

M10: How well the systems of review and audit were maintained, and how they functioned in practice

11 The only audit data I was aware of was that on the PATS system. It was only as good as the input data and that was limited due to who was loading in the data. I do recall being aware that some staff were not entering the required information. It was difficult for them as there was one PC in the theatre, and I think there may have been one in ITU, but it was a very lengthy process. The data collected was for adults only. Mr Jon Hutter introduced this system, he was very committed to it and worked hard to introduce it to the Directorate. When Robin Kinsman was employed as Information Officer, the PATS system became very effective as a new way of collecting the data was introduced to ensure accuracy throughout a patient's stay. I know that other clinical departments in the BRI are examining the possibility of using the PATS system.

M11: Whether (a) the structures set up; and (b) the manner in which they were, in practice, operated and run, met the professional and contractual standards and obligations imposed on the clinicians and upon the BRI, at the relevant time

12 I have no knowledge of this.

M12: The success or otherwise of the systems of audit and review in place at the time, in:

- a) **improving the quality of care or services;**
- b) **detecting any areas or respects in which the services provided fell short or that which was acceptable, and devising and implementing solutions**

13 I am not able to comment on systems of audit for medical staff. As for nursing audit, a level of expertise was required to undertake audit; diploma or degree nurses may have had these skills. Difficulties arose in conducting audit due to constraints of clinical work or other roles, which led to difficult decisions about what came first.

Sometimes nursing staff were so busy caring for patients, it was difficult to find time or spare pairs of hands to carry out audit.

- 14 The nursing audit that I recall taking part in was lead by a senior nurse in Trust HQ. I was to examine pressure area care and the audit was conducted once a year. Results were fed back to the clinical areas.
- 15 Another nursing audit I recall being involved in was into "professional nursing issues" and this took place once a year. This was directed by senior nursing management. It was very lengthy. I conducted the audit for ward 5A and 5B. It consisted of, I briefly recall, 10-12 questions about drug keys, nursing documentation, policy manuals etc. A large percentage of staff were asked each question, which is why it took the length of time. I do not recall receiving feedback from this audit.

Signed

Fiona Thomas
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Dated

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