



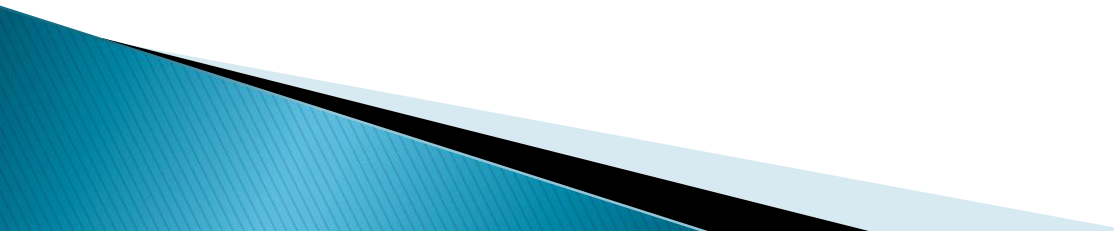
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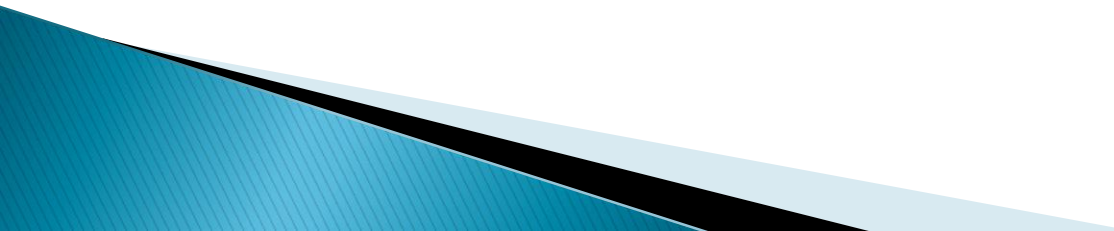
## Healthcare Audit: Quality Assurance and Verification Division

**The role of the Healthcare Audit Service in providing *assurance* to the National Director QAVD and the Senior Management Team.**

# The Healthcare Audit Service

- ▶ Who we are
  - ▶ What we do
  - ▶ How we do it
- 

## ***ENSH - Global Standard and Implementation Criteria***

- ▶ Standard 1 (Governance and Commitment), Implementation criterium 1.5: The healthcare organisation seeks relevant representation to develop and to implement a strategy and action plan based on the self-audit and policy monitoring and evaluation results, and,
  - ▶ Standard 8 (Monitoring and Evaluation) The healthcare organisation monitors and evaluates the implementation of all the ENSH-Global standards at regular intervals.
- 



**Audit can be Uncomfortable**

# Who we are

- ▶ Situated in QAVD, we have a national remit to audit the delivery of health services
- ▶ Team – currently 10 auditors from clinical and non-clinical backgrounds led by an Assistant National Director with responsibility for Assurance
- ▶ The Healthcare Audit Team was created in 2010

# What we do

## *Assurance : “Confidence through Evidence”*

- ▶ Our core aim is to contribute to the HSE Assurance Framework by seeking evidence to provide assurance that services are delivering quality care in a safe environment
  - ▶ We deliver an independent review process
  - ▶ A key focus for us is to provide learning that can be shared across the organisation
- .....



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# What we do (continued)

## *Assurance : “Confidence through Evidence”*

- ▶ We identify areas of good practice and excellence
- ▶ We identify the reasons why standards are not met, and,
- ▶ We develop recommendations to inform quality improvement
- ▶ Our recommendations are tracked, monitored and reported to senior accountable national directors and the HSE Risk Committee

# Four levels of assurance

- ▶ **Level 1: Service delivery level - Self assessment**
- ▶ **Level 2: HCA – Independent assurance across the health service system auditing the degree to which standards for health and social care activity are met**
- ▶ **Level 3: HSE *Internal Audit* responsible for evaluating and reporting on the overall system of internal control**
- ▶ **Level 4: External independent assurance, e.g., HIQA, Mental Health Commission , Comptroller and Auditor General**





# What we do

- ▶ **Examples of 2016 audits:**
- ▶ **Audit of compliance with the implementation of recommendations listed in the HIQA (2015) report Linking Learning to National Standards**
- ▶ **Audit of compliance of the management of serious reportable events (SREs) in acute, primary and social care services with the HSE Policy for Safety Incident Management**
- ▶ **Audit of incident reporting and learning in radiotherapy as outlined in section 3 of the Medical Exposure Radiation Unit's (MERU) Patient Radiation Protection Manual**
- ▶ **Audit of compliance with implementation of multidisciplinary clinical handover in Maternity Services as per National Clinical Guideline (2014)**



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# How we do it

**A clear HCA procedures manual underpinned by standard templates designed around *audit phases*:**

- ▶ *Audit Request Phase*: Audits accepted from national level
- ▶ *Scoping and Planning Phase*: Audit Plan
- ▶ *Fieldwork Phase*:
  - Requests for Evidence and review of same
  - Site visits and review of evidence from same
- ▶ *Post Fieldwork Phase*:
  - Audit Report: findings, level of assurance, recommendations
  - Exit meetings, ongoing review and ? re-audit



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# Evidence


- ▶ Primarily obtained through the examination of documents and records, e.g., PPPGs, healthcare records, meeting agendas and minutes, education and training records, etc.
- ▶ Through semi-structured interviews
- ▶ Observations of conditions on site

**Reliable + Relevant + Sufficient**

# **Tobacco Free Health Service Audit 2014**

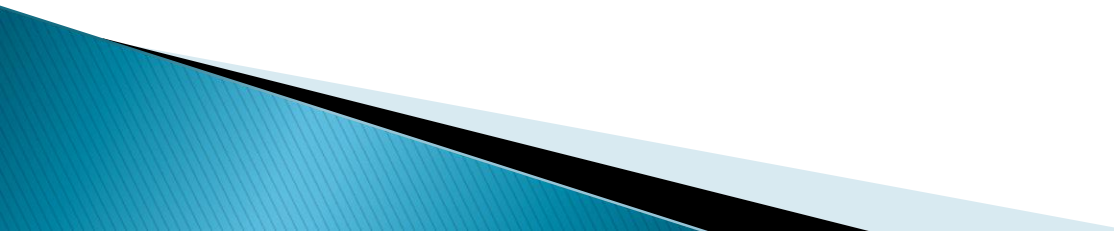
**Audit of Compliance with selected European Network of Smoke Free Health Services - Global Standards/ Criteria and the HSE Tobacco Free Campus Policy of the Tobacco Control Framework, 2013.**

# Tobacco Free Health Service Audit 2014

- ▶ **Objective 1:** Determine if tobacco is on the agenda of site senior management team meetings by seeking evidence that a local Tobacco Free Campus (TFC) Framework Group is in place, active and compliant with the following ENSH - Global Standards: Standards 1.1, 1.3, 1.4 and 1.5.
  - ▶ **Objective 2:** Establish if tobacco is seen as a healthcare issue by front line staff by determining the degree to which ENSH - Global Standards are met: Global Standards 3.3, 3.4, 4.1, 4.4 and 4.5.
  - ▶ **Objective 3:** Actively observe if patients, staff or others are smoking anywhere on campus at the time of audit and/or if there is evidence of non compliance with the Policy. If there is evidence of non compliance determine if the associated documentation has been completed: Global Standards 5.1 and 5.5.
  - ▶ **Objective 4:** Identify areas of good practice and areas where improvement is required.
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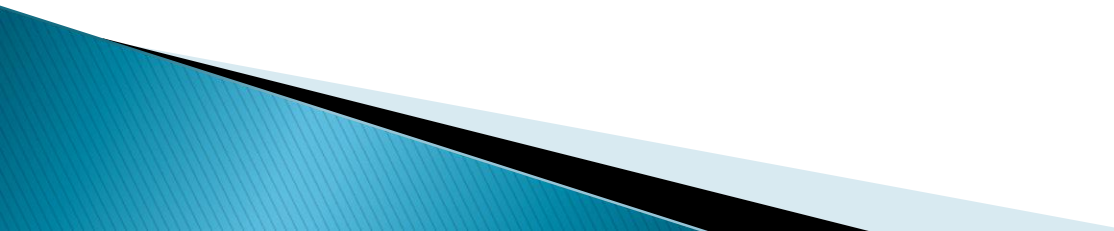
# Tobacco Free Health Service Audit 2014

## CONCLUSION:

- ▶ The level of compliance ranged from compliant to non-compliant with the ENSH - Global Standards.
  - ▶ All eight sites demonstrated a reasonable level of good practice in relation to tobacco control; deficits were noted that require action to increase compliance with ENSH - Global Standards.
  - ▶ There is a high level of variation in the documentation, terminology and signage used, this needs to be addressed nationally to create an effective TFC brand.
  - ▶ There was evidence that the majority of sites had made significant progress in their work to-date towards a completely tobacco free environment.
- 

# Tobacco Free Health Service Audit 2014

## RECOMMENDATIONS ( National):

1. National standardised terminology for the Tobacco Free Campus must be agreed and implemented by the Tobacco Control Framework Implementation Group.
  1. National standardised signage for the Tobacco Free Campus must be agreed and implemented by the Tobacco Control Framework Implementation Group.
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**Moving HSE towards a more  
risk-averse organisation**



**QUESTIONS??**