

CLINICAL AUDIT IMPROVING PATIENT CARE: Clinical Performance Indicators in the London Ambulance Service NHS Trust

Joanna Shaw, Hannah Salvidge, Rachael Fothergill
Clinical Audit & Research Unit, London Ambulance Service NHS Trust



@Joanna.Shaw@londonambulance.nhs.uk
www.londonambulance.nhs.uk

2018

SUMMARY



3,500 clinicians
70 locations
1 million patients per year

The London Ambulance Service NHS Trust (LAS) is the UK's busiest ambulance service with over 3,500 clinicians, based at more than 70 locations, attending over one million patients every year. Ensuring a high standard of care and implementing change over such a large area is a particular challenge. To address this, and support quality improvement across the service, we used clinical audit methodology to develop a bespoke process: the Clinical Performance Indicators (CPIs).



Through the CPIs, first implemented in 2001, Paramedic Team Leaders review clinical patient records to assess compliance to standards of care in seven different clinical areas, plus documentation in general. The findings are used to provide direct feedback to all clinicians on areas for improvement and areas of good practice.



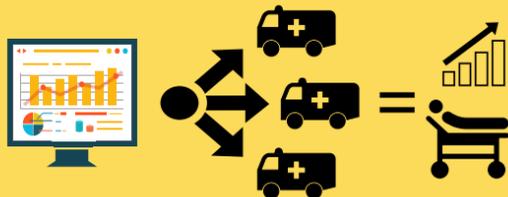
Standard of care monitored

- General documentation
- Cardiac arrest
- Difficulty breathing
- Glycaemic emergencies
- Discharged at scene
- Diagnosed psychiatric problem (introduced 2010)
- Severe sepsis (introduced 2016)

In 2006, we replaced our paper based system, creating a novel online database to facilitate monitoring, the collation of information for reporting to local management teams and individual clinicians, and allowing tailored face-to-face feedback.

IMPACT

This innovative approach to clinical audit, with the ability to share personalised clinical quality feedback to clinicians, has had a demonstrable positive impact on patient care in all seven areas of care audited.



General documentation		89%-97%	+8%
Cardiac arrest		89%-98%	+9%
Difficulty in breathing		87%-96%	+9%
Glycaemic emergencies		94%-97%	+3%
Discharged at scene		83%-97%	+14%
Diagnosed psychiatric problem		85%-92%	+7%
Severe sepsis		94%-97%	+3%

i We have also been able to develop recommendations for improvement and implement action plans at an organisational level.



The face-to-face feedback element of the CPI process ensures recognition is provided to clinicians performing well and presents the opportunity to discuss areas for improvement for others.



For a workforce that spends every shift on an ambulance, never in a static location, the CPIs allow all clinicians to engage in clinical audit and participate in continued professional development. The CPIs also allow paramedics to meet their HCPC requirement to 'be able to assure the quality of their practice'.

FUTURE PLANS

Respond to clinical priorities



We will continue to develop the CPIs, being responsive to the clinical priorities of the LAS. In April 2018, we launched a new Elderly Falls CPI and updated our Mental Health CPI to include patients with undiagnosed psychiatric problems. We also added functions to the database to initiate safeguarding referrals and escalate for further review any clinical safety concerns identified by the auditors.

Continue feedback



We will continue this rolling programme of clinical audit to facilitate clinicians receiving both positive and constructive feedback on their clinical practice and assure the organisation of the standard of care delivered to our patients.

Share learning



We will continue to share the learning amongst UK ambulance services, the wider NHS, and academic community. It is important for others to understand how we have overcome the challenges of undertaking clinical audit on such a large scale both geographically and in terms of staff numbers.

Influence national measures



Our novel clinical audit methodology was adopted in 2008 at a national level by all ambulance services in England. In 2012, these national CPIs were used as the basis for the Department of Health's Ambulance Clinical Quality Indicators, which all ambulance trusts across England are mandated to participate, allowing national comparison. We continue to use learning from our CPI process to assist NHS England who are introducing a new care bundle measure for sepsis later in 2018.