

# Asthma Audit Development Project: Hospital pilot information

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## Contents

<b>Summary.....</b>	<b>1</b>
Pilot process summary _____	1
<b>Introduction and background.....</b>	<b>2</b>
What it will cover _____	2
Timescales _____	2
<b>Hospital pilot.....</b>	<b>3</b>
Why should I register as a pilot hospital? _____	3
What will be required of pilot hospitals? _____	3
Lead identification .....	4
Inform Caldicott Guardian .....	5
Dataset completion and submission .....	5
Feedback .....	6
Case studies .....	6
Will I be required to submit identifiable information? _____	6
How do I register my hospital for the pilot? _____	6
What about professionals and organisations not involved in the hospital pilot? _____	6
<b>Other information and updates.....</b>	<b>6</b>
<b>Caldicott approval form .....</b>	<b>7</b>

## Summary

This document provides information on the Asthma Audit Development Project hospital pilot process to support hospitals interested in participating in the pilot and their Caldicott guardians. It includes information on the project itself, what the pilot will require, what information will be collected and processes that should be followed by pilot hospitals.

## Pilot process summary



## Introduction and background

A key recommendation from the National Review of Asthma Deaths (NRAD) national report [‘Why Asthma Still Kills’](#) was that *‘a national ongoing audit of asthma should be established, which would help clinicians, commissioners, and patient organisations to improve asthma care’*. As a result, the Healthcare Quality Improvement Partnership (HQIP), on behalf of NHS England and Wales, will be commissioning a national audit of asthma and COPD care to commence in the Spring of 2018, with the intent that these will be administered jointly. However, it is recognised that each audit will cover separate populations with different audit questions.

In preparation for this, HQIP have commissioned the Asthma Audit Development Project, to inform the specification of, and conduct some of the foundation work needed for, the asthma element of the audit and appointed the Royal College of Physicians (RCP) to undertake it. The Clinical Effectiveness and Evaluation Unit are managing the project on behalf of the RCP.

The development project aims to provide robust and informed recommendations on how a national asthma audit should be conducted by exploring areas which would benefit from audit and then designing and piloting the proposed methodology and datasets within active clinical settings.

## What it will cover

Work will explore both paediatric and adult audits and be mainly focused on secondary care. However, it will also investigate data linkage opportunities with existing Primary Care, Ambulance, Pharmacy and Patient Reported Outcome Measures (PROMs) datasets in order to provide a complete picture of the asthma care pathway.

## Timescales

- **November 2016:** start of development project.
- **November 2016 – February 2017:** Phase 1 – exploration of data collection options and examination of the use of PREMs and PROMs in a national audit.
- **March 2017:** findings from phase 1 of the project to be shared with stakeholders.
- **May 2017 – January 2018:** Phase 2 – developing datasets and piloting audits to further refine methodology.
  - **Summer 2017:** Dataset consultation
  - **Autumn (likely to be September 2017):** Hospital pilot of datasets
- **February 2018:** final report of the project.

Further information on the project can be found on our webpages [www.rcplondon.ac.uk/naadp](http://www.rcplondon.ac.uk/naadp).

## Hospital pilot

Between June and September 2017 the asthma team will be recruiting pilot hospitals within England and Wales for an autumn 2017 pilot to test all proposed audit questions in a real-life clinical setting. Data will be collected at the point of discharge to reduce clinical burden.



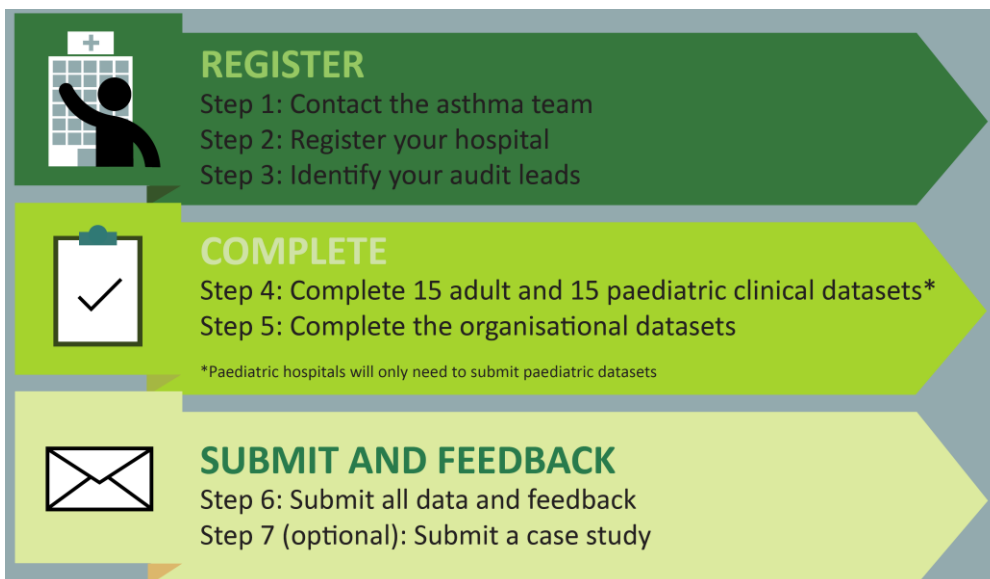
### Why should I register as a pilot hospital?

Being a pilot hospital will provide you and your team with a unique opportunity to be involved and acknowledged in the development of the national asthma audit. It will provide you with the chance to test and provide insight and feedback on proposed audit questions and play an active role in improving the care that your asthma patients receive. All team members actively involved in the pilot will be acknowledged in the final report and receive a certificate of participation.

- ✓ You will have the unique opportunity to help develop a national asthma audit
- ✓ You are helping to improve the care asthma patients receive
- ✓ You have the chance to review and feedback on the proposed audit questions

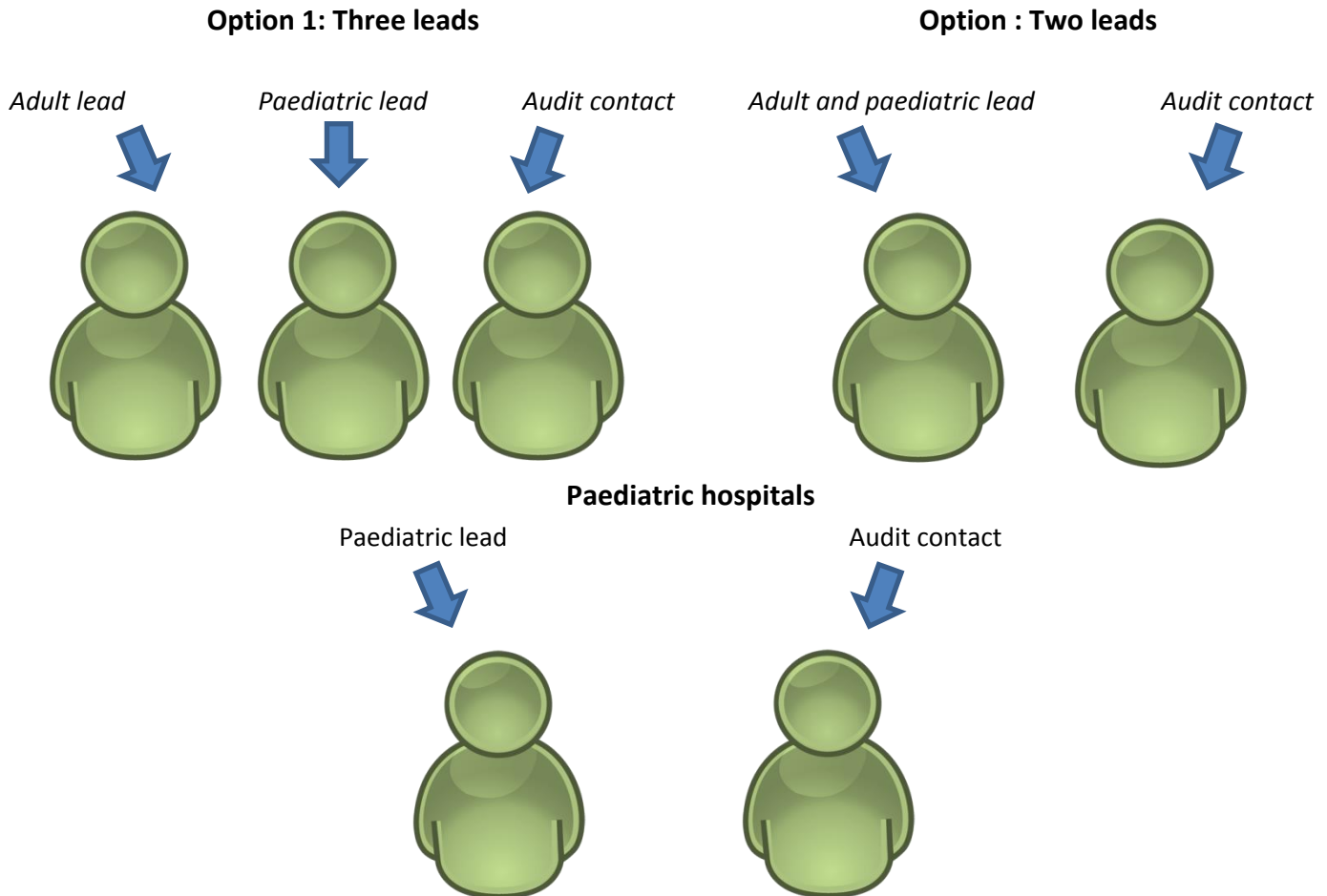
### What will be required of pilot hospitals?

The pilot will take place for approximately a four week period, is likely to start in September 2017, and will involve pilot hospitals collecting and submitting information on acute admission processes, specialist review, discharge bundles and respiratory service structure and resource. Separate clinical and organisational audit proformas are being developed for both adult and paediatric services.



### Lead identification

Depending on the structure of your respiratory service, post-registration you will be required to identify two or three leads who will be responsible for completing and submitting the datasets and feedback to the asthma team. At least one of these leads should be of a suitable seniority to clinically sign off the data and one should be a member of the hospital audit department. We recommend one of the following options but appreciate one size will not fit all:



All lead details (see below) should be sent to the asthma team for their records and to ensure they receive all relevant project information.

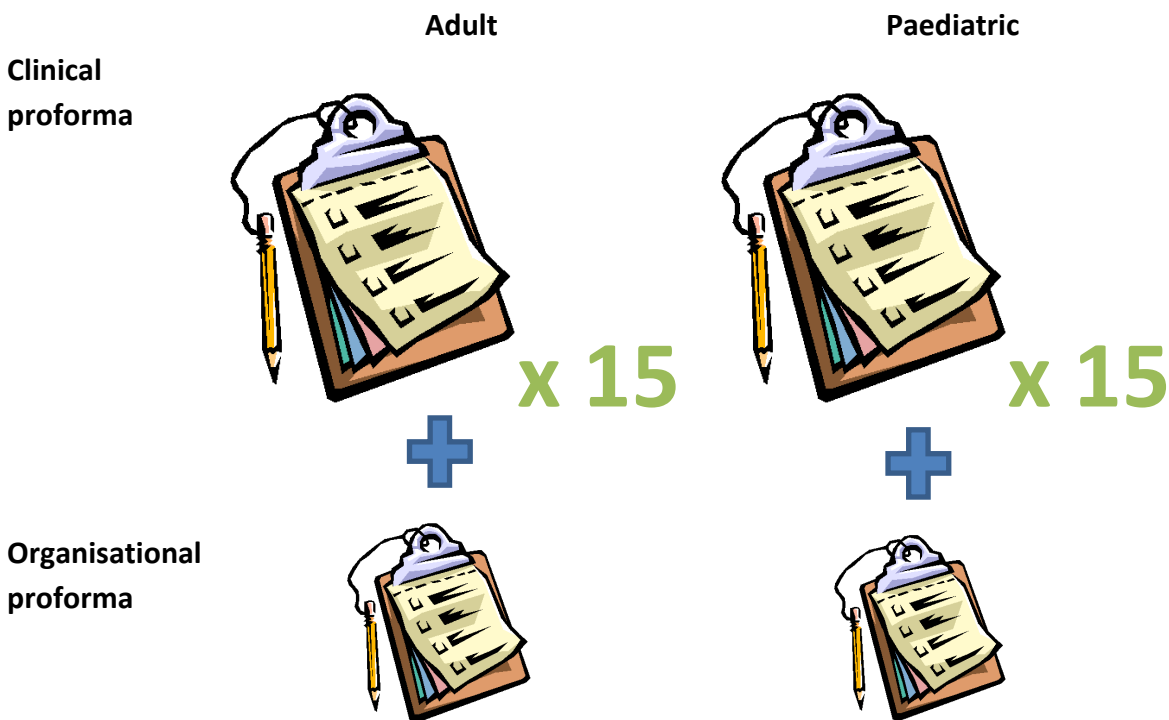
Pilot hospital name:  
Title: *Doctor, Professor, Mr, Mrs*  
Name: *First and surname*  
Job title:  
Department: *Respiratory, Asthma, Audit*  
Email:  
Contact number:  
Address:

### *Inform Caldicott Guardian*

We would encourage all pilot hospitals and leads to inform their Caldicott Guardians of this project, their intention to participate in the pilot process and share this document with them. We have included a Caldicott Guardian approval form on page 6 should you require it.

### *Dataset completion and submission*

Pilot hospitals will be asked to complete and submit clinical audit proformas for **15 adult and/or 15 paediatric asthma patients** (we understand that hospitals providing paediatric care only will only be able to submit paediatric proformas) admitted to their hospital within the pilot period. In addition they will also be asked to complete and submit **adult and / or paediatric organisational audit proformas**.



*It is expected that the adult asthma and COPD organisational audits will be run as one, therefore pilot hospitals will only be asked to test new, asthma specific questions for this dataset.*

Each dataset document will be formatted to allow for electronic completion, however alternatively hospitals will be provided with an excel data entry template or have the option to scan in hardcopy proformas to submit via email.

**Hospitals who would like to participate in the pilot process but are concerned about the requirements outlined above can contact the asthma team on either 020 3075 1769 or [asthmaauditdevelopmentproject@rcplondon.ac.uk](mailto:asthmaauditdevelopmentproject@rcplondon.ac.uk) to discuss further.**

### Feedback

At the beginning of the pilot process each pilot hospital will be provided with feedback form where they will be asked to note down:

- Wording of the questions, particularly if there is any ambiguity or lack of clarity
- Any issues encountered or concerns with answering potential questions
- If answer options are not comprehensive
- Ease of retrieval of information
- Clarity provided by *rationale* and *help text*

We recommend that one feedback form is completed per dataset type e.g. clinical adult, clinical paediatric, organisational adult and organisational paediatric. **Do not** submit one feedback form per patient. Feedback form(s) should be returned to the asthma team along with the completed datasets.

### Case studies

We will be asking pilot hospitals, as an optional step, to submit case studies on how they have intergrated the new asthma audit process into their clinical practice. These will be used as examples of good practice within the project report and audit materials for the national asthma audit.

### Will I be required to submit identifiable information?

No. The pilot will not require you to collect and submit patient identifiable information and the data collected will not be linked to any other sources. The purpose of the pilot is only to test the proposed core audit questions and methodology. A small-scale analysis of the data will take place but to verify the results and ensure the data being produced is fit for purpose.

### How do I register my hospital for the pilot?

Contact the asthma team on 020 3075 1769 or [asthmaauditdevelopmentproject@rcplondon.ac.uk](mailto:asthmaauditdevelopmentproject@rcplondon.ac.uk).

### What about professionals and organisations not involved in the hospital pilot?

Healthcare professionals and organisations not directly involved in the hospital pilot will have the opportunity to contribute by means of a public consultation process which will take place during summer 2017.

### Other information and updates

For regular updates and information on the project follow @NatCOPDAudit and @RCPLondon on twitter.

The following organisations are also including updates in their newsletters and e-bulletins:

- Association of Respiratory Nurse Specialists (ARNS)
- Asthma UK
- British Lung Foundation
- British Thoracic Society
- College of Emergency Medicine
- PICANET
- Paediatric Intensive Care Society
- Primary Care Respiratory Society
- Royal College of Nursing
- Royal College of Physicians
- Royal College of Paediatrics and Child Health
- Royal College of General Practitioners

## Caldicott approval form

*For use only if required. Please ensure to send the asthma team a copy of the signed form if approval by your Caldicott Guardian is required.*

Caldicott Guardian details	Pilot hospital and lead details
Name: Job title: Trust name: Hospital name: Address:  Contact number: Email address:	Hospital name: Lead 1: Lead 2: Lead 3(if applicable): Address:  Contact number:
<p>I hereby confirm that I am aware of the Asthma Audit Development Project and the aforementioned hospital and lead's intention to participate in the pilot process for the project in Autumn 2017.</p> <p>I understand that this project does not require the collection or submission/transfer of patient identifiable information and that data will not be linked to any other sources. I am happy with the process outlined within the hospital pilot information document.</p> <p><b>Signature:</b>  <b>Date:</b></p>	
<input type="checkbox"/> I would like to receive a copy of the pilot datasets when they are made available to the pilot hospital leads.	