

## Clinical Audit

### Purpose

To develop and sustain a culture of best practice.

### Policy

The Canterbury DHB maintains clinical audit is fundamental to clinical governance, professional practice, and is necessary to assure and improve the quality of care processes and outcomes across the organisation. Specific service and department audit programmes must incorporate the CDHB Core Clinical Process Audit Schedule which is designed to monitor key processes and outcomes which includes high risk components in the patients' journey.

Clinical audit programmes within services are undertaken and completed in a systematic manner and ensure key processes are robustly monitored. Where standards are not met, improvements are made and these are evaluated through further audit.

### Scope

Applies to all clinical staff and service areas. Excludes research activity.

### Definitions

#### Clinical Audit

'Clinical audit is a quality improvement cycle that involves measurement of the effectiveness of healthcare against agreed and proven standards for high quality, and taking action to bring practice in line with these standards so as to improve the quality of care and outcomes' (New Principles of Best Practice in Clinical Audit, Healthcare Quality Improvement Partnership (HQIP UK) January 2011).

### Roles and responsibilities

- According to delegated authorities, all staff have responsibility for the quality of the service which they provide. All clinically qualified staff are individually accountable for ensuring they audit their own practice and to participate in service quality improvement activity.

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- Services are responsible for having a service specific audit programme, processes, standard tools, timetable, communication and record of learning and improvements. This includes the core Clinical Audit Programme
- The Executive Management Team and General Managers ensure standards are being met and improved through the service clinical audit programmes, with outcomes, learnings and improvements on service governance group agendas and shared across the organisation.
- The Clinical Board ensures Canterbury DHB has a robust Clinical Audit Programme in place and receives regular updates on the status and outcomes of clinical audit through quality reporting.

## CDHB Core Clinical Process Audit Schedule

This encompasses priorities based on national requirements as well as key processes and outcomes, and high risk components in the patients' journey. A copy of the CDHB Core Clinical Process Audit Schedule (Generic) is on the Corporate Quality and Patient Safety intranet site,

[http://cdhbintranet/corporate/Quality/SitePages/Clinical\\_Audit.aspx](http://cdhbintranet/corporate/Quality/SitePages/Clinical_Audit.aspx).

## Measurement

All services are able to demonstrate clinical audit activity in their area, with the minimum being completion of the requirements of the Core Clinical Audit Programme.

## References

- NZS 8134:2008 Health and Disability Services Standard (standard 2.3 Quality and Risk Management).
- Toward Clinical Excellence, Ministry of Health 2002.
- HQIP Healthcare Quality Improvement Partnership: Clinical Audit 2010.
- New Principles of Best Practice in Clinical Audit, Healthcare Quality Improvement Partnership (HQIP UK) January 2011.

<b>Policy Owner</b>	Manager Corporate Quality and Patient Safety
<b>Policy Authoriser</b>	Executive Director of Nursing
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