# Clinical audit strategy template

Each service should have a strategy for clinical audit in place which identifies how the undertaking ensures the essential criteria for clinical audit are managed in that service. This clinical audit strategy may be a simple document or very detailed depending on the scale of the organisation and the level of radiological risk in the service. An example of a template which may be used is provided here.

|  |
| --- |
| **Assurance, Oversight, Resources** |
| **Management and responsibilities - who is responsible?**  This section should outline the service’s commitment to the delivery of safe and effective services, how it supports clinical audit as a tool through which the quality and safety of services can be improved and assured. This section should detail who has oversight for clinical audit, the resources in place for clinical audit and the time period the strategy applies to, for example, the next three years. |
| **Communication, Teamwork** |
| **Personnel - who does it?**  This section should detail the staff with direct responsibility for clinical audit to ensure the quality and safety of services they provide. This strategy should also identify that all staff working in the service have responsibility for clinical audit and it should detail how communication around clinical audit takes place. |
| **Focus, coverage** |
| **Prioritisation and schedule - what should be done and when?**  This section should detail to what extent clinical audit is carried out, including what is audited, how audits are prioritised, planned and agreed, and how often audits are conducted. |
| **Tools, action** |
| **Method - how will it be done?**  This section should outline how the service will implement clinical audit, what the agreed approach to clinical audit is and what methods and tools will be used. How progress with audit recommendations is ensured should also be included. |