

CLINICAL AUDIT SPOTLIGHT ON PHYSIOTHERAPY

Views from Daniel Thompson, Clinical Audit Lead for Physiotherapy and Team Lead Neurological Physiotherapist at Lincoln County Hospital



ARE WE ACHIEVING THE PHYSIOTHERAPY STANDARDS FOR SURVIVORS OF CRITICAL ILLNESS?

NICE Quality Standard 158
ULHT Therapy Governance
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Excellence in rural healthcare

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CLINICAL AUDIT IN ACTION—PAST TO PRESENT

'We can, we will, we must'. This is the mantra that I have adopted to drive forward Clinical Audit operations in the Physiotherapy department at Lincoln County Hospital. But it wasn't all plain sailing when I first entered the Clinical Audit arena.

When I volunteered for the role of Clinical Audit Lead two years ago, I had limited knowledge and was required to self-teach the basics. No Physiotherapist had any formal Clinical Audit training and the Clinical Audit programme was non-existent. The few projects that were being undertaken had varying levels of quality, inconsistent support from Team Leads and relied almost entirely on individual clinicians. The benefits and importance of Clinical Audit were significantly under-valued. Fast forward to the present day, and there are great achievements I am extremely proud of.

I have developed screening tools that help guide clinicians to focus their project ideas. These ensure that best practice standards are being used, and that projects are focussed on satisfying at least one of the NHS quality dimensions (patient safety, patient experience and clinical effectiveness) before they are submitted to the Trust Quality Audit Team. Furthermore, I have established a Clinical Audit Group that meets on a quarterly basis to review the department's Clinical Audit Programme. The current programme is highly focussed on local team issues, with each team taking responsibility for their projects. The current programme now includes nine projects across wide-ranging areas, including, documentation, falls, resting splints in neurological patients and safety of on-call Physiotherapists.

This has also been made possible thanks to the support of the Clinical Audit Support Centre and the two Clinical Audit accreditations I have gained. These have given me the confidence, competence and credibility to better support fellow clinicians in undertaking Clinical Audit projects.

CLINICIAN VS. CLINICAL AUDIT LEAD

Trying to lead a Clinical Audit Programme as an additional duty alongside a full-time clinical role is certainly not ideal, but it can be done. People often ask me how I balance this and surely that I don't have enough time for both. My response is simple, and has been controversial. It's not all about seeing the patient. If that's all you ever did, you would never know if what you were doing was right. Trying to bring clinicians away from the frontline is on going challenge. In my experience, using Clinical Audit success projects, support from Team Leads and protected time can increase clinician engagement. Or simply my response is, "If you don't take time to measure it, you can't improve it".

FUTURE PLANS

Following the skills I have developed from the Clinical Audit Support Centre, there are plans to deliver training to the Clinical Audit Group of volunteers and a Trust-wide Clinical Audit training day for all Therapy staff in the spring of 2019.

Also, the Clinical Audit Group strongly believe that everyone should have the benefit of Clinical Audit training. Therefore, there are plans to create short Clinical Audit training videos that will be uploaded to the Physiotherapy YouTube channel.

#CAWW

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