

**M10 - HOW WELL THE SYSTEMS OF REVIEW AND AUDIT WERE  
MAINTAINED, AND HOW THEY FUNCTIONED IN PRACTICE.**

**A PRIOR TO 1989-90**

The systems of audit were not consciously maintained but they functioned through the commitment and interest of the practitioners within the group as has been described earlier. It is my view that (a) in this period the interest of our group in audit activities was in advance of most other specialities in our group of hospitals, and (b) compared to similar units in other hospitals at that time our activities were at least as good as the average of those. I acknowledge that there is no clear way of measuring them and confirming such an assertion. Throughout this period audit activity was evolving slowly.

**B AFTER 1990**

As a result of the White Paper etc. our interest in audit became more focused and the continued development of audit has been described above, both in general terms and in terms of the paediatric cardiac surgical team. With the paediatric cardiac team it was well maintained but could probably have been better at the following points:

1. Had we had the resources to have a proper, computerised database then our audit would have been greatly facilitated.
2. Had we recognised earlier the need to set out, analyse, and report figures for individual clinicians and not just the unit, our audit would have been more effective.