

**2022 EXIT EXAM  
PRE-EXAM WORKSHOP  
CLINICAL AUDIT  
SEGMENT**

**DR ALFRED KWONG**  
COORDINATOR,  
CLINICAL AUDIT SEGMENT

# CLINICAL AUDIT REPORT

- FOUR printed copies required
- A word file (.doc or .docx) of audit report including all appendices (submitted by email to [exit@hkcfp.org.hk](mailto:exit@hkcfp.org.hk) )
- Certification by clinical supervisor
- Submit on or before **3 January 2022**

## STARTING FROM 2012

- The audit topic should not have been done in the practice in the preceding 5 years.
- At least one audit criterion is outcome-based and must be stated clearly in the audit report

## STARTING FROM 2016

- The starting date of Audit cycle must be **within 3 years** before the application deadline of Exit Exam

## STARTING FROM 2018

- Presentation in Clinical Audit & Research Forum (Mandatory from 2019 onwards).

## STARTING FROM 2022

- The text should be between **5,000 and 8,000 words** in length, excluding the references and acknowledgements.

# CLINICAL AUDIT ASSESSMENT CRITERIA

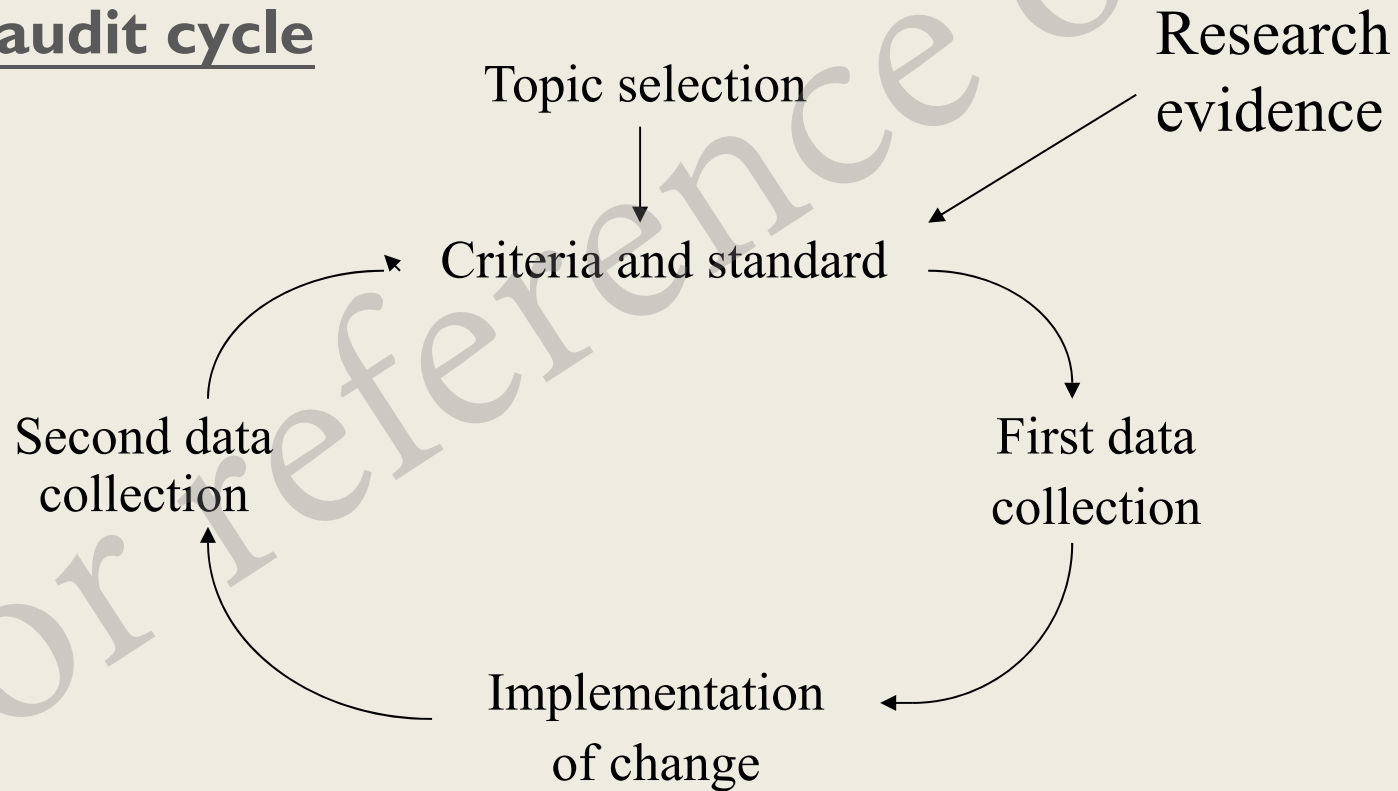
**Is this a clinical audit?  
( Essential )**

Clinical audit is the process of critically and systematically assessing our own professional activities with a commitment to improving personal performance and, ultimately, the quality and/or cost-effectiveness of patient care.

( Fraser, 1982 )

# Has the audit cycle been completed? ( Essential )

## The audit cycle



# EVALUATION OF THE BACKGROUND OF THE AUDIT PROJECT

- Choice of the audit topic
- Define the aim
- Objectives
- Background literature review

# SELECTING A TOPIC

- Common
  - the condition
  - problem in care
- Important
  - impact on patients
- Convincing evidence is available about appropriate care
- Feasible
  - to undertake the audit
  - to improve care

# AUDIT CRITERIA (1)

- **Explicit statement about what to measure**
- **Types**
  - structure
  - process
  - outcome



# AUDIT CRITERIA (2)

**Audit criteria must be :**

- based on evidence
- prioritized
- measurable and explicit
- appropriate to the setting

# AUDIT CRITERIA (3)

Methods :

- directly from literature
- from summary of evidence
- e.g. good systematic review/good quality guidelines
- from evidence-based audit protocol if available

# AVAILABLE EVIDENCE-BASED AUDIT PROTOCOL

- Management of chronic diseases:  
DM /HT /asthma /gout /heart failure /angina  
/depression
- Management of acute illness:  
Acute otitis media
- Drug use: New /long term use of benzodiazepines
- Smoking cessation
- Home visits /repeat prescription /patient access to GP

# SETTING OF STANDARD

- What level of performance is expected
- The percentage of events that should comply with the criterion
- Set standard for each criterion
- Should be realistic, attainable and reflect the importance of the criterion

# COLLECTING DATA (1)

- **Define study population**
- **Sources**
  - records, patients, encounter forms
- **Samples**
  - adequate numbers, representative
- **Collection**
  - data collection forms

# COLLECTING DATA (2)

- **Analysis**
  - % of cases in accordance with the criteria
- **Presentation of results**
  - clear
- **Twice - before and after change**

# IMPLEMENTATION OF CHANGE (1)

- Identify areas of deficiencies in first cycle and the underlying causes
- Team work approach
- Use of multifaceted interventions chosen to suit the particular circumstances

# IMPLEMENTATION OF CHANGE [2]

**Some common strategies :**

- - Feedback
- - Education/training
- - System changes
- - Reminder system
- - Policies/guidelines
- - Team changes



# WRITING UP

- Report in a systematic way
- Clear and understandable language
- Appropriate presentation of result
- Concise summary of key issues, impact
- List of references

**Thank you!**

for reference only