Themes from risk management /risk register process					
Core quality and patient safety structures and processes	1	Audit of compliance with <b>HSE National Framework for Developing Policies, Procedures, Protocols and Guidelines (PPPGs) (2016)</b>		Yes				Yes	Yes	Yes	Yes	This will be a stand-alone audit. A module related to compliance with this framework will be included in all other audits of compliance with HSE PPPGs which were developed from 2017 onwards.
	2	Audit of compliance with <b>HSE Open Disclosure Policy (2013)</b>		Yes				Yes	Yes	Yes	Yes	This will be designed as a single audit with a small number of key questions related to each of the 4 key national policies/guidelines for local audit - followed by validation audit of a random sample of sites by the Healthcare Audit (HCA) Team.
		Audit of compliance with <b>HSE Integrated Risk Management Framework (2016)</b>	Yes	Yes				Yes	Yes	Yes	Yes	
		Audit of compliance with <b>HSE Quality and Safety Committees Guidance (2016)</b>	Yes	Yes				Yes	Yes	Yes	Yes	
		Audit of compliance with <b>HSE Incident Management Framework (2018)</b>	Yes	Yes				Yes	Yes	Yes	Yes	
Detecting and responding to patient deterioration	3	Audit of compliance with National Clinical Guideline (NCG) No. 1 - <b>National Early Warning Score (2013)</b> , and NCG No. 4 - <b>Irish Maternity Early Warning Score (2014)</b>		Yes				Yes	Yes	Yes	Yes	The theme of <b>detecting and responding to patient deterioration</b> was covered in the HCA 2017/2018 schedule. Significant non-compliance was identified. This continues to be a theme identified through analysis of serious incident investigations. Ongoing/repeat audits will be undertaken within this theme.
	4	Audit of compliance with NCG No. 5 - <b>Clinical Handover in Maternity Services (2014)</b> , and NCG No. 11 - <b>Clinical Handover in Acute and Children's Hospital Services (2015)</b>		Yes	Yes			Yes	Yes	Yes	Yes	

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Discharge planning, Patient deterioration, Medication safety, and Management of complex patients	5	Audit of compliance with <b>HSE Integrated Care Guidance: A Practical Guide to Discharge and Transfer from Hospital (2014)</b> focusing on (a) Information provided to patients about their condition and how to care for themselves at home; (b) Information about who to contact in case of concerns/deterioration; (c) Information about medicines including about side effects and medicines reconciliation (d) Care planning for management of complex patients with multiple co-morbidities		Yes	Yes	Yes		Yes	Yes	Yes	Yes	
Continence/toileting	6	<b>Irish National Audit of Dementia Services</b> including a focus on the management of continence/toileting		Yes		YES		Yes	Yes	Yes	Yes	

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Healthcare Acquired Infections (HCAI) and Anti-microbial Resistance (AMR)	7	Audit of compliance with Interim Policy on <b>Requirements for screening of Patients for Carbapenemase Producing Enterobacteriaceae (CPE) in the Acute Hospital Sector (2017)</b> , provisional guidance related to <b>CPE for Public Health Nurses and others who need to visit patients/clients in their home (2017)</b> , provisional guidance related to <b>CPE for Long Term Care Facilities (Residential Non Acute Care Settings (2017))</b> , and provisional guidance related to <b>CPE for General Practice (2017)</b> .			Yes		Yes	Yes	Yes	Yes		
Hydration and Nutrition	8	Audit of compliance of <b>HIQA National Quality Standards for Food and Nutrition for Residential Care Settings for Older People in Ireland, (2015)</b> , and related equivalent standards for other care setting		Yes		Yes	Yes	Yes	Yes	Yes		



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Falls	9	Audit of compliance with standards on <b>falls prevention and management</b> related to: (a) adherence to risk assessment recommendations; (b) imaging following fall; and (c) contact with relatives following falls		Yes	Yes			Yes		Yes	Yes	
Pressure ulcers	10	Audit of compliance with standards for the <b>assessment of pressure ulcers</b>		Yes				Yes		Yes	Yes	
Violence and aggression	11	Audit of compliance with <b>HSE Policy for the Management of Work Related Aggression and Violence (2014)</b> , and related clinical risk guidelines										Violence and aggression towards staff impacts on their health and safety and on their availability and ability to deliver safe clinical services. Violence and aggression towards our service users causes significant suffering for them and their carers.
ED Delays	12	Audit of compliance with <b>Escalation Protocols in Response to Ambulance Offload Delays</b>		Yes		Yes	Yes	Yes	Yes	Yes	Yes	

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Safeguarding	13	Audit of compliance with HSE National Policy and Procedures for <b>Safeguarding Vulnerable Persons at Risk of Abuse (2014)</b>					Yes	Yes	Yes	Yes	Yes	