

National Advisory Group for Clinical Audit & Enquiries

Consultation on Future of Audit staff in Trusts

Responses to the overall document and to the specific questions should be sent to clinicalaudit@dh.gsi.gov.uk by Monday 17 September 2012.

The full document can be downloaded from www.dh.gov.uk/health/2012/07/audit-staff/

Q1	Do you agree with this assessment of the current concerns of audit staff in Trusts?]	I do agree with your statements. As a result of the Corporate restructure the clinical audit staff have been put at risk of redundancy failing finding a suitable positions for us. There are great strains on Trusts and clinical audit staff in the current climate. I am not sure that senior management and Directors fully understand the function of the clinical audit role in NHS Foundation Trusts as one of assurance to the Board. We have always struggled with limited staffing levels to undertake the role of clinical audit leading to quality improvement. Clinical audit in its current role is being diminished and clinicians will have a stronger involvement in leading priority clinical audits with help with analysis by the performance department.
Q2	Do you agree that the current situation is not sustainable?	I do up to a point in that less staff resources are provided to carry out the role of clinical audit. The shift from completing clinical audits and making a quality improvement has not been fully grasped or the importance understood to effect change and improvements.
Q3	Do you agree with this analysis of the underlying reasons for the current situation?]	I do agree that clinical audit staff are left alone to complete audits with some support from managers and priorities are ever changing. I think that senior clinicians should be the ones to take the audit lead and be responsible for making an improvement by repeat data collection by working with the clinical audit department senior staff to make this happen Clinicians need the support with analysis, coordinating the audit, data collection and analysing data and writing of a report.
Q4	Do you agree this would be helpful?	I agree that clinical staff need to be aware that they require clinical audit skills – There is a shift from providing face to face training to elearning training. I think staff benefit from a workshop environment to ask questions, participate in completing stages in audit and understand the

		clinical audit cycle. There would be a greater need for training resources and courses in quality if considering supporting enhancements in the roles and responsibilities of audit staff and as more responsibility is expected, the job role and job banding at a higher level needs to be reflected in changes of roles.
Q5	Do you agree this would be helpful?	The network SECEN has provided the opportunity to meet other audit staff at same grade and different roles and provided a real opportunity to share ideas and quality improvements and sharing of ideas. It has also provided an excellent networking opportunity. To expand this to more national/regional conferences may be helpful although i feel that the local networking is more helpful and useful. There is already the annual Clinical audit and improvement conference and organisations as CASC events are helpful. NHS Trusts have limited financial resources to send staff on these event even at local level.
Q6	Do you agree this would be helpful?	I do agree this would be helpful
Q7	Do you agree this would be helpful?	I do agree this would be helpful
Q8	Do you agree this would be helpful?	I do agree this would be helpful
Q9	What is your view of each component in the proposal?	
Q10	Do you have suggestions for other components?	none