

Clinical Pathway Audit Guide

This guide is intended to assist with the auditing process of a clinical path review. Please also see *Clinical Pathways- A guide for clinicians* and *Clinical Pathway Development/Review Checklist*.

Auditing Medical Records

Getting the Records

Medical Records should be ordered at least one week in advance through Health Information Services (HIS). If you already know the names or UR numbers of your patient group, please use the IBA 'bulk record request' screen for ordering.

If you do not know the details of the patients who have recently been admitted with this diagnosis or procedure, contact Hayley Salter (Patient Information Requests) in HIS, ext 6951. Make sure you can clearly outline the patient group you are looking for, ie the particular diagnosis or surgery that is included in this clinical pathway. You should request records for the last 12 months, and you should order at least 20 histories.

Evaluating Current Practice

Use the documentation from the whole episode of care to measure the current practice for this patient sample.

Things you should audit are:

- UR number, age, gender, diagnosis, procedure, and length of stay (see below)
- What type of observations and assessments have been documented? Do these represent best practice/what is outlined on the path? eg. was the pain assessed post operatively?
- What sort of treatment did they receive? Was it delivered appropriately? eg. what type of antibiotic was prescribed? Or was pressure area care performed?
- What was the outcome for the patient? Eg. were they walking independently at the time of discharge?
- Were there any complications/readmissions/infections etc.?

This information can be compiled by hand, or you may prefer to put the data into a Microsoft Excel spreadsheet

Length of stay

When auditing histories, note the length of stay for each patient. You can generate an average length of stay from this information.

When you have an average you should think about:

- Is this an appropriate length of time for this patient group to stay in hospital? (can they be admitted to HaCC?)
- Could the length of stay be shorter?
- Does the clinical pathway reflect the amount of time patients are actually staying in hospital?

Path Compliance

When auditing histories, you should also check the compliance with clinical pathway documentation. Things you should look for are:

- Was a clinical pathway used for this patient?
- Were all the areas for documentation completed?
- Were N/A's used correctly? (ie. staff shouldn't write 'N/A' next to a line such as 'Vital signs stable')
- Were variances completed for every 'VAR', and was the Variance Tracking Record completed properly?

Variance Information

Although time consuming, auditing variance information yields very important information about current management of your patient group. Identify any common themes in the variances, including the intervention and outcomes. If possible, tally up the number of each type of variance. This will tell you what most commonly goes wrong for this group. You can use this information to make positive changes to improve the quality of the service you provide.

Consumer Input

To conduct a thorough clinical pathway review, it is important to get feedback from the families of the children we care for. We are interested in their feedback, so that we can constantly improve the care we provide, and deliver it in a way that meets the families' needs

Find a few families who are willing to discuss their experiences about their stay. Try to be as approachable and sensitive as possible. It may be better to move away from the clinical area to allow for more open discussion. You can gather feedback as a group or individually.

Please explain to the family that you are reviewing the clinical path, which is a tool we use to ensure that our care is of a high standard, and meets the families' needs. It is also used for documentation and is kept in the patient's file.

Here are just a few examples of the questions you could ask:

- Are there any ways that your experience could have been more organised/streamlined?
- Did you feel that you were encouraged to participate in the care for your child?
- Have you been kept informed about your child's progress?
- Do you feel confident to look after your child at home?
- What was the quality of communication between staff?