

Letters

Dear Editor

A code of good practice for clinical audit professionals

I welcome the code of good practice for clinical audit professionals.¹ As someone who has been involved in clinical audit for more than ten years, I am aware of the need for a universal set of principles that could be adopted as standards of good practice across the profession. We have certainly awaited the development of these for many years without avail. The document is very much relevant in the context of today's NHS, with the prevailing focus on public and professional accountability. Within a wider context, the Nolan Committee's report on *Standards in Public Life* states that public life should be more openly scrutinised, that high standards of conduct are required and that those working in public life should endeavour to meet those standards.² In particular, it is recommended that all public bodies should adopt codes of conduct incorporating these principles. A number of high profile cases in the NHS during the past five years, such as the Bristol Royal Infirmary case, have also renewed calls for more stringent procedures regarding professional conduct in the NHS.³ Clinical governance, itself, is defined as a system in which professionals are accountable for improving the quality of healthcare they deliver to patients. Thus, it seems entirely apt that a code of conduct should be made available for those working in clinical audit, particularly when one considers that such professionals are often operating in areas of potential sensitivity.

The principles contained in the code will be familiar to many. It might be assumed that they should be embedded in the psyche of those working in clinical audit. However, as misconceptions about the purpose of clinical audit and its execution still exist, the value of the code would seem to be its ability to generate understanding and a common approach across the wider health community to undertaking audit. It is also significant that the code includes a series of endorsements from key organisations that were involved in the consultation process, such as the Commission for Health Improvement (CHI).

The South East Clinical Effectiveness Network (SECEN) hopes that this document will be deemed useful enough to be adopted by healthcare organisations. Perhaps SECEN members should have

taken one step further and recommended that it should form an addendum to the contract of employment for clinical audit professionals, in line with the *Code of Conduct for NHS Managers*.⁴ This latter code was announced by Nigel Crisp, NHS Chief Executive, in October 2002, and is now being implemented by NHS organisations, making it a mandatory part of the terms of service for managers. A move such as this would strengthen the applicability of some of the SECEN's principles, particularly those related to safeguarding standards of care. In order to be truly effective, these do need to have explicit links with the corporate governance arrangements of the employing organisation. In particular, one can think of 'whistleblowing' and 'cause for concern' procedures for reporting concerns that staff may have. These can be especially difficult issues for staff to deal with and require a reasonably confident knowledge about the policies themselves, and also some reassurance that staff concerns will be taken seriously and dealt with in a confidential and responsible manner.

The code of conduct for clinical audit professionals is a useful start in assisting staff in understanding their responsibilities in undertaking clinical audit and, at £2.50 for a copy, is a worthwhile investment for any NHS organisation. The key recommendation is that it should be used alongside the existing job descriptions and employment contracts of clinical audit staff and it may even identify the need to have these updated, in line with current good employment practice.

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REFERENCES

- 1 Green P, Jones J and Love M; Stannard D (ed) (2003) A code of good practice for clinical audit professionals. *Quality in Primary Care* 11 (1): 5–7.
- 2 Nolan Committee (1996) *Standards in Public Life*. The Stationery Office: London.
- 3 The Bristol Royal Infirmary Inquiry (2001) *Learning from Bristol: the report of the public inquiry into children's heart surgery at the Bristol Royal Infirmary 1984–1995*. Cm 5207. The Stationery Office: London.
- 4 Department of Health (2002) *Code of Conduct for NHS Managers*. Department of Health: London.